UNIVERSITY OF CAPE COAST

ASSESSING MULTICULTURAL COMPETENCE OF COUNSELLORS IN
PUBLIC UNIVERSITIES IN GHANA

EBENEZER KOBINA MENSAH

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UNIVERSITY OF CAPE COAST

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PUBLIC UNIVERSITIES IN GHANA

BY

EBENEZER KOBINA MENSAH

Thesis submitted to the Department of Guidance and Counselling, Faculty of
Educational Foundations, College of Education Studies of the University of
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Philosophy degree in Guidance and Counselling

JUNE 2019
DECLARATION

Candidate’s Declaration

I hereby declare that this thesis is the result of my own original research and that no part of it has been presented for another degree in this university or elsewhere.

Candidate’s Signature ........................................ Date ..............................
Name: ........................................................................................................

Supervisors’ Declaration

We hereby declare that the preparation and presentation of the thesis were supervised in accordance with the guidelines on supervision of thesis laid down by the University of Cape Coast.

Principal Supervisor’s Signature......................... Date .........................
Name: ........................................................................................................

Co Supervisor’s Signature................................. Date ..............................
Name: ........................................................................................................
ABSTRACT

Multicultural issues are undeniably part of counselling. The growing ethnic inclusion in Ghanaian public universities highlight counsellors’ need to be trained to deliver proficient and appropriate service area to accommodate the needs of clients in the future. The main aim of this study was to assess counsellor multicultural competencies and find cultural-contextual factors influencing counselling as well as investigate possible association(s) among counsellors’ cultural competence domains. The study adopted the descriptive survey design and mainly questionnaire to obtain data. A sample of 45 counsellors was used for the study comprising 25 male counsellors and 20 female counsellors. These counsellors were selected from four public universities in Ghana. Generally, counsellors from the selected public universities were found to have a low multicultural counselling competence. The results of the one-way multivariate analysis (MANOVA) test indicated that there was no statistically significant difference in counsellors’ multicultural competence based on gender. The results of the study showed Ghanaian cultural beliefs informs the counselling technique selection during the counselling process. Also, the study showed that cultural-contextual factors improve counselling process. From the results obtained, it is recommended among others that counsellors should capitalise on the low multicultural counselling competence to attend multicultural awareness training programme pertaining to Ghanaian cultural beliefs and ethnic diversity in order to increase their competence. Also, multicultural counselling should be infused in counselling programmes and training in Ghana.
KEY WORDS

Awareness
Culture
Cultural-contextual factors
Knowledge
Multicultural counselling competence
Skills
ACKNOWLEDGEMENTS

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DEDICATION

This work is dedicated to my family for their encouragement and support during the course of my studies.
# TABLE OF CONTENTS

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>DECLARATION</td>
<td>ii</td>
</tr>
<tr>
<td>ABSTRACT</td>
<td>iii</td>
</tr>
<tr>
<td>ACKNOWLEDGEMENTS</td>
<td>v</td>
</tr>
<tr>
<td>DEDICATION</td>
<td>vi</td>
</tr>
<tr>
<td>LIST OF TABLES</td>
<td>x</td>
</tr>
<tr>
<td>LIST OF FIGURES</td>
<td>xi</td>
</tr>
<tr>
<td>CHAPTER ONE</td>
<td>1</td>
</tr>
<tr>
<td>INTRODUCTION</td>
<td>1</td>
</tr>
<tr>
<td>Background to the Study</td>
<td>1</td>
</tr>
<tr>
<td>Statement of the Problem</td>
<td>6</td>
</tr>
<tr>
<td>Purpose of the Study</td>
<td>8</td>
</tr>
<tr>
<td>Research Questions and Hypotheses</td>
<td>8</td>
</tr>
<tr>
<td>Significance of the Study</td>
<td>8</td>
</tr>
<tr>
<td>Delimitation</td>
<td>9</td>
</tr>
<tr>
<td>Limitations</td>
<td>10</td>
</tr>
<tr>
<td>Organisation of the Study</td>
<td>10</td>
</tr>
<tr>
<td>CHAPTER TWO</td>
<td>12</td>
</tr>
<tr>
<td>LITERATURE REVIEW</td>
<td>12</td>
</tr>
<tr>
<td>Introduction</td>
<td>12</td>
</tr>
<tr>
<td>Theoretical Review</td>
<td>13</td>
</tr>
<tr>
<td>Conceptual Review</td>
<td>25</td>
</tr>
<tr>
<td>Multicultural Counselling Competencies</td>
<td>25</td>
</tr>
<tr>
<td>Ghanaian Cultural Values</td>
<td>41</td>
</tr>
<tr>
<td>Cultural-Contextual Factors</td>
<td>52</td>
</tr>
<tr>
<td>Basic Counselling Skills</td>
<td>58</td>
</tr>
<tr>
<td>Empirical Review</td>
<td>62</td>
</tr>
<tr>
<td>Conceptual Framework</td>
<td>69</td>
</tr>
<tr>
<td>Summary of Literature Review</td>
<td>71</td>
</tr>
<tr>
<td>CHAPTER THREE</td>
<td>74</td>
</tr>
<tr>
<td>RESEARCH METHODS</td>
<td>74</td>
</tr>
<tr>
<td>Research Design</td>
<td>74</td>
</tr>
</tbody>
</table>
## LIST OF TABLES

<table>
<thead>
<tr>
<th>Table</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Counsellors in the Selected Public Universities</td>
</tr>
<tr>
<td>2</td>
<td>Description of the Sections on the CC</td>
</tr>
<tr>
<td>3</td>
<td>Reliability Estimates of the Section on the CC Section</td>
</tr>
<tr>
<td>4</td>
<td>Gender of Participants</td>
</tr>
<tr>
<td>5</td>
<td>Number of Multicultural Courses completed and Workshop Attended</td>
</tr>
<tr>
<td>6</td>
<td>Knowledge Section</td>
</tr>
<tr>
<td>7</td>
<td>Skills Section</td>
</tr>
<tr>
<td>8</td>
<td>Awareness (Attitude-Belief) Section</td>
</tr>
<tr>
<td>9</td>
<td>Overall Section Means and Standard deviations on the CC Based on Gender</td>
</tr>
<tr>
<td>10</td>
<td>Influence of Ghanaian Cultural Beliefs on Counselling Techniques</td>
</tr>
<tr>
<td>11</td>
<td>Cultural-contextual Factors Influencing Counselling</td>
</tr>
<tr>
<td>12</td>
<td>MANOVA Test for Counsellors’ Cultural Competence</td>
</tr>
<tr>
<td>13</td>
<td>Association(s) Among CC Sections</td>
</tr>
</tbody>
</table>
### LIST (OF FIGURES)

<table>
<thead>
<tr>
<th>Figure</th>
<th>Description</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Influence of culture on counselling</td>
<td>70</td>
</tr>
<tr>
<td>2</td>
<td>Correlation among CC Sections</td>
<td>111</td>
</tr>
</tbody>
</table>
CHAPTER ONE
INTRODUCTION

Multicultural counselling emphasises the difference between clients and counsellors due to ethnic backgrounds, beliefs, values, sexuality, social economic status, worldviews, and religious/spiritual orientation. While not particularly explored in Ghana, the significance of multicultural counselling to human service profession functionality is recognised worldwide to the extent that many, educational departments and institutions have dedicated organisational structures or units responsible for multicultural training. With well-developed cultural competency, counselling service providers have a better understanding of what motivates counsellees, such as religious or familial values and can utilise the skills that would create more meaningful connections with clients.

Background to the Study

A person’s cognition defines the cultural mindset, religious beliefs and way of life. Culture affords its adherents with a theoretical basis for the understanding of sickness and emotive misery. This proposes methods of therapeutic interventions which bode well in that cultural context. The theoretical conventions underlying the practice of counselling depend on models of human disposition, passionate troubling and therapeutic interventions which stem legitimately from the understood cultural conventions around the ‘self’ based on Euro-American cultures (Talib, 2010). This self is seen as an individualist, which makes the practice of counselling difficult in Ghana. The
practice of counselling will be effective when these assumptions are adapted and merged with the Ghanaian culture which views the self as collectivist.

A lot has been discussed about the influence of cultural variables on the counselling practice. In terms of psychological organisations, counsellors through the Association for Non-White Concerns in Personnel and Guidance and Multicultural counselling Development were the first to expansively discuss and examine issues of culture. (Sue et al., 1982).

The American Psychological Association (APA) likewise’ contribution towards the development of the field of multicultural counselling practices is worthy to be noted (Sue, Zane, Hall & Berger, 2009). The APA developed and adopted a Guideline on Multicultural Education, Training, Research, Practice, and Organisational Change for psychologists. This impacted the counselling services, instruction, teaching and inquiry (APA as cited in Sue et al., 2009). The framework for counselling practices are provided in the guidelines; counsellors are invigorated to relate culturally apt skills in their practices. Counselling practitioners must develop abilities and procedures that are tailored towards the distinctive beliefs and sociocultural experiences of clients. Counsellors, therefore, need to integrate the understanding of a client’s cultural foundation into the counselling process.

The realisation of the services in the field of counselling is reliant on the cultural foundations of an organisation within a particular society. For instance, Kaniasty and Norris (2000) opined that many interconnected elements in the counselling process, for example the accessibility of social help in which a person's deviation in the predisposition of dependence on social help systems in the midst of the challenges could be a mirror image of ethnic customs, beliefs
and values. In a wider extent, a country’s culture has a powerful effect on how individuals conduct themselves, thus playing a significant role in the development of the culture of an organisation. For this reason, it is essential to have a clear knowledge of acceptable counselling methods in Ghanaian culture. Then, it can be regarded too ‘Western’ and therefore deemed unacceptable (Talib, 2010). This is essential to note that some people may realise that the techniques used in counselling are too subtle. For example, principles of counselling guides the help-seeking process. This is obviously a multi-cultural structure of the construct. The organisation offering counselling services can influence the way it is practised, thus by the culture in which they are implemented.

Theories of counselling have been propounded in an environment based on Western culture. They give emphasis to the self-sense, the thought (cognitive), the behaviour (behavioural) or the family structure (Sue, Bingham, Porché-Burke & Vasquez, 1999). These theories place important emphasis individual theory, narrowing the aspects of human nature to diverse populations. This indicates that these theories virtually lacks the dimension of cultural diversity. Hence, it appears that a more complete theoretical approach to counselling practice is requisite to attain the requirements of Ghanaians who are diverse in ethnicity and tribes.

To Katz (1985), “White culture serves as a foundation for counselling theory, research, and practice” (p.615). For instance, theories of counselling hang on abstractions (intelligence and ego), circumstances (foundations) and consequent connections, direct logical philosophy and inferential thinking (testing and building of hypothesis). Conversely, Triandis (1990) indicated that
people who originate from collectivistic societies think consistently, replicate the views of elders, discover the root cause in the past and mystical happenings, are reliant and treasure inspirations in their culture and religious beliefs (Sodowsky, Kwan, & Pannu, as cited in Sodwsky, 2009). Accordingly, human manifestations in the form of behaviours direct problem-solving capabilities have influenced scholars in the arena of counselling to explore the self-determining factors they can handle and controlled. This, therefore, gives rise to the analyses and explanations they give to their findings and closely link it to the Western culture.

Notwithstanding, when culture is the focal point of discourse in a counselling situation, it characteristically enclosed a to the views of professionals of Western predominant culture, for example, the intellectual advancement of the distinct individual, individuality of the client, ability to control one’s self, being responsible, self-ideation, decisiveness, confidence, vocational preferences, leadership abilities, joy, or life fulfilment (Sodowsky, 2009). To Sodowsky, the counsellor assesses, whether quantitatively or qualitatively the capabilities of a person from a tribe or an ethnic group. Such measurements are in reference to the normal working of the Western standardised culture. The counsellor then general perceive how unique or what number of standard deviations from the main ethnic presentation of the person and discovers answers based on client’s cultural background.

The connection between parts of social personality, for example, adherence to cultural factors is identified with frames of mind towards counselling. Researchers in the field of counselling have noted that cultural factors such age, beliefs, customs, norms etc., justify the variation in attitudes
towards counselling (Mori, 2000; Yeh, 2003). These variations have inspired these researchers to intensify their multicultural capability when working with people from different ethnic/tribal groups.

The provision of good and effective services in the field of counselling is specifically challenging as a result of social and institutional impacts that define the form, structure and policies governing the service delivery.

Cultural variables such as customs, beliefs, values, norms, etc. ought to be reflected in the counselling process. Counselling itself is a socio-cultural occurrence that assumes an important function in the help-seeking process (Bernal & Scharroón-Del-Río, 2001). In addition, important concepts of culture may well clang with conventional principles characteristic to counselling theories. The potential for a challenge can be great as soon as an individual from a particular culture interrelates with another person, as a result, they both possibly come together with their parochial interest, anticipated viewpoint and stereotypes built on intellectual beliefs (Sodowsky, 2009).

Counsellors and clients must be always observant of distortions, misunderstandings and errors due to difference in communication styles among ethnic groups. Sodowsky (2009) stressed that the individual’s process of making a decision is consistently an unpredictable communication process and along these lines, ramifications of choices might be significant, particularly if a choice depends on socio-cultural misjudged data. Thus, it is significant for counsellors have some familiarity with the communication practices and styles that change diversely just as the probable effect of these distinctions in the process of rendering counselling services.
The multicultural nature and ethnic diversity of Ghana’s population makes it imperative that counsellors further examine the current guidance practices. Additional education through the workshop and seminar training for counselling professionals to be provided to enhance their therapeutic skills (Zane, Kim, Bernal & Gotuaco, 2016). A careful inquiry of Ghanaian counsellors’ multicultural abilities and the examination of cultural variables, the study explored the field of multicultural perspectives of counselling in Ghana.

From the above discussion, one can examine essential cultural trends and concepts prospective of been coming across in counselling by counsellors, highlighting certain ramifications of existing research. The presented propositions for additional study may promote culturally well-informed counselling practices in Ghana and recognising the weakness of Euro-American theories of counselling in Ghanaian context and bridge the gap between Western theories and Ghana’s culture.

**Statement of the Problem**

Multicultural counselling competence tenet is a central field to guarantee counsellors to exhibit competence in a culture of sensitivity, whole-hearted, positive, confidence as well as well-informed practices. Multicultural competence measurement is a multidimensional development involving the assessment of a counsellor proficiencies within a particular ethnic group (Hays, 2008). This assessment ensures the mindfulness of control problems among tribes in a reaction to a fight against social injustice, beliefs, attitudes, values, sexual orientation, religion and ethnic diversity.

It appears that counsellors in Ghanaian public universities attempt to comprehend the diverse nature of clients in these public universities, including
differences interrelated towards attitude, customs, norms, age group, tribe, cultural values, beliefs, gender, spirituality, religion, sex, gender issues and socio-economic status. To achieve this, counsellors in Ghana need to be assessed on the scope of multicultural competencies: skill, attitude-beliefs and knowledge domains (Sue & Sue, 2016).

Furthermore, Achenbach and Arthur (2002) reported that culture is a factor that undeniably impacts how counsellors and the clients’ advancement of data and relate to other people as populations continue to diversify and encouraged counsellors to examine the important function their culture play in the process of counselling. However, Dorazio (2013) reported cultural variables such as beliefs, norms, customs etc., may dare counsellors and clients in relation to their sincerity during counselling sessions and the counsellors must be familiar with cultural factors influencing one’s openness to counselling.

These findings do not quantitatively describe the assessment of cultural variables on counselling practices. Additionally, the literature devoted to the multicultural counselling competence (MCC) has been presented through the perspective of the Western culture (Sue & Sue, 2016; Sodowsky, 2009; Pedersen, 1996 Talib, 2010; Yeh, 2003; Dorazio, 2013; Vontress, 2003). Such portrayals fail to take into account the phenomenon of cultural interpretations of counselling practices in Ghana.

Again, a review of multicultural counselling competence literature suggests that there are no studies on multicultural competence of counsellors in Ghana. As a reaction to these and further related challenges, the main purpose of the study is to measure counsellors’ cultural competence, recognising
cultural-contextual factors and their views on the influence of cultural beliefs on counselling skills in public universities in Ghana.

**Purpose of the Study**

The study sought to assess multicultural competence of counsellors in the public universities in Ghana.

**Research Questions and Hypotheses**

The study used the following research questions and hypotheses:

**Research Questions**

1. How do Ghanaian counsellors rate their multicultural competence on the dimension of knowledge, skills and attitude-beliefs (self-awareness), knowledge and skills in public universities in Ghana?

2. How do Ghanaian cultural beliefs influence the use of counselling techniques in the counselling process in public universities in Ghana?

3. What cultural-contextual factors influence counselling services in public universities in Ghana?

**Null Hypotheses**

1. $H_0$: There is no significant difference in counsellors’ perceived multicultural competence based on gender in public universities in Ghana.

2. $H_0$: There are no associations among sections on the Counsellors Cultural (CC) part in public universities in Ghana.

**Significance of the Study**

The significance of the study lies in the fact that counsellors may recognise and appreciate the importance of Ghanaian cultural variable throughout the counselling interactions as evident in the findings. This may help
to provide an understanding of the importance of diversity in the practice as well as inappropriate approaches to counselling practices and their modification. This may be important for individual institutions and organisations as well as governmental bodies with interest in counselling services such as the Ghana Education Service or the Ministry of Education, Ghana Health Service, universities etc. The findings of the study may serve as an important input into education policies and reforms, especially in the aspects that deal with student counselling and training of counsellors.

The study may provide further insight into perceptual underpinnings involving the counselling processes with regard to the Ghanaian culture. This may be important for social psychologists that are specialised in the field. Furthermore, the study may also serve as a relevant source of academic reference and further research into multicultural counselling Ghana. Lastly, it may serve as a test case for the counsellors in Ghana to follow-up on the effectiveness of the multicultural counselling programme and help to improve it.

**Delimitation**

Since this study was to find out the multicultural competencies of counsellors in public universities in Ghana, the study focused on public universities in Ghana. The study was restricted to only counsellors and teachers of counselling programmes in the selected universities in Ghana. Although there were over 10 public universities in Ghana at the time of conducting this study, it was confined to only four universities as the population for the study. The universities are heterogeneous with varied characteristics. This study considered this with respect to counsellor’s age, ethnicity, beliefs, geographical
locations, university type, gender and programmes offered which may influence their cultural competence.

Limitations

Despite the efforts of the researcher to ensure the validity and reliability of the findings of this study, a limitation of this study had to do with classifying universities as one unit. This was due to the number of universities used which made it impossible to carry out the analysis using individual universities as a unit of analysis. However, this was not expected to affect the results obtained significantly since the universities used for this study were being handled by the same counsellors for each university for rendering counselling services and teaching of counselling programmes. Generalising and applying the results of the study to the entire population cannot be assumed without a problem. The other limitation was the lack of current local researches and reference materials, even to compare the results of the study.

Organisation of the Study

The study is organised into five chapters. The first chapter presents the background to the study, the problem studied, the purpose of the study, formulated research questions and hypotheses which guided the study. It described the significance, limitations, and delimitations of the study.

Conceptual and research literature relevant to the study is reviewed in chapter two. The chapter provided a review of the theoretical framework that underpinned this study, multicultural competence, basic counselling skills and cultural contextual factors influencing counselling. It ended with a summary of the findings of the review and its implications as far as this study was concerned. The third chapter dealt with the research methods. The chapter described
research design, population, sampling procedure, instrument development, how reliabilities and validity of the instruments were ensured and the statistical tools used in analysing the data gathered.

Chapter four presented and discussed the findings from this study, the research question by research question as well as the hypotheses that were formulated and tested. Chapter five highlighted the major findings from this study, conclusions that were drawn, their implications for counselling practice, recommendations made and suggestions for future research.
CHAPTER TWO
LITERATURE REVIEW

Introduction

Counselling provides an exceptional chance for persons to discover and showcase their ideas and feelings in a permeable, noncritical and non-hostile setting (Glosop & Koproiwicz, 1990). In the opinion of Ipaye (1990) counselling is a technique of helping the individual to utilise his or her psychological resources by focusing on that person’s positive strength for improvement and by concentrating on the individual’s personality, behavioural and emotional assets that could be mobilised. Counselling, on the other hand, is usually viewed as one part of guidance service.

Counselling is a specialised connection that endows different group of people to realise psychological wellbeing, affective wellness, learning and vocational objectives (American Counselling Association [ACA], 2010). This definition makes explicit the idea that counsellors may meet persons from various socio-cultural backgrounds in the counselling relationships (Lee, 2013). Inherent in this ideation is the essence of counsellors becoming aware of attitude-beliefs (awareness), knowledge and skill to aid enhance persons, families and groups of people within a community in ways which are thoughtful to and comprehensive of sociocultural and ethnic realisms within the Ghanaian context.

Therapy’s efficacy is enriched when counsellor practices the skills, approaches and aims in line with the familiarities, sociocultural and ethnic
values of the client (Sue, 2001). The beliefs, attitudes and values of individuals not only impact their wellbeing, but then again influence all phases of life cycle together with collective interactions, involvement of social gathering and illness circumstance. Studies carried out by some researchers such as (Sue, 1995; Pedersen, 1996; Ratts & Pedersen, 2014; Atkinson, Morten, & Sue, 1993; Locke, 1992; McFadden, 1993; Sodowsky, 2009; Sue & Sue, 2003) to determine multicultural competence of the counsellors have indicated that some of the factors are: skills, knowledge, awareness of attitude and beliefs.

In reviewing the literature concerning counsellors’ multicultural competence, the review focused on the following areas; theoretical framework of the study, a conceptual review, which highlighted multicultural counselling competence, basic counselling skills, cultural-contextual factors and empirical review of multicultural counselling competencies.

**Theoretical Review**

Some of the outstanding scholars within the field of multicultural research, such as Sue et al. (1982), Sue and Sue (2016), Ivey (1994), and Pedersen (1996), highlight the system and practises of counselling in which counselling professionals educated in is repeatedly partially and restricted to individuals of Euro-American culture. This is additionally obvious from probably the most prominent and most generally utilised prototypical modes of counselling in Ghana. As a response to these boundaries of theoretic and hypothetical methods of counselling, multicultural education had been advanced to bridge these gaps.

The philosophical and theoretic foundations of counselling can grouped into four major approaches, namely: the psychodynamic theories, cognitive-
behavioural theories, existentialism-humanistic and multicultural counselling (Pedersen, Hackney & Cormier, 1996, as cited in Ratts & Pedersen, 2014). The three philosophical foundations of counselling have been introduced briefly and the emphasis laid on the main factors of the fourth theoretical force. That is to say, this study impinges on the philosophical assumption of multicultural competence theory. In terms of the present theoretic methods utilised in the Ghanaian public universities, the counsellor must conversant of that fact (Sue, Ivey & Pedersen as cited in Ratts & Pedersen, 2014):

1. ‘Psychodynamic’, ‘cognitive-behavioural’ and humanistic-existential philosophies assert to hinge their investigational ‘practice’ on logical assumptions. Though, therapy may openly be termed as steered by sociocultural assumptions.

2. The Western-focused models of counselling-whether ‘psychodynamic’, ‘cognitive-behavioural’ or ‘humanistic-existential’; the beliefs, values, standards, customs, ideas, nature of man and the language are of Western culture.

**Psychodynamic approaches**

This primary theoretic assumptions of counselling is built on psychodynamic theories, namely: psychoanalytic therapy (Sigmund Freud), ‘individual’ psychology of Alfred Adler and the analytic psychology (Carl Jung). This assumption is based on analytical approach of the unconscious to consciousness (Hackney & Cormier, as cited in Ratts & Pedersen, 2014). The psychodynamic approach is the primogenital and well known among the contemporary approaches of counselling. It is based on Freud’s psychoanalytic theory. Freud believed we can never give an account of why we behave, think
and feel at any given time because psychological forces work beneath the level of conscious awareness. These inner drives are labelled as dynamic as they interrelate with each other and their relations gives upward push to conduct of behaviour, feelings and cognitive-emotions.

The theories of psychodynamic explore a reserved disposition and the insentient drives that propel behaviour, thus, understanding of the influence of the past on present behaviour (Corey, 2009). Psychodynamic assumptions are concerned with the manner wherein the character and behaviour disposition of a person is developed. For instance, Freud, the founder of psychodynamic theories equated the thoughts humans to the tip of an iceberg showing (Neukrug, 2011). This insignificant portion which indicates overhead the surface of the liquid (water) epitomises mindful (conscious) knowledge in; as the plenty bulky mass beneath the level of the liquid (water) symbolises the subconscious and unconscious, a ware house of desires, passions and unreachable recollections that influence views, beliefs and forms of behaviour displayed. The psychoanalytic force is sometimes criticised for placing excessive weight on individual factors, pathologising clients, and using androcentric concepts to explain female psychology (Worell & Remer, 2003). Again, the marginalisation of sociocultural variables can be ascribed to the dependence on the clinical forms.

Cognitive-behaviour Approaches

The second theoretic and philosophical foundation is the cognitive-behavioural approach. The cognitive-behavioural approaches to counselling looks at how cognitions affect behaviours and emotional states as a result of strict behaviourism in recent years. This approach suggests that cognition or
behaviours have been learned and can be unlearned (Neukrug, 2011). Cognitive-behavioural counsellors devote a restricted period in exploring the historical event, as they concentrate in what way current cognition and behaviours have an effect on a person’s emotions, mind, movements and physiological responses. Neukrug further indicated that cognitive-behavioural theories proposed that once recognising challenging and perplexing behaviours or cognitions, the counsellor need to be able select, replace or toughen new cognitions and behaviours that may bring about extra potent functioning.

Because cognitive-behaviour approaches ignore other variables such as cultural values, norms, attitudes etc., decontextualisation of the issues of a client may result barriers in a counsellor’s ability to completely assist a client’s existent problem and optimise the growth of a client (Ratts & Pedersen, 2014). Rather than examine how socio-political and cultural variables impact rational thinking and behavioural developments, logical reasoning is used to get rid of client’s illogical beliefs. The thought and behaviours of people are separated from contextual elements regardless of substantial inquiry signifying that coercion displays a major part in the development of human. In the view of cognitive-behaviourists, the human being is an impact less organism that assumes control of the experience encountered within his/her own setting. When ecological factors are detached from cognitive-behavioural procedures, counsellors are required to examine the core descriptions of the problems of a client.

**Humanistic-existential Approaches**

The existential-humanistic theories, such as person-centred therapy (C. Rogers), Perls’ ‘gestalt’ therapy and Frankl’s ‘existentialism’, forms the final
traditional theoretic foundation (Ratts & Pedersen, 2014). The existential-humanistic approach draws from the traditional school of thoughts of the existentialism and humanistic psychology. As an example, proponents of existential psychotherapy are involved per the approaches of people of coping through the fundamental problems of human life, meanings and reason of lifestyles, loneliness (isolation), independence (freedom) and the unavoidability of passing away (death). On this technique, improved consciousness of the self is greatly critical than an examination of the unconsciousness. Humanistic theories overlay considerably with existential procedures and emphasise the development and fulfilment of the self, through self-examination and innovative expression (Ratts & Pedersen, 2014).

The humanistic-existential school of thought appreciates the goodness everybody and considers that the drive of a counselling process is to aid clients attain their full potentiality (Ratts & Pedersen, 2014). An egalitarian helpful connection among the client and counsellor is fundamental. The role of a therapist is to exemplify candidness and truthfulness and to properly apprehend the biased worldview of a client. The intention of counselling is less approximately solving challenges and more of assisting clients live a fulfilling live.

Humanistic-existential counsellors operate from an intrapsychic viewpoint make what Ratts and Pedersen (2014) referred to as a fundamental attribution error: they did not consider how culture shapes client experiences. For example, the promotion of individuation and autonomy of a client happens as a result of the practices of existential-humanistic concepts of freedom and awareness of the self. This therapy works well with persons from individualistic
culture. The backgrounds of these individuals recognise freedom as central to the counselling process. However, encouraging individuality of persons from collectivist backgrounds can be imprudent, since these cultures usually place an importance on associations, synchronisation and societal needs than on individual needs of which Ghana is no exception.

**Multicultural Counselling Approach**

The model of multicultural counselling has come to be the motivation for the improvement of a universal philosophy of multicultural theory that has turned out to be recognised as the fourth school of thought in the counselling profession (Pedersen, 1996). This makes the multicultural philosophical assumptions to join the three traditional schools of thoughts; psychodynamic, cognitive-behaviour and humanistic-existential theories, as a major justification of the development of human beings. However, Ratts and Pedersen (2014) believed that traditional theories overlook cultural elements and decontextualisation of counsellee problems which limits a counsellor’s capability to completely solve a counsellee’s present problem and optimise his/her development.

Multicultural counselling approach have been propounded by numerous of researchers, particularly by Sue et al. (1982; 1999), Sue and Sue (2003; 2016), Ivey (1994) and Pedersen (1996). Multicultural counselling theory has backed the altering the questioning in psychology from a Western viewpoint, inferential hypothetical methodology to a view-focused, inductive technique to the understanding of the nature of man by way of highlighting the importance of cultural variables in figuring out a standpoint of a person and place the basic expectations, beliefs and prejudices characteristic of theories of the Western.
Multicultural counselling theory is perceived as a metatheory methodology as it recognises all approaches and philosophies of counselling evolved from a specific sociocultural environment and that these social views of realism are shared communal beliefs advanced in relative to interactive conversation (Centre for International Mobility [CIMO], 2005).

The field of multicultural counselling in research has been defined by Atkinson, Morten and Sue, (1993) as “any counselling relations where two or more of the help-seekers are from diverse cultures” (p. 15). They also explained that multicultural counselling is grounded on the postulation that equality is myth, thus, two people even twins are not alike in beliefs and attitude. In the view of Ratts and Pedersen (2014), people are cultural products exposed to a multifaceted network of sociocultural forces which forms the perspectives, behaviours and practises; the way they view and understand the domain of their environment is as a product of traditions that originates from cradle and through a persons’ lifetime. For this same intention, counselling professionals in Ghana must be devoted to the thoughtfulness and relevance of cultural variables during the counselling process.

The fundamental of multicultural theory of counselling is built on the concept wherein both the counsellor and the client convey to the help-seeking session with a diversity of variables connected culture such as norms, values, beliefs, age, demographic characteristics, training, religious sects, ethnic background and socioeconomic status. Additionally, culture is diverse in nature as a distinctive feature of counselling relationships; consequently, counselling is culturally-diverse in nature (Pedersen, 1996).
Multicultural counselling theory integrate the all-inclusive, focused and specific cultural inclinations (CIMO, 2005). In the field of multiculturalism, counselling professionals must to be conscious of their sociocultural dispositions as well as the beliefs that influence the diverse models used in the counselling process. Sue et al. (1999) are of the view that counsellors who are culturally competent need to understand cultural-bound, status-bound and monolingual characteristics of counselling. Furthermore, counsellors should know the way these might bang with the traditional beliefs and norms of other cultures if consideration is not given to such conceivable difficulties.

CIMO (2005) contended that multicultural counselling theory is a meta-theoretical standpoint that distinguishes the significance of values as an adopted, individual viewpoint. Multicultural counselling reposes on the expectations that all counselling models are cultural-bound and that their principles, traditions and theoretical pedestal necessity complete and clear understandings of a help-seeker’s problem. It is imperative to write down that as the meta-theory of multicultural counselling does not propose to substitute the other existing philosophical methodologies but it echoes the appropriate analysis of cultural values and inspires counsellors to broaden their collection of models and approaches to be capable of malleably reply to the requests of different help-seekers in the therapy process (Sue et al., 1999).

This evolution of multicultural counselling into a theoretical force implies some important cultural principles for theory and practice (Lee, 2013). According to the definition discussed previously, Sue, Arrendondo & McDavies, as cited in Sue et al., (1999) outline six fundamental principles underpinning multicultural counselling theory:
1. Culture denotes to any collection of individuals who recognise one another on the foundation of some shared determination, requisite, or resemblance of experience.

2. Cultural variances are factual, and they impact all social relations.

3. All therapy is multicultural in nature.

4. Multicultural counselling lays an importance on social variety in all practises.

5. Culturally skilled counsellors advance their attitude (self-awareness), understanding (knowledge) and abilities (skills) to mediate efficiently in the lives of persons from ethnically different orientations.

6. Culturally abled counsellors are generally knowledgeable human beings.

This theory emphasises how culture foster people’s worldview, experiences, and need for culturally competent helping professionals. Kehe and Smith (2004), defined culture as the “characteristic values, behaviours, products, and worldviews of a group of people with a distinct socio-historical context” (p. 329). Rubel and Ratts (2011) added that cultural variances could be enthusiastically noticeable as the dissimilarities in apparel or fashion, diets, norms, values or customs and dialects as elusive nonetheless essential variations in the beliefs parents, structure of the family, social group chain of command, expected responsibilities based on gender, style of communication and association to space and time.

This theory also gives an indication that multicultural counsellors view the ‘one size fits all’ methodology, as supported by the psychodynamic, cognitive-behavioural, and humanistic-existentialism philosophical
assumptions, as ineffective since it rebates sociocultural elements (Sue & Sue, 2003). The counsellor and the client convey their distinctive past, experiences, and ethnic predispositions to the counselling process influence the counsellor-client bond. The importance of being familiar with the client’s cultural worldview steered the foundation of the multicultural competencies (Sue, Arrendondo & McDavies, as cited in Sue & Sue, 2003), which provide a framework for developing cultural knowledge, skills and attitude-beliefs (awareness) to efficiently work with different clients (Ratts & Pedersen, 2014). Furthermore, Ratts and Pedersen opined that the theory equips counsellors and therapists to be aware of their beliefs, cultural orientations, prejudices, customs, norms and experiences as well as their clients; conversant about their cultural upbringing as well as that of their clients; and skilled in using specific cultural strategies of counselling.

**Critiques of multicultural counselling theory**

Since the original proposal of Multicultural Counselling Competency theory (MCC-Sue et al., 1982), there has been equally addition to the improvement and reviews of the multicultural counselling theory over time. It often turned into through evaluations of the initial multicultural competency method that led to the modifications of multicultural concept of counselling. For this reason, it’s relentlessly beneficial to take an essential observation of MCC assessment and replicate on probable flaws of the unique modes to keep away from complacency inside the count number of multicultural counselling competence and to try for improvements.

The definition of multicultural competence are numerous which are tied to various approaches of MCC. Despite the fact that a number of the
explanations in writings have related issues, a general standard ‘definition’ is thus far to be advanced and recognised. Therefore, it is hard for pupils (trainees) and professional in the field of counselling to discern whatever they endeavour and the degree of self-confidence. This is in line with the findings of Ridley and Kleiner (2003) that the varying usage of the terminology could affect inappropriate expectations which means within the counselling area and that the nonexistence of generic know-how of MCC standpoint as an obstacle to regular and organisational incorporation of MCC principles into counsellor teaching curriculum. In the view of Mollen, Ridley and Hill (2003), the meaning of interrelated conception and abstraction, along with multiculturally skilled and culturally experience and whether or not such expressions are compatible, are all subjected to questioning. The kind of usage of those terminology in writings on the subject of MCC can promote misunderstanding and thinned the explanations of MCC.

Every other vital deliberation whilst analysing MCC is the medium MCC theory has within the area of counselling. Arthur and Collins (2005) stated that most scholarly works views MCC as a hard and fast endorsed indicators in place of obligatory standards (Guidelines on Multicultural Education, Training, Research, Practice, and Organisational Change for Psychologists by APA). Arthur and Collins contended that, “there should be no difference among multicultural competence and professional competence given that all encounters are, on some level, multicultural interactions” (p.58). That is an important factor; but, extra empirical studies needs to be carried out to ensure that the proposed MCC certainly results in powerful multicultural competence inside
the real counselling place before MCC ought to be translated into mandatory principles.

These criticisms of MCC can also transform into disapprovals of modern-day counselling schooling programmes. Even though exploration has taken place on MCC educational programmes, disapprovals had been remunerated regarding the boundaries to the existing MCC studies. First off, Constantine and Ladnay (2001) argue that the requirements of competency are frequently supported through abstract or theoretic literatures in place of being primarily based on empirical research; therefore, it’s far unclear that the period to which the abilities highlighted in the educational programmes can be successfully applied to actual professional counselling conditions and practices.

Secondly, it is also disputed that there is indecision about the varieties of educational training that efficiently transform into multicultural capability and that more research is wanted on which instructional techniques that are exceptional to assist students turn philosophy vis-à-vis multicultural counselling to the definite practise (Arthur & Achenback, 2002; D’Andrea, Daniels & Heck, 1991). Thirdly, Yutrzenka (1995) additionally referred to that most people of multicultural education research has not targeted on the direct connection among schooling and remedy outcomes; as a substitute, maximum research explores the unintended relationship between multicultural education and therapeutic consequences via the advanced multicultural competence of the pupil.
Conceptual Review

Multicultural Counselling Competencies

As cited earlier in this section, multicultural counselling competency can be viewed as the grouping of a counsellors’ skills, attitudes-beliefs and knowledge concerning the understandings of smaller ethnic and tribal groups differences in culture (Sue & Sue, 2003). Sue and Sue (2016) itemized six features in cultural terms a knowledgeable counsellor should possess. Specifically, culturally competent counsellors include awareness in six dimensions:

1. Consciousness of social and political dynamics which have an impact on help-seekers.
2. Attentiveness to variances in values, societal classes and linguistic can be an obstacle to the counselling process.
3. Being mindful of the influence of background experiences.
4. Consciousness of know-how, credibility and absence of resemblances can sway help-seekers’ receptiveness of the counselling process.
5. Consciousness of the understanding and expertise that are desirable for suitable discourse which involves diverse styles to match dissimilar ethnic orientations.
6. Consciousness of counsellors’ preconceived notion. Multicultural knowledge comprises a critical ingredient in multicultural competence (Sodowsky et al., 1998).

Because all behaviours are scholarly and exhibited in a specific sociocultural framework, the culturally knowledgeable counsellor needs to attend to a client’s difficulty in a culturally contextual setting. Multiculturalism
outlines an established approaches and behaviours suggestive of the capability to create, preserve and effectively complete a therapeutic connection with clients from different cultural experiences (Lee, 2013). As a result, a counsellor who is culturally-competent needs to have a better responsiveness, have a prolonged understanding and the usage of appropriate skills in a client in a manner that is culturally-responsive.

Multicultural Counselling Competency (MCC) has been theorised as the knowledge, attitude-beliefs (awareness) and skills that a counsellor need to function efficiently with varied persons (Sue, Arredondo, & McDavis, as cited in Sue et., 1999; Sue, 2001; Ridley & Kleiner, 2003). Multiculturalism embrace, nonetheless is unlimited to, the responsiveness of one’s own labels and predispositions; information on one’s own and other people’s opinions. The consequences of the concept utilised refers to dissimilar society, both factually and presently; and the behaviours that transform this cognizance and understanding into effective collaborations with different persons.

The context of multiculturalism can be labelled in three sequential levels (Sue, Carter, Casas, Fouad, Ivey, Jensen, LaFromboise, Manese, Ponterotto & Vazques-Nutall, as cited in Sue et al., 1999). These capabilities communicative attitudes and ability-based features in three measurements: counsellors’ knowledge, attitudes-beliefs (awareness) and skills. Sodowsky, Taffe, Gutkin and Wise (as cited in Sodowsky et al., 1998) further developed a fourth measurement as the counselling relationship. The first measurement deals with the counsellor attitudes-beliefs about cultural and ethnic groups, the requirement to check prejudices and labels and improve an optimistic coordination towards multicultural competency. Notable studies on
multicultural emphasises the significance of a counsellor’s attitude-beliefs (awareness) of his/her culture and that of the client. To be capable to align oneself in the situation of an individual from a different culture, one must first become cognisant of the special effects of one’s own cultural values on one’s action.

The second measurement suggests that the culturally-skilled counsellor has an awesome expertise and understanding of his or her own worldview, has precise knowledge of the cultural setting he or she works with, and that she or he knows socio-political impacts. The third measurement emphasises specific mediation strategies and techniques desirable in operating with ethnic and tribal groups. The assessment of the counselling relation has additionally been given to the consideration of counsellors’ abilities within the discipline of multicultural counselling (Locke, 1992).

The rationalisation of these elements has spoken at length by Sue and Sue (2016) and Arredondo et al. (1996), remarking that the field of counselling had been using Western models of social development and behaviour that have been neglected to effectively interpret the demands of diverse residential districts. Equipped with multicultural awareness of attitude/beliefs, knowledge, and skills, counsellors are professionals with self-awareness and capability to precisely appraise the competence and efficacy of a person’s abilities and to take educative activities as desired (Sue, Carter, Casas, Fouad, Ivey, Jensen, LaFromboise, Manese, Ponterotto & Vazques-Nutall, as cited in Sue et al., 1999).

Furthermore, numerous instruments have also been considered to assess the multicultural competency of counsellors. Januskowski (2000) enumerated
the following instruments: Sue et al.’s MCI (Multicultural Counselling Inventory, Sue, 2001); LaFromboise, Colemm and Hernandez (1991)’s CCCI-R (Cross-Cultural Competency Inventory-Revised); D’ Andrea, Daniels and Heck (1991)’s MAKSS (Multicultural Awareness-Knowledge-Skills Survey) and Ponterotto et al. (1996)’s MCAS (Multicultural Awareness Scale).

Dimensions of multiculturalism

In going through the literature on multicultural competence, culturally-experienced counsellors are labelled as skilful across three domains: knowledge, skills and self-awareness (attitude-belief). In addition, Sodowsky et al. (1998) further added a fourth domain of culturally-skilled counsellor, the counselling relationship. These four domains are presented as follows.

Knowledge

Multiculturalism encompasses having the understanding of how age, social class, gender, tribe, traditions, cultural origin, religion, sexuality, ill health, linguistic and socioeconomic prestige may have an impact on the lives of help-seekers and help-seeking practise. Multicultural knowledge crucially contributes to counselling competencies in the following three regions:

(1) Specific cultural diagnostic groups assessment tools (Dana, 1993; APA, 2000).

(2) Help-seeking behaviour.

(3) Styles of interaction (Dana, 1993; Sue & Sue, 2003).

Knowledge in multiculturalism simply means that the counsellors have understanding about the structures of a family, responsibilities with regard to gender, beliefs and background experiences vary through groups and how these
affect behaviour development, progressive consequences and the presentations of psychosocial problems (Smith, & Trimble, 2016).

According to Sodowsky (2009), having cultural sensitivity and being educated in a specific cultural technique does not meet the requirements of a helping-seeking professional except that there is a theoretic information to substantiate the counselling professionals’ ethnic or beliefs (cultural) sensitivity and techniques. In the view of Sue, Arrendondo and McDavies (as cited in Sue & Sue, 2016), multicultural counsellors should be mindful of their undesirable labels and sensitive feedbacks toward other clients from different ethnic background. These therapists ought not only to know the particular information of their ethnic background and familiarities but the cultural values and precise elements of the tribes and ethnic groups which they are helping. In addition, counsellors should be thoughtful of the socio-political impact that influences the ‘lives’ of these cultural collections as a result of topics in relation to the tribe, insufficiency (poverty), social values and attitudes, sex and age. In the view of Sue and Sue (2016), it’s miles critical that counsellors actively try and comprehend with respect and admiration of the worldviews in their clients.

Counsellors with multicultural knowledge are aware of the degree of cultural and past events with regards to backgrounds of psychological philosophies and practices, as well as the impacts of such problems as coercion, preconception, discrimination, insufficiency, labelling, stigmatisation, and marginalisation (Sue & Sue, 2003). Knowledge of cultural variables such as language, ethnic identity, worldviews, social change influences, beliefs, attitudes and social value differences have impacts on the client. The culturally-competent counsellor addresses these factors through the conceptualisation
clients’ problems, therapeutic interventions and objectives (Sodowsky & Taffe, as cited in Sodowsky et al., 1998).

Specialists of multiculturalism have advised counsellors to have skills in multiculturalism to be culturally effective. According to Leong and Kim (as cited in Zane et al., 2016), the increasing cultural sensitivity of counsellors without tentative information on a specific culture about interventions would lead to frustration.

Sodowsky (as cited in Sodowsky et al., 1998) identified numerous ways of getting skilled in multicultural knowledge. For example, counsellors need to have up-to-date, relevant literature and research on client inclinations; to be knowledgeable about sociocultural elements of different ethnic group; be forward-thinking and culturally appropriate in conceptualisations of client problems and helping strategies; well-informed of present issues; make relevant recommendations; evaluate clients’ cultural variation; relate the sociocultural past of clients when necessary; be capable to cogitate heterogeneous nature of a particular ethnic group; and incessantly self-screen, observe and correct this procedure. According to Sue and Sue (2016), deprived of consciousness of attitude-beliefs (awareness) and understanding (knowledge) of social class, beliefs and traditions, counsellors and some professionals might unknowingly involve in folk repression (oppression).

For counsellors in Ghana, the knowledge element are: the thoughtful of Ghana’s cultural beliefs and the social change and political structures’ effects on various ethnic groups; specific cultural knowledge about varied the populations being helped. The understanding of the institutional hindrances as well as tribes to be encountered while seeking out the services of counselling.
Information of cultural characteristics that exist among ethnic groups adds to the active utilisation of ethnically applicable and persuasive approaches (Sodowsky, Lai & Plake, as cited in Sodowsky et al., 1998). Furthermore, the normative behaviour of specific groups within the population, socio-political functioning in such populace, desired of collaboration and a detailed knowledge of the principles of the help-seeking profession among different populations forms part of the knowledge dimension (Vacc, Wittmer & DeVaney, 1988).

The existing study shows that specialists in the area of counselling who incorporate the understandings of culture into the framework of their psychotherapy meetings help-seekers from varied orientations seem to affect the experiences of these clients during the counselling process. Sodowsky, Lai and Plake (as cited in Sodowsky et al., 1998) examined whether making a good account of ethnic (cultural) understanding to counselling content material could affect studies members’ notion of counsellors’ expertise, honesty and probably beauty. The research furnished an initial assistance for theoretic writings which has endorsed counselling professionals to be well-informed of a help-seeker beliefs, norms, traditions, perceived world and circle of lineages and structures within the community.

**Awareness (Attitude/Beliefs)**

A counsellors’ cultural competency originates by mindfulness of a person’s identifiable belief (culture) in an association with new cultures, and a cognisance of the culturally-related expectations, whether with or without permission governs a life, with or without permission. The primarily comprehensive subject is one of intrapersonal attentiveness. This is achieved over a logical consideration of a person’s identifiable philosophies, attitudes and
approaches and is mostly completed over self-examination, self-monitoring, and thoughtful self-assessment. Sue (2008) revealed that if help-seeking professionals were conscious of the effects of culture on their personal disposition and social lifestyles, then counsellors could well be able to recognise the approaches which cultural values and traditions impact the behaviours of client, relations, beliefs and lifetime aims.

Cayleff (1986) suggested that the counsellor ought to be cognisant of the effect of the personal cultural features (e.g., age, gender roles or socioeconomic standing) with regards to the observations, reactions, and the labelling of a help-seeker’s problem. Pedersen (1996) defined counsellors as a person who is culturally capable (competent) as being able to navigate deeper into the identifiable cultural beliefs by moving outside of it through a self-observation act. Wrenn (as cited in Pedersen, 1996) further proposed that counselling professionals must realise that the strong feeling they have about something may be absolutely inappropriate for their clients. The value structure of a person constitutes his or her beliefs. These beliefs may inform perceptions, selections and evidences based on a person’s experience and background orientation. The allocation of philosophical beliefs of a person may possibly comprise themes which are reflected to be prohibited and taboo in some cultures of a particular society or community, such as sex, government, or religious conviction.

A multicultural-competent counsellor is a person who is vigorous in the course of being conscious of his/her expectations about the performance (behaviour) of a human being, beliefs, prejudices, predetermined concepts and individual weakness (Sue, Arrendondo & McDavies, as cited in Sue et al., 1999). Precisely, this counsellor may cherish his or her personal sociocultural
tradition while accepting the outcome of an ethnic acclimatisation. The
counsellor, therefore, becomes aware his or her cultural value approaches,
principles and may recognise the boundaries of his or her know-how and the
way these beliefs might be mirrored in his or her work with tribes through
segregation, coercion and labels; and be relaxed and civil of dissimilarities
which exist among him or herself and his or her clients vis-à-vis traditions,
values, beliefs and social class.

Sue (2008) opined that interpersonal consciousness of attitude-beliefs
(awareness) is the most important direction of cultural awareness which can be
carried out through a non-stop thoughtful self-assessment. Furthermore, if
counselling professionals are cognisant of the effects of their tribes on their very
own personality traits and interpersonal patterns, they may be greater motivated
to understand how culture impacts the behaviours of a client, philosophies,
connections and existence goals.

In an investigated carried out by Pope-Davis and Ottavi (1994), they
measured the effect of racial identification of White attitudes on racism. A
sample size of 234 participants (White undergraduates) was used for the
research. The participants responded to the White Racial Identity Attitude Scale
(Helms & Carter, 1991) and the New Racism Scale. The results determined
White racial identity attitudes to be foretelling of racism and referred to that
sizable gender and age variations existed regarding White identity attitudes.
Findings from this observation stressed the role of counsellors in addressing
their very own cultural recognition when dealing with clients from diverse
backgrounds (Pope-Davis & Ottavi, 1994).
Vacc et al. (1988) have recommended five kinds of attitudes counselling professionals need to think through. These are as follows:

1) Counsellors’ attitudes about the self-concept.

2) Counsellors’ attitudes about dissimilar populaces.

3) Attitude of diverse populations about consellors.

4) Attitudes of a societal group about different populations.

5) Attitude of members of the diverse population about themselves.

Cayleff (1986) stated that counsellors who are effective are privy to the poor impact of tribal and sexual labelling and judgement. By means of this cognisance, counsellors can admire and safeguard clients’ privileges and self-worth.

Counsellors’ focus of their cultural uniqueness has been studied and decided to be important in counselling training abilities. Sodowsky et al. (1998) emphasised the importance of counsellors looking for schooling and a session in expertise their social impact on others based totally on their personal sociocultural personality and interaction patterns. Brooks and Kahn (1990) appraised a graduate path in gender and cultural troubles via pre-post-testing of 57 graduates enrolled within the programme. The obtained marks from the post-test displayed less labelled sex-role behaviours and behavioural intents of these students who finished the programme. A follow-up on a telephone interviews were carried out six months after the post-test has discovered significant and constructive adjustments inside the participants’ degree of sociocultural attentiveness as a consequence of the studied programme. The majority of the participants confirmed that the programme ensured they are efficiently sensitised and gender-unbiased (Brooks & Kahn, 1990).
Multiculturalism programmes, trainings and coaching are incorporating the requirement for individual perception and consciousness by way of mounting courses and techniques for counselling professionals as named as ‘exposure-oriented’ consciousness (Sue, Akutsu, & Higashi, as referred to in Sue et al., 1999). Pedersen’s Triad model and Intercultural Sensitizer are an example that needs to be considered (Pedersen, 1996). In the view of Pedersen, exposure can be one of the most essential visions of a primary multicultural programme to start. The procedure of empowering a counsellor to take a look at his or her personal tradition from an unknown person’s viewpoint. Ivey (as stated in Ivey, 1994) considered this improved cognizance as a vital facilitator for the studying of multiculturalism in a lifelong.

Skills

Ivey’s (as cited in Ivey, 1994) classification of personal efficacy sets the phase for professionals in the area of counselling to develop their skills by describing culturally-competent professionals as active conversationalists in a cultural-context. The classical icon provides a structure for relating the knowledge of culture in the counselling discourses and therapeutic strategies. Sue and Sue (2016) indicated that the culturally-skilled counselling professionals are in the active process of increasing and practising applicable, significant and thoughtful mediation approaches and expertise in helping clients of diverse cultures. The study conducted by Sue et al. (1999) exposes that the efficacy of the counselling process is enhanced when professionals in the field practise refine indicators and delineate aims reliable with the ‘life’ practises and clients values’ of a related culture.
Both awareness (called attitude-beliefs by Sue et al., 1982) and ‘knowledge’ competency is twofold, which obviously is indispensable requirements to the increasing satisfactory multiculturalism expertise is. Such expertise embrace three capabilities: being able (a) conducting an interview and appraisals which are sensitive to culture (Cheung, Leong & Ben-Porath, 2003; Dana, 1993); (b) to form accurate, unbiased conceptualisations (APA, 2017); and (c) planning and implementing unbiased, efficient behaviour management strategies (APA, 2003).

Furthermore, an experienced counsellor’s knowledge, ability about how counselling professionals inhibit individuals of diverse ethnic upbringings from gain access to the services counselling is imperative. For instance, a counselling professional must be conscious of culturally-biased ‘assessment’ tools and the inadequate family features and societal information (Sue et al., 1992). To offer supplementary culturally-related mediations, Sue and Sue (2016) indicated that a professional in the area of counselling must be competent in appreciating both the voiced, written and non-verbal communications they directly and accept precisely and applicably throughout counselling.

Again, an effective, culturally-competent counsellor may employ in a multiplicity of events, such as overriding at the official ‘level’ for a help-seeker; exhausting non-traditional evaluation approaches; distinguished usage of organised and non-structured counselling, pursuing a meeting with a spiritual and transcendent front-runners. These counsellors are responsible for relating to help-seekers in a desired dialect; and authorising and enlightening help-seekers about their aims, prospects and lawful privileges in the counselling process (Sodowsky et al., 1998).
Sue, Arendondo and McDavies (as cited in Sue & Sue, 2016) specifically added skill as the new counsellor’s characteristic of the counsellor building applicable mediation plans and methods. McRae and Johnson (1991) indicated that “there is a necessity to create teaching approaches that push counselling (student) apprentices from knowing that dissimilarities occur to assisting them recognise in what manner to begin a session in a counselling setting with the help-seekers from different ethnic groups. Professionals in the area of counselling need to match their competences and mediation approaches with the optimisms of help-seekers are important when engaged with clients of diverse background. Pedersen (1987a) emphasised that the additional approaches as well as abilities a counselling professional possesses, he or she has the advantage in making appropriate selections when working with the help-seekers and the counselling settings. The counsellor’s tractability (flexibility) helps him or her to answer back with progressively multifaceted approaches.

A competent counsellor similarly inquiries, reconstrue and familiarises earlier cultured abilities so that the evaluation is culturally-sensitive. The dialect and approaches a counsellor ought to use should be based on the client’s worldview (Sue et al., 1982). Of a paramount significance is the counsellor’s skill is to link mediations with the goals of a client. The culturally-competent counsellor progress with thoughtfulness when exhausting regular tools with a varied populaces. This realisation is an essential possibility of outline misunderstandings and the obstacles of phonological and analysis stages that go along with normal evaluation procedures (Ibrahim & Arredondo, as cited in Sodowsky et al., 1998).
In conclusion, the element of multiculturalism, ‘skills’ defines a counsellors’ ability to improve ‘skills’ that permit them to work as culturally-competent. Counselling professionals need not only be conscious and well-informed around the variables of culture, but then again be cognisant of themselves as creatures of cultures and have a resilient comprehension of their personal lifestyle beliefs. Help-seeking professionals need be capable to deliver and make interpersonal contexts that are remedially suitable, culturally-related and personalised to encounter the desires for each help-seeker (Sodowsky et al., 1998). To apply the knowledge of culture efficiently in the counselling process, the counselling relationship needs to be part of the know-how element to attain competency in a multiculturalism setting (McRae & Johnson, 1991).

The Multicultural Counselling Relationship

A study has established that the procedure of multiculturalism change of an individual from a minority group depends greatly upon approval and backing from persons inside the main culture. In countless of these circumstances, counselling professionals may function as a symbolic character of the leading culture, with the friendliness and approval of the therapists being precarious to the help-seeker’s adaptation and comprehensive outlook to the help-seeking process (Pedersen, 1996).

According to McRae and Johnson (1991), it is for counselling professionals to scrutinise the forces at work of the counselling relationship (the relationship between a counsellor and a client). This embraces the “examination the healing bond among therapists and help-seekers with comparable and dissimilar beliefs, ethnic personality outlooks and problems of authority, control and domination” (p.135). Centred on the acknowledgement of the significance
of the counselling relationship, the current tallying to the three preceding domains labelled is one that refers to the therapists’ relational advancement with their clients (Sodowsky et al., 1998) and labelled relationship.

Sodowsky et al. (1998) indicated that culturally-competent counselling professionals: are capable of becoming relaxed functioning with clients from smaller ethnic groups; are capable to recognise ‘countertransference’ and protective feedbacks; are mindful of nonetheless do not put into practise labelling in the conceiving a help-seeker’s issues; agree different beliefs and patterns of discourse while promoting optimistic cultural personality in clients of smaller tribes. Furthermore, they integrate conventional ‘psychology’ models and practise in methods that are personalised to come across the needs of a help-seeker; and conscious of help-seeker suspicion for the reason that of tribal dissimilarities. During the counselling relationship, culturally-competent professionals exemplify multi-ethnic outlook and actions by demonstrating reverence, exhibiting responsiveness, accepting uncertainty, displaying individualised opinions, and indicating shared worry (Pedersen, 1987b).

Though quite novel to the areas of multiculturalism in counselling, the ‘counselling relationship’ is an area that has turned out to be progressively highlighted.

The four domains of multiculturalism competencies have been identified as not exclusive in general. Actually, the porous confines round individual domain may brand it perplexing when making an effort to comprehend, classify or envisage a counsellor’s culturally-related capabilities. For example, beliefs-attitude (awareness) secondarily impacts ‘skills’ and ‘knowledge’ then again may likewise be distinct from these two since multicultural’s insightful
thoughtfulness as well as the emotive element (where ‘knowledge’ and ‘skills’ are supplementary in practise). It is commonly challenging to differentiate which domain(s) receives precedence or desires to be educated primarily when defining what make up an efficient culturally diverse educational programme for counselling professionals. For instance, students’ of the counselling programme must take part in self-understanding and devise the thoughtfulness of the ethnic or tribal familiarities of a multi-ethnic and different population. Similarly, as counselling professionals derive an understanding of their personal cultural identity, they form a multi-ethnic and cultural perception.

In the end, even though the connection among these four domains have been framed as distinct domains. Not merely have scholars develop tools to assess counselling professionals through these four dimensions, but have remained valuable in reviewing educational courses designed to conceal the four essential elements.

**Factors affecting multicultural counselling competency**

From the time the multiculturalism came into practice, countless individual features have been explored that could influence a counsellor’s level of cultural competence. Examples of such dynamics consist of femininity, stage of development (age), cultural alignment, etc. Quite a few researchers have examined the effect of individual features and multi-ethnic competence of counselling professionals (Allison, Crawford, Echemendia, Robinson & Knepp, 1994; Ottavi, Pope-Davis & Dings, 1994; Pope-Davis & Ottavi, 1994). For instance, Ottavi et al. explored the self-described multi-ethnic competence of 128 counselling students of white colour and established that the background
dynamics such femininity (gender) and oldness (age) did not justify any important extent of change in any of the four elements.

A current research conducted by Sodowsky (2009) examined the association among ethnic groups and multi-ethnic counselling competency and highlighted that ‘Hispanics’ had purposeful self-described marks than ‘Whites’. This inquiry established that general, people from smaller ethnic groups recorded inversely than ‘Whites’ on the MCI inventory. One general subject that is ensured in the analysis of the literature is the significance of multi-ethnic education. For instance, even though Ottavi et al. (1994) did not discover any worth for ‘femininity’ (gender) or ‘age’. Furthermore, the research conducted by Sodowsky et al. (1998) upholds that multi-ethnic counselling competency improved with educational training.

**Ghanaian Cultural Values**

Culture encompasses all aspects of the life of people. Culture evolves when human beings come to live together in a specific environmental cosmos and shared a similar lifestyle, where they sense the effort to create a societal context within which they can work as human beings (Gyekye, 2013). Gyekye indicated that to fulfil this effort, they would grow and nurture specific beliefs, rudimentary practices, organisations, forms of cognitions and means of conduct themselves. These desires may constitute themselves into a societal, theoretical and ‘normative’ context that exemplifies their mode of life cycle in its entirety: this framework would be the culture of the people.

Culture, thus, comes into being as a result of people looking for ways of dealing with the various problems that arise out of human beings living together in a society. The problem of how to survive collectively, relate to and help one
another leads to the formation of a communal way of life. According to Gyekye (2013), “the problem of regulating the behaviour of the members of the society and bring order, social harmony, stability and peace to the society leads to the establishment of legal and moral codes” (p.141). The desire to express their creative talents and communicate their feelings leads to the creation of such art forms as music and dance forms. The way the people look at the universe may lead to questions about its origin and beliefs in some ultimate being (or, beings) beyond the universe as worthy of reverence and worship: herein lies the beginnings of religion or the religious practice. The ideas or beliefs of the people with regard to death and the hereafter lead to the kind of ceremonial practices or funerals that are instituted for the dead.

The culture of a people is their total way of life; it is seen in their views about what they hold to be most desirable for their lives (i.e., values), in their perceptions of the universe and the postulation of some ultimate being or beings considered worthy of worshipful reverence and obedience, in the ways they their social and personal relations, manage the affairs of their (i.e., their system of politics) and educate their children, in, their style of architecture, in their style of dress and the type of clothing what they regard as polite behaviour in society, their techniques of farming, in their habits and customs, and in their system of rewards and punishment (Gyekye, 2013). It would be seen that culture emerges from the attempts of people to respond to their varied and wide-ranging experience of the world and to negotiate problems and challenges encountered in human life. According to Gyekye, the “approaches to dealing with the various problems, which may differ from society to society, mature or ossify as the culture of the people” (p. 142).
“By our cultural values, I am referring of course to Ghanaian cultural values” (Gyekye, 2013, p.161). Gyekye stressed that Ghanaian cultural values are diverse in nature, ‘multi-ethnic’ and ‘multilingual’ in reality. As side the ‘multicultural’, ‘multi-ethnic’ and ‘multilingual’ nature of societies in Ghana, there are similarities in the cultures that are shared by diverse tribes. It is incredible, in fact unbelievable, for groups who have stayed close to one another for years not influence each other in a culture-related manner. The outcome of an ethnic interactions within a particular culture, is that nearby ethnic group not only study from each other then have also ensured their impacts as well. To Gyekye, it is desired, then, correctly to emphasise that certain values of Ghanaian culture interpenetrate from end to end interactions, conversations and copying of beliefs, thoughts and organisational structures have led to the development of mutual traditional beliefs and that justify one’s the formation of cultural values of Ghana.

In the wake of cultural interpenetration, cultural products originating from a particular ethno-cultural group will, paradoxically, become less particularistic or local and instead become national, as other citizens from different ethno-cultural groups across the nation come to appreciate and identify with them (Gyekye, 2013). Because of the attraction and enjoyment of local cultural products, may hold in the wider society, these products would in time shed their local or ethnic or regional identity and take on national identity. Gyekye identified the following cultural values as common or shared beliefs to the Ghanaian societies:
Brotherhood and Humanity

African traditional cultural values recognise the self-worth and truthfulness of the people as God created them. The shared ‘brotherhood’ is inherently related to shared humankind; a big ‘family’ that is universal where all humankind are part of such kin. (Gyekye, 1996). This ‘family’ is uneven, though, into a diversity of populace and sociocultural beliefs. The term “race” has been used by Western anthropologist as a way of breaking down universal human family into subcategories. The acknowledgement of all humankind as ‘brothers’ is a collective association as the unique humankind is a supercilious model that is of countless significance to the Ghanaian populace. According to Gyekye, aside the fact that all are human beings, within our individual nations, do not often succeed in conforming our actions to this ideal does not mean that it is a mere utopia and not a realisable ideal or goal.

Individualism and Communalism

The values of traditional societies in Ghana emphasis collectivism as articulated in the distribution of shared community lifestyle, obligation to the societal or mutual ‘good’ of the community, gratitude of common commitments, helping one another, social reliance and commonality (Gyekye, 1996). Collective life is believed as ordinary to the humankind. On the other hand, the assertions of ‘individuality’ are recognised (Hagan, as cited in Awedoba, 2005). The ethics in African, nevertheless, desires the circumventions of a great ‘individualism’, which is may be perceived as possible destruction of the humankind beliefs, values and by the complete sense and the spirit of the human community. Gyekye further stressed that efforts are, as a result, prepared to stabilise ‘communalism’ and ‘individualism’ where both
could coexist. But a balance is precarious and likely to tilt in favour of individualism in times of extreme economic hardships.

**The Morality**

The ‘morality’ embraced in together old-fashioned and contemporary cultural communities in Ghana is a societal, collectivist ‘morality’ (Gyekye, 1996). This form of ‘morality’ is believed as instructed by community life cycle ‘itself’. There is a concern with the humankind welfare in a Ghanaian context good thought (moral) and the exercise. To Gyekye, a human being is considered as an object of moral concern, a being who ought to be-deserves to be helped, and the worth and connotation of society is dignified in standings of the degree to which an individual retorts to the desires of other people within the communities. Gyekye further indicated that the Ghanaian ‘moral’ structure places the ethics of duty directly above the ethics of personal civil rights, however the second is acknowledged. The significance of personality as the device of ‘moral life’ in reality is emphasised. Exceptional consideration is, then, given to the refinement of ‘other-regarding’ moral qualities, or personae of character.

**The Family**

Marriage is echoed as a valued foundation, for deprived of it there might be no ‘family’: the rudimentary component of community’s lifespan; and devoid of the family, there will be no ‘kinship’ bonds that are indispensable to an all-inclusive societal lifespan and a complex web of shared relations (Gyekye, 2013.). Gyekye further explained that beliefs (values) connected with the clan comprise recognising the obligation to compliment lifespan with a companion and offspring in the smaller (nuclear) household (family) and with
the memberships of a whole ancestry in the protracted (extended) clan (family). This helps recognise the significance of marrying, giving birth and giving good support of children produced. Also, parents must be respected, supported when they nearing their grave and make them feel that they are wanted by their children and so on.

**Economic System**

Many scholars in the past described traditional Ghanaian economy as socialistic because they misinterpret how communal system works and overlooked materialistic, capitalistic, and acquisitive elements in the African character (Gyekye, 2013). Ghanaians pursue and place a great importance on affluence, both individual households and the entirety a clan (extended family). The authority and power to, and the reputation of an individual assets (properties) is recognised as part of economic component of the traditional societies in Ghana. This symbolises existence of individual ownership of property and the public (communal, state) ownership in a separate spectrum. According to Gyekye (1996), families (i.e., lineages, clans) operate independently of the chiefs, who thus does not have absolute power over all the forces at work within the economy of traditional societies. In many ways, however, the traditional societies in Ghana symbolises a wellbeing flag, operating on a principle of impartiality (not automatically the same) sharing: all have right to use the available wealth and possessions of a society. But, let it be noted, this system is not socialist in any Marxist sense; it resembles, rather, the social democracies of Western Europe, particularly of Scandinavian states.
Politics and Chieftancy

The thought of politics is greatly cherished in line with the consent and discussion with leaders (elders) of the various clans, who make decisions as political leaders. (Gyekye, 1996). Following this run-through permits members of a community to be involved all the process of traditional politics. The paramount chief is at the apex of the political ladder with extreme power consented by the people reign over them. The foundation of the political power of a chief originates from the people, directly or indirectly through their representation (heads of various families and clans on the chief’s council. According to Gyekye, the political power of a king (chief) is founded on a representative beliefs which warrants his answerability to the community. Sovereignty of communication of opinion with regards to politics is respected and practised within Ghanaian societies. Abuse of power by a king or chief is unacceptable and may result destoolment.

Human Rights

Human right is another indispensable value grounded in the traditions of Ghanaian culture (Gyekye, 1996; 2013). In the view of Gyekye (2013), these embrace independence, individual duty, the self-esteem of all, the inherent worth of each person, the respect of each person as an expression of ‘’himself’’ or ‘herself’ and well-intentioned of reverence, and fairness of the ethical value of all people. Political rights, in particular, which include the right to political participation and unrestricted communication of view, are emphasised or requested alongside the community or society (king or chief). Furthermore, additional human right that is recognised and sheltered take account of the right to the use of family land, which includes the right to sustenance and fortification
from starvation; the right to an impartial hearing; and to ownership of individual
assert. Such rights are central to the community building, tradition and the
mores of the societies in Ghanaian traditions and must not be vocally required
and aggressively struggled for (Gyekye, 1996).

Knowledge and Wisdom

In Ghanaian traditional culture, ‘knowledge’ is exceedingly cherished,
specific real-world as well as pragmatic ‘knowledge’ (Gyekye, 1996). Such
‘knowledge’ is constructed on reflection and know-how which is considered
important because of its relevance to the pursuit of technology. Both theoretical
and practical wisdom is appreciated. According to Gyekye, applied ‘wisdom’ is
the utmost significant in the modernisation of the Ghanaian societies of the
postcolonial era. To the Ghanaian, the drive to the usage of ‘wisdom’ both
theoretical and practical to help and warrant humankind welfare.

Aesthetics

In Ghanaian culture, traditional art has purposefully and purely aesthetic
dimensions. According to Gyekye (1996), one outstanding feature of artistic
performances such as dance, songs and appellations is their character of
participatory character: music-making and dancing are communal activities.
The other aim separately from purely aesthetic qualities is the extending of
collective sentiments and consciousness within the Ghanaian setting. Amongst
these benchmarks of appealing value and judgment are the relevance and
rightness. Gyekye highlighted that songs, body movements to music as well as
apparel need to be appreciated on such time. The concept of beauty embraces
the whole of human as well as how a person conducts him or herself, attitude
and behaviours dispositions towards humanity.
How Ghanaian cultural values influence decision-making in the selection of counselling techniques

1. Cultural beliefs are quite robust: these are framed in the traditional legacy of a group of people and persistently contained inside the organisations of the society. The beliefs are well known from infancy (Frey, 1994). A person could choose to sacrifice a specific value, merely to be challenged by it at a respectively point in time inside the net of a society and to be grounded by its restrictions shaped initially in life. These beliefs of a society or of a person are not effortlessly changed (Gyekye, 1996).

2. Ghanaian values preserve and inform a culture’s philosophy of the ethically desired: This established the societal benchmarks and the social conventions upon which virtue and evil, true and incorrect, good and wicked, honourable and abominable are recognised (Gyekye, 2013). Beliefs offer a criteria and system for the foundation for all judgements that are morally accepted, whether focused at other people, environment or the individual’s self. Beliefs guide the conduct humans, serving an ‘outline’ for an act. The thing a person may value as appropriate, other peoples may value as immoral and improper. The central point of misunderstandings within a society is as a result of values

3. Cultural values are overwhelmed with emotive frame of mind and are apprehended with resilient belief: Gyekye (2013) opined that there may be no inactively unbiased beliefs. Anxiety, compassion, hatred, affection, annoyance, zeal and derision are all terminologies of this personal measurement of values. Consistent with Gyekye, values are
maximum usually sensed. As a result of an emotional concern, valued beliefs are for this intention more than a moral standard of behaviour. By imparting conclusions with desire, cultural values form the respectable. Appropriately ‘good’ and ‘bad’ are not honestly laid out; good is keenly preferred and ‘bad’ is enthusiastically averted. Values are the excellent stimuli within a social group or community and the person; the effort fixed toward all kinds of end points (Frey, 1994). From how a ‘wealthy man’ is characterised as what’s foremost be frightened in existence are all pitched in the cultural values. However it is also this passion that virtually can inhibit an appreciation of values one of a kind from one’s personal beliefs. Emotional sensations may cloud a perfect idea due to societal values.

4. Cultural beliefs institute a character to be displayed: According to Frey (1994), a person’s behaviour is predisposed by social beliefs; by making the person to do things in a definite ‘morally-oriented’ means. When a definite response of behaviour is termed for a certain contextual of societal relations, such character disposition might be built in part upon the beliefs believed. The use ‘in part’ explains the fundamental effect of values on behaviour development. Additional effect comprise the level of a person’s self-image, social responsibilities, social rules, impulsive combined behaviours and the persuasion of other people (Gyekye, 2013). Therefore, the values identified only are certainly inaccurate forecasters of behaviours. As these values carefully match one another, they hold the behaviours people demonstrate and are not the opposite sides of the same coin, each is synonymous with the other.
Ghanaian Cultural Beliefs

Communication is more indirect. Ghanaian cultural values emphasise the need to cherish not to communicate information that would in any manner hurt themselves and other people and not interrupt the pleasant connections as well as informing somebody a news of death, sickness, accident, etc. the most effective way of communicating in Ghana is through proverbs, wise sayings, analogies (Gyekye, 2013). To Gyekye, silence is a communal means of communication in Ghana. A person who is not comfortable with an inquiry and think the questioner may not be happy the answer, will sort to saying nothing. Hagan as cited Awedoba (2005) stressed that it is well-thought-out negligent to be part of general and casual inquiring of discussions. Many get near to people when communicating and might try to grasp the person’s hand.

Sickness is mostly understood to be a very subjective and reserved problem which is not discussed publicly in Ghana. Based on scientific investigation of medication as well as views on natural beliefs and mystical tendencies, resilient bonds to indigenous Ghanaian treatment, herbal drugs and divine treatment complement the orthodox healing of a person, including treatment from a witchdoctor (Gyekye, 2013; Awedoba, 2005). According to Gyekye, disease comes from unplanned happenings; from both societal and divine differences. Sickness can come from resentment, looking for retribution or somebody craving for somebody to be sick. Gyekye (1996) indicated that making a decision is a household effort with the head (male) of the household possessing absolute power. Typically male head of a family’s consent is important. Forceful ways are congenial when justifications are implicit. Ghanaian cultural values define agony as divine, non-physical or emotive.
(Awedoba, 2005). Ghana’s cultural values expect physician or counsellor to be in the mood of sadness and apologies to the client before conveying a bad news.

**Cultural-Contextual Factors**

The cultures of various societies have techniques of helping or specific cultural approaches for ‘dealing’ with the miseries of a person (Kleinman, as cited in Peavy & Li, 2003). Adherents of diverse cultures differ significantly in dialect, beliefs, diet, clothing, family structures, songs, dance, career lifestyles, well-being healing, religiousness and sexual characteristics (Peavy & Li, 2003). Therefore, what helping means and by what means the help is practised is continuously culturally-defined.

Interestingly, when counsellor is challenged with a client from cultural background diverse from his or her own, the counsellor characteristically assert that language incongruity is the principal stumbling block to understanding (Peavy & Li, 2003). It is important to note that, language inconsistency repeatedly occurs and inhibit the mutual understanding. Though, Peavy and Li consider that as insignificant determining factor of counselling realisation or disappointment as inharmoniousness in culture and inadequate awareness of cultural codes in connecting to communication. Several conventional of professionals in the area of counselling have information about the communication patterns with regards to a particular culture and the prospects of counsellors from cultural backgrounds (Sue & Sue, 2016; Pedersen, 1996).

**Self-construal**

People in the individualistic cultures (Western) incline to understand their identity independently with orientation to their internal beliefs, emotional state and behaviours (Peavy & Li, 2003). On the other hand, members of more
collectivist societies (cultures) lean towards the recognition of the ‘self’ as fragment of a societal web. The self-identity to a great degree, is structured and defines what the actors perceive to be the cognitions, emotional state and behaviours of other people (Markus & Kitayama, as cited in Peavy & Li, 2003). Li (as cited in Peavy & Li, 2003) conducted a study to compare English-Canadians with Chinese, the study indicated that the people of Chinese origin are greatly in the cards to exhibit intimacy to, and interdependence with the household members. The dissimilarities in self-understanding may result into staid miscommunication pattern in the counselling process. For instance, a Ghanaian counsellor may assert that a client should be accountable for his or her choices as a personal actor while the client is motivated to sort collective resolutions in discussion with the household membership.

**Communication Styles and Miscommunication**

Communication may described as the repetition of making sense. Culture is assumed to be implicit as the entirety of communication methods and pattern of understanding (Schirato & Yell, 2000). Communication and culture nurture and be noticeable among each other. Psychotherapy is apprehensive at once with communication patterns and meanings of culture as well as a communication attainment, grounded mostly on the cooperation of understandings throughout counselling process. Humans communicate based on guidelines of discourse formed by culture (Labov & Fanshel, as cited in Peavy & Li, 2003), a counsellor is destined to show diverse conversational patterns. They are culturally-defined conversational patterns that may extremely hold back the realisation of counselling communication.
Misunderstanding (miscommunication) with regards to communication in the conversations is recognised as an absence of recurring harmonisation, and not non-existence of dialectal understanding. Tannen (1981), pointed out that miscommunication arises not just from absence of similar morphological eloquence, but from the hearer’s absence of sociocultural information, and consequently misinterpretation. This highlight Labov and Fanshel as cited in Peavy and Li (2003)’s view culture shaping discourse. Allowing person to be at ease in a dialogue. Gumperz (as cited in Peavy & Li, 2003) recognised the significance of synchronised interactions in conversation. The therapist originates from a cultural background and education which supports interrogation, the drift of speaking and straight eye connection. On the other hand, the client emanates from a culture in which interrogative is weakened, conversation is frequently exchanged by humble quietness and eye communication is viewed as a private abuse.

Silence

It is typical for people of Western culture to reply to quietness with ‘talk’, that could be a continuance of an unchanged subject matter or an overview of a fresh subject matter so as to overwhelmed their anxiety (Peavy & Li, 2003). Countless novice in the counselling field may basically seal the quietness or muteness of a client with a word. Peavy and Li indicated that to the issue of quietness proficiently, the counsellor ought to know the variations with the culture in which connotations are recognised to ‘silence’. Lebra (as cited in Peavy, 2003) has indicated that in most Asian cultures especially Japanese, ‘silence’ serve a tool to liberate a person from saying the true state of an issue, as a result of circumventing shame, humiliation and societal displeasure. He
further stressed that, people of Japanese beliefs do not engage in verbal dispute which is a symbol of the violation of communal congruence. This help communicators to frequently select ‘silence’ as a disagreeing approach. For this reason, ‘silence’ undertakes unrestrained responsibilities that ‘words’ may not.

In similar vein, as in Ghanaian culture, ‘silence’ is an influential communicative technique. Peavy and Li (2003) opined that a person of a few words, a reserved person is professed to have a great disposition. ‘Silence’, as a communicative approach, is recognised in counselling as a communication technique.

**Turn-Taking**

Turn-taking denotes who should speak, frequency of speaking and exactly how long (Sacks, Schegloff, & Jefferson, as cited in Peavy & Li, 2003). In the counselling field, the therapist and his or her client commonly build a discussion and the harmonisation of turn-taking which is enormously significant, particularly for the expert who takes most of the turns and consumes most of the talking time. Peavy and Li (2003) are of the view that there are diverse value variances in taking turns. For instance, people of Western background have a tendency to take a time-consuming, monologue opportunities (angry) which authorise an irregular distribution of ‘turns’. This may lead to a great section of ‘turns’ in a subject matter they introduce during the counselling period. Conversely, Africans especially the Ghanaian are inclined to take diminutive ‘turns’ and dispense ‘turns’ consistently irrespective of the person who presented the subject matter (Yamada, 1990).

**Interrupting**
Narrowly connected to ‘turn-taking’ is the sensation of interfering in the communication process of counselling. In counselling, as in other situations, an ‘interruption’ may be considered as deleterious, impolite, destructive and ill-mannered (Zimmerman & West, as cited in Peavy & Li, 2003). Furthermore, it is a variable within a cultural practice. Interrupting a client in counselling is seen as a disrupting the run of a discussion in societies cherishing obsequiousness, individuality and provincial domineering (Murata, 1994). In a society whose culture values group dependency, recurrent disruption is a symbol of lively concern in what is being thought and displays that the hearer is enthusiastically contributing in the discussion (Tannen, 1989). When a person expresses his or her views, the other person attempts to assist. This occurrence is understood to be accurately coproduce or cooperate an exchange in a discussion. Li as cited in Peavy and Li (2003) established that people from collectivist cultures interrupt each other regularly in their discussions and as they do so in an accommodating manner (e.g., begin a new topic, modify a topic, lead a discussion, approve or disapprove) rather than invasive style (e.g., to decide, or support, or elucidate).

**Grounding of Common Beliefs**

The counselling relationship is to establish common ground. This is central focus during of the counselling practise because it provides the foundation and sustenance essential for the counselling work (Nytsul, 1999). Counselling is an interactional achievement (Sodowsky, 2009). Successful interaction in multicultural counselling is considerably problematic and multifaceted than in ‘intra-cultural’ counselling. Counsellors meet a far reaching difficult duty in creating a common ground. Thus, in ‘grounding’ a
communicative common views, values, cultural orientations, understanding, and beliefs in counselling requires a multiculturally-oriented professional (Clark & Brennan, 1991).

The principal duty for the realisation of intercultural counselling lies with the counselling specialist (Peavy & Li, 2003). They further explained that the professional’s understanding of the dissimilarities in ‘self-construal’, ‘turn-taking’, ‘interruption’ and the usage of ‘silence’ is a key to the building of ‘common ground’ with a client. Without ‘common ground’, there is a miniature foundation for an effective and successful counselling work. Other phonological tools may also assisted grounding beliefs in the counselling process. Familiar grounding is a fundamental development in many systems of dialogue (Clark & Schaefer, 1989; Clark & Brennan, 1991) and has been established to assist hearer comprehensive (Schober & Clark, 1989).

Li as cited in Peavy and Li (2003) found that, in both ‘intra-cultural’ and ‘inter-cultural’ dialogue, the more speakers involved in ‘grounding’ actions, the information a speaker communicate sounds well in the ears of the listener. It is coherent that successful counselling is reliant entirely on the extent of ‘common ground’ present to preceding discussion (Peavy & Li, 2003). Relatively, it hinges largely on just how considerably ‘common ground’s’ conversationalists negotiate and create meanings throughout the counselling procedure. In a broader view, the counsellor and the client manage their exchange and possess a pathway of their mutual experience and its ‘moment-by-moment’ modifications (Clark & Brennan, 1991). As a conversation in counselling advances, ‘common ground’ is established as well as developed and the communication in counselling effectively increased.
Basic Counselling Skills

Though counselling techniques need be efficient and reliable with a client prospects, they amount for a record of 12-15% of the achievement in the counselling process (Lambert, 1992). Factually, Frank and Frank (1991) stated that the skills used may be not inappropriate to the counselling process. Relatively the realisation of all skills rest on the client’s intellectual of cooperation with a counsellor. This point suggests that preferably, counsellors ought to choice for each client as the counselling process accords that, or could be conveyed to the accord of a help-seeker’s individual features and interpretation of the issue available at counselling. Similarly, this implies that counsellor must pursue education as numerous methods as they discover agreeable and substantial skills.

Counselling skills are the techniques a counsellor use to improve his or her discourse with a client. These techniques allow a counsellor to efficiently form a functioning cooperation and involve clients in a conversation that is both supportive and expressive. According to Frank and Frank (1991), building a noble counselling counterpart could encompass both enlightening the client about the therapist’s theoretical system and if required, altering the system to take into consideration the ideas, values and philosophies the client takes to counselling process. For a successful counselling, the counsellor must possess a collection of abilities and techniques. Nevertheless, a counselling technique is not tangled to a specific stage, approximately techniques could be central in more or less a stage than the others. There are two major types of skills counsellors employ during counselling sessions. They are verbal and non-verbal skills.
Verbal Skills

Verbal skills are the distribution of data of characters by the usage discourse. Counsellors functioning inside a cultural setting must effectually practise ‘verbal’ discourse that contains enthusiastically implicit vocalised words, as well as ensuring that the expression, anxiety and nature of speech with which the arguments are articulated appropriately. Corey (2001) asserts that questioning and listening in counselling are basic skills required to function effectively as a counsellor. The counsellor uses questions to clarify his or her understanding of what the client is feeling. Corey further explained that inquiries throughout the therapeutic meeting may lead to different topics for conversation. Thus, techniques may help to identify a problem as well as help to explain data that initially may well appear confusing to the counselling professional.

The listening process is the progression of fine-tuning in prudently to a client’s communications and answer back precisely to the connotation after the ‘message’ (Singh, 2007). To Singh, a successful counselling is built on listening. Additionally, Ko (2014) said that a client at counselling, who does not listen may consequentially lead to emotional pain in different levels. Furthermore, Nelson-Jones (2013) is of the view that listening by counsellors rest on numerous important positives concerns such as building rapport between the counsellor and client. This helps bridge the cultural and background differences and helps clients to experience feelings. Listening symbolises a combination of the abilities of understanding of a matter and consideration of emotion. It help stimulates in a client the sensation of being heard.
The interaction between two people in requires attention, counsellors demonstrating silent or passive listening might inform the client. Where quietness (silence) is not adeptly and sympathetically engaged by the counsellor, the help-seeker might felt the counsellor’s silence, like detachment, apathy or separation, primary to breaks in the belief and welfare of the healing relationship as a result of cultural difference (Lane, Koetting, & Bishop, 2002).

Furthermore, reflection is genuinely apprehended views and implications essential to life familiarities, forming part of verbal skills. Challenges to effective reflection can be attributed to a difference in client’s cultural background as a result of inaccurate and inconsistent clients’ semantic and tonal descriptions of presenting problems (Egan, 2007). The use of reflection designate an unwritten hand mirror help by the counsellor.

**Non-Verbal Skills**

Non-verbal techniques counsellors employ includes ‘eye contact’, ‘nods’, ‘empathy’, ‘not moving around’, ‘mirroring body postures and language’, ‘leaning forward’, etc. Scholars in the field of counselling guesstimate that around 80 per cent of a discourse proceed in a non-vocal form.

‘Posture’ and ‘gestures’ offer numerous indications to a person’s disposition, self-sensitivity and psychological outlook (Geldard & Geldard, 2001). Considerably about ‘gestures’ is culturally-connected: people of the Italian background, for example, are recognised for their ‘hand gestures’ even though communicating among themselves and with others. This is denoted as a ‘body cue’ to the liveliness, or desire, that they communicate about some issues. ‘Eye contact’ is an essential and respectful manner in the Western culture while talking or heeding to somebody (Geldard & Geldard, 2001).
Ridley and Upidi (2002) emphasised that ‘empathy’ is the heart of quality counselling and as a technique desirable in a multicultural discourse. Bennet (1993) clearly described empathy as an effort of the counsellor to recognise by visualising or understanding client’s standpoint and inform that thought back to the client. This is grounded on a postulation of variance and suggests reverence for that variance and a willingness to offer up briefly one’s personal worldview to resourcefully contribute further.

Relating with clients of diverse cultures and displaying ‘empathy’ throughout the process of counselling may be perplexing and passionately arduous. Understanding some rudimentary strategies for replying ‘empathically’ during a culturally-related counselling process may be beneficial. Raskin and Rogers (1995) suggested that empathy involves entering into and experiencing the client world beyond culture and stare with a renewed and unfrighten eye at the basics of which the client in fear. Empathy is concerned with the ability of a counsellor to appreciate the experiences a client and converse this thoughtful message of emotion. According Rogers (as cited in Raskin & Rogers), empathy entails the ability of a counsellor to see the ‘internal-frame’ of orientation of a client. In the view of Egan (1990), it is moving towards the inside of the secretive ‘perceptual world’ of the help-seeker and as the counsellor become thoughtful to emotional state of the help-seeker, whether worthy or depraved.

In conclusion, some counselling techniques may be more or less successful centred on a help-seeker’s culture, tribe, ethnicity, sexual orientation, beliefs and socioeconomic status. Counselling techniques which work well for help-seekers from diverse cultures might not be applicable and suitable for all
help-seekers. The most important dissimilarities is linked to ‘body language’. This is put to use as a mode of conversing in some cultural settings. Diverse cultural groups incline to use degrees of speaking or ‘hand movements’ as means to converse. ‘Eye contact’ is an alternative method of ‘body language’ that may communicate dissimilar things for individuals of diverse cultures. For instance, Li (1999) postulated that direct eye contact is seen as an indication of impudence in some African, Asian and Latin cultures, particularly when children stare in the eyes of adults. The counsellor who misconstrues this practise might alter the kind of association in a manner that could not be supportive.

**Empirical Review**

Hays (2008) testified that the evaluation and assessment of counsellors’ competence is essential to safeguard culturally suitable services of counselling to a progressively different clients. The work of Hays described and critiqued instruments accessible for the assessment of multicultural counselling competency. Assessing multicultural counselling competency offers information on counsellors’ and counselling students’ degree of knowledge, skills and belief-attitude (awareness) to make informed decisions and direct multiculturalism curriculum. According to Hays, the assessment instruments encompasses a negligible aggregate of available psychometric data. A conjoint disapproval of the distinct assessment instruments deliberated before is that added element of systematic and corroboration inquiries are desirable before the tools could be used for assessment processes within the counsellor training courses. Hays recommended that the assessment procedure is multifaceted in form and should include the provision of supplementary data in psychometric
for current instruments; increasing the capacity of counsellors’ knowledge, skills and beliefs-attitude (awareness), and expertise for other burdened groups outside ethnicity/tribes.

Allison, Crawford, Echemendia, Robinson and Knepp (1994) explored multiculturalism by envisioned at reacting to an total of the ‘one-side’ problems relevant to the comprehensive education of professional of help-seekers to offer applicable and proficiency of the counselling as a service to a diverse people. They pointed out that they focused on the trained knowledge (understanding) of counsellors in association to the delivery help-seeking services to a variety of tribal/ethnic or social groups.

The survey mailed ‘600’ surveys, ‘292’ of the research subjects answered to the mailed questionnaires (surveys), signifying a return rate of ‘48.7%’. Study subjects comprise of 162 females, 125 male and 2 did not give their sex role. Allison et al. (1994) initially examined the expose (disclosure) and entry (entrance) to a faculty and personnel of different ethnic strata they fit in. The majority (78%) of the study subjects answered positively to disclosure and contact to normal beliefs of a ‘department’ (faculty). They indicated that a mean of ‘2.75’ racially dissimilar departmental (faculty) memberships contact, these covered diversity of distinct by philosophy, belief, social class or status, sexual role and ill health. With respects to multicultural courses, around ‘87’ study subjects signifying ‘34%’ indicated contact (access) to a course in an educational curriculum which is engrossed on delivering helping services in a region to dissimilar individuals. Moreover, the survey showed that 65 research subjects took courses in multicultural counselling.
In the view of the authors, it stayed frustrating to recognise the difference among study participants in assisting dissimilar clients and their perceived proficiency. This proposes that professionals of help-seeking who detected insufficient in their multicultural capability continued on to assist help-seekers. Furthermore, the study emphasised that additional ‘11%’ of the study participants specified that the training they have received was insufficient for their current role as a counselling professional. They highlighted the fact that this climax the problem of the convenience of extraordinary class of service to clients in a differentiated residents or populace of a particular community. The researchers further indicated that the findings put forward that there has been greater success in solving education of therapists regarding issues of ethnicity compared with training on diverse groups such as sexual orientation or ill health. Moreover, the researchers indicated the essence for additional combination of multiculturalism facts throughout the curriculum and an increase in department (faculty) from a varied people.

Furthermore, Arthur and Januszkowski (2001) conducted a study to address the issue of the multicultural counselling of helping professionals through Canada. The survey sought answer four research questions. A simple random strategy of sampling was employed to selected counsellors in Canada. A total of 181 (male=62, female=119) research subjects were selected for the study with the mean age of 46.5 years. The researchers added that majority of the participants were involved as a counselling professional over a decade. It was reported that 34% had done at least one course or programme on multiculturalism, nonetheless, 64% had showed up in training (workshops) or conferences discussing multiculturalism issues in psychotherapy.
A lot of the current problems that the therapists described were worries communicated by the common community; though, the therapists stated that perplexing effects of beliefs (culture) for thoughtfulness (understanding) the form and scope (nature) of help-seeker’s problems, the possible for worth struggles, and the requirement to develop ethnically suitable treatment plans. The study findings (MANOVA) showed that therapists with advanced multiculturalism competency had a considerably advanced proportion of in cultural terms varied help-seekers in their record books and have taken significantly more educational training on multiculturalism. The researchers stated that the demographic data (age, gender, educational level or years of professional experience) had no significant difference among the multiculturalism strata (high and low).

The survey emphasised the importance of sufficient preparation and schooling for therapists who help ethnically different help-seekers. Similarly, the therapist’s practises afterward the completion of a counselling programme are significant for the development of multiculturalism in counselling (Arthur & Januszkowski, 2001). The researchers further pointed that though the survey has recommended most important characteristics that are associated to greater or lesser degrees of multiculturalism competences, present guiding principle fails to propose criteria and procedures to assess psychotherapy development in a growing multicultural counselling environment. Arthur and Januszkowski suggested that studies must be conducted to show the way the education of a counselling professional could stimulate the transmission of multiculturalism on the domains of attitude-beliefs (awareness), understanding (knowledge) and abilities (skills) to significant and appropriate run through with help-seekers.
Constantine (2001) also investigated multiculturalism. The author stated that the purpose of the study was to inquire the function of preceding multiculturalism education, a professional counsellor’ theoretic alignment, and rational (cognitive) and emotional (affective) understanding in envisaging therapists’ multi-ethnic situation abstraction (conceptualisation) skill. A questionnaire was used to collect information (data). The survey-questionnaire package comprised: “(a) a short background information of participants, (b) the ‘Perspective’ ‘Taking’ and ‘Empathic’ ‘Concern’ sub-measures of the Relational (Interpersonal) Reactivity Index and (c) the multi-ethnic situation abstraction (conceptualisation) skill (ability) practise. The background information comprised statements on culture, gender, ‘age’, utmost academic qualification, theoretic psychotherapy alignment, years of psychotherapy practise, and the number of academic multicultural counselling programmes.

Additionally, the researcher simply made use of two of the measures in the study: ‘Perspective’ ‘Taking’ sub-measure which assessed a persons’ character propensity to reflect other peoples’ opinion; and, the ‘Empathic’ ‘Concern’ sub-measure assessed study subjects’ emotional state of anxiety, warmth and compassion for other people. In the multiculturalism situation of abstraction (conceptualisation) ability exercise, the research subjects were made to respond to an essay (vignette) and requested to compose an abstraction (conceptualisation) of how they understand the source of the help-seekers’ rational-emotive problems and to compose an abstraction (conceptualisation) of effective therapeutic intervention for addressing the help-seekers’ problem. To the author, the situation abstraction (conceptualisation) practise (exercise) was positioned initially in the set with hope that the background information survey
and measures might not influence research subjects’ answers to the situation composition.

In deliberating on the outcomes, the researcher indicated that the findings of the inquiry provide supplementary backing to the progressive effect of multiculturalism in developing counselling professionals’ apparent multiculturalism competency. According to Constantine (2001), the results might suggest that counselling professionals’ capacity to use viewpoints and methods from a multiplicity of psychotherapy philosophies might be valuable to them in functioning with multi-ethnic help-seekers. In respects to the active understanding (empathy) findings, the author pointed that these outcomes might have potential consequences for psychotherapy educational courses to recognised the role of empathy in the development of multiculturally knowledgeable scholars.

In a study conducted by Fraga, Atkinson and Wampold (2004), it was aimed at assessing the association among ethnic groups and likings for therapists’ multi-ethnic attitudes-beliefs, understanding (knowledge) and abilities (skills). The study used questionnaires (three paired-comparison) to obtain data from participants. Fraga et al. (2004) constructed the instrument (questionnaire) and separated it into three to obtain information on attitude-beliefs (awareness), understanding (knowledge) and abilities (skills). Each survey obtained one of the multiculturalism domains. This was based on the multicultural counselling competencies acknowledged by Sue, Arrendondo and McDavies (as cited in Sue & Sue, 2016). According to Sue et al. (1999), the developed domains had nine (9) items on attitudes-beliefs competency, eleven
(11) items on understanding (knowledge) competency and eleven (11) items on abilities (skills) competency.

In the study, an abridged forms to each of the competences remained settled for individually domain and in ‘each’ survey, the competences declarations were harmonising respectively. According to Fraga et al. (2004), this lead to the creation of an attitudes-beliefs (awareness) survey (questionnaire) containing ‘36’ statements, an understanding (knowledge) survey containing ‘55’ statements and an ability (skill) survey containing ‘55’ statements. In introduction of the survey form (questionnaire), Fraga and his colleagues suggested that the research subjects need to envisage that they were having a private issue and remained to approach a counselling professional for assistance; a combination of therapist competences existed in individual statement and they selected the distinctive feature they desired in twosome.

The researchers revealed that at hand was more or less common liking for about multiculturalism competences above the others in which some of the inclinations may be different dependent on the culture of the participant. The researchers further revealed that the liking for more or less of the competences varied dependent on the background of the participants. In broad-spectrum, Fraga et al. (2004) indicated a changing inclination as showed: beliefs-attitudes had 5, understanding (knowledge) 5 and ability (skill) 7. Specially, they stated that with the attitudes/-beliefs competences, the utmost inconsistency in relation to the ‘beta’ burden ascended for “reverences native counselling models and smaller ethnic group counselling systems” (p. 60).
Conceptual Framework

Culture is universal. According to Sewell (2005), culture must be treated as an established scope dedicated to the creation of understanding. Counselling itself is seen as concerned with the pursuit of meaning rather than interests or material gain. Culture is understood as a scheme of secret code and connotations that determines human behaviour. Every society has its own culture, this way of viewing human. Culture is embedded in everything they do (the idiosyncratic structures and how life is commonly perceived by a category of societies in a habitation or phase; this comprises common views (beliefs) and principles (values), family structures, lifestyles, traditions, linguistic, religious conviction, times gone by, natural features, or relationship).

Counselling is a western phenomenon, which came out of a culture. In studying these traditional theories and practices of counselling, the counsellor is faced with challenges as a result of his/her biases view of human nature due to cultural differences. It is however important for the counsellor to adapt these different practices to be enabled to offer counselling assistance. This shows that numerous counselling professionals are left unrehearsed and untrained in multiculturalism for the task of helping ethnically different and tribal groups in Ghana. The conceptual framework (fig. 1) proposes that the counsellor has personal beliefs and cultural values and has learned theories and practices of counselling based on specific European-American culture (Sue & Sue, 2016).
Consequently, the interaction between the various variables as represented in figure 1 reflects how culture influences counselling services. In this conceptualisation, the centrality of the counsellor is important as he brings in his expert knowledge, skills, beliefs and exhibits therapeutic techniques within the specific culture.

The client seeking counselling has strong personal beliefs and values as a result of his self-concept. He is therefore exposed to therapeutic interventions of western culture, finding himself in the state of incongruence. The desires of the client will direct the approach that must be adopted. The cultural background of a client will determine the cultural dimension; as a result, the counsellor chooses a therapeutic technique to assist the client. During the counselling sessions, there are certain cultural-contextual factors which pose a challenge for the counsellor to effectively discharge his skills throughout the help-seeking process.
A counsellor must be capable of navigating into double cultures; his/her personality and a clients’ (secondary) cultural beliefs. In exploring, a counsellor need to delve deep into the client’s culture to be familiar with his culture and understand the perspective a client is coming from with his problem as well as the way of life. In order to accomplish that, the counsellor needs to have a previous or learnt, information about a help-seeker’s personality in addition to ethnic/tribal anticipations.

The counselling professionals may not continuously be anticipated to obtain a previous facts (knowledge) or to be instantaneously well-informed around the beliefs of the individual help-seeker they come across in the counselling process. Nonetheless, may be anticipated to be observant in place of, and uncluttered to, the sociocultural distinctions which enable an effective psychotherapy process. The ability to study new beliefs, attitudes and traditions is fundamental for a counselling professional to relate proficiently in multicultural situations.

Summary of Literature Review

Commencing from the directly above examination of relevant related works, it is proposed that the impact of cultural variables on therapy must not be underestimated. The realm or world of a man is altering to match the desires of persons and collections with regard to values, ethnic tribe or vicinity. Ethnic dissimilarities will carry on to occur in both inter/intra tribes or social class, even when these cultures are related. Multiculturalism philosophy of counselling has laid emphasis on the personality variances which has occupied this assertion.
It is evident that cultural variables are rooted in a person’s daily activities irrespective of whether he/she recognises it. This hesitant dispute about the optimistic counteract to help-seeking (counselling) is described with reference to sociocultural diversity. Consequently, it must not be perceived as worldwide as it involves dissimilarities which are held in respect to of physical restrictions, views, socio-political factors, social class, tribes and the beliefs of individuals of smaller groups within a particular nation or locality. It is imperative to stress that sociocultural variables are not the lone factors manipulating the behaviour of man.

In addition to conceptualisation, a great hard work has remained to be tapped into persons’ and education programme’s effectiveness in comprehending, assessing and applying multiculturalism in counselling. Thus, the notion of multiculturalism competency is progressively expanding further than its old-fashioned focus on cultural thoughtfulness to acknowledgement. It appears that no study has been conducted to ascertain the actual situation in Ghana.

It was evident that a lot of instruments have been developed by past researchers such as ‘multicultural counselling inventory (MCI), cross-cultural counselling inventory-revised (CCI-R) and multicultural awareness, knowledge and skills survey (MAKSS) to measure various aspects of the counsellors’ multicultural competence. These studies have included investigations of multicultural counselling competencies, indicating that counsellors’ beliefs, race and ethnicity significantly contribute to multicultural competence (Sodowsky et al., 1998). Despite the availability of numerous multicultural instruments, a new instrument was developed since the already existing ones
were developed in a culturally different settings making their adoption into the Ghanaian setting impossible.

It is vital to note here that, although many works have been done on the field of multicultural counselling, some literature gap still exists. The gap stems from the fact that none of the studies above were carried in Ghana. The aim of the study was to investigate Ghanaian professionals in the field of counselling’s observed existing multi-ethnic/tribal competencies, obtained through the exploration of the therapists’ understanding (knowledge), abilities (skills) and attitude-beliefs (awareness) of Ghanaian cultural beliefs and ethnicity. This study functions as a groundwork for, bearing in mind forthcoming practises in the education of counsellors as well as the development of counselling programmes in Ghanaian high educational institutions.
CHAPTER THREE
RESEARCH METHODS

This chapter deals with the research methods used in carrying out this study. It discusses the research design, population, sampling procedure, instruments developed and how reliabilities and validity of the Multicultural Competence Questionnaire (MCQ) was ensured. In order to determine therapist’s multiculturalism competency as well as any association(s) between competency dimensions, three research questions and two hypotheses were formulated. The data collection and data analysis procedures are also discussed.

Research Design

The descriptive survey was used in this study. A survey of counsellors’ multicultural competence, cultural-contextual factors which influence counselling as well as how Ghanaian cultural beliefs influence counselling techniques, implications was made about the way these counsellors perceived their competency level in multicultural counselling setting.

This design was considered appropriate since the study sought to describe the multicultural competence level as professed by these counsellors and cultural-contextual factors which influence the process of counselling. The aim was to produce a ‘snapshot’ of awareness of attitude-beliefs (awareness), understanding (knowledge) and abilities (skills) that counsellors need to function effectively with diverse people (Sue, 2001; Ridley & Kleiner, 2003). Similarly, Fraenkel and Wallen (2000) indicated that cross-sectional survey has the potential of providing a lot of useful information about the subjects of the
study, for instance, how they perceived their multicultural competence and cultural contextual factors which influence counselling.

In the view of Mitchell and Jolley (2004), the descriptive survey is more economical because it makes it possible for many subjects to be studied at the same time. This was the case in this study, since as many as 45 counselling professional were selected and examined at the same time as well as the economy of time of the investigator and the universities involved in this study since each of the four public universities involved in this study was visited only once during the data collection stage.

Even though the research was effective, flaws identified in using this design were; ensuring that questions were clear and not misleading, getting participants to answer questions thoughtfully and honestly, (Fraenkel & Wallen, 2000; Cohen, Manion & Morrison, 2000). This was because in answering the items on the instrument (MCQ), the researcher had to give further explanations of some of the items and also from time to time advise the participants to take their time to read the items on the MCQ earlier and continued with the answering to them.

Population

The population of this study was all counsellors and teachers of counselling programmes in all the public universities in Ghana. Out of the public universities in Ghana, four of them served as the accessible population for the study. Conversely, the accessible population was 45. Table 1 presents the number of counsellors and trainers of counsellors in all the four public universities in Ghana.
Table 1: Selected Counsellors in the Public Universities in Ghana

<table>
<thead>
<tr>
<th>Description (University)</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kwame Nkrumah University of Science and Technology (KNUST)</td>
<td>5</td>
</tr>
<tr>
<td>University of Cape Coast (UCC)</td>
<td>19</td>
</tr>
<tr>
<td>University of Education, Winneba (UEW)</td>
<td>17</td>
</tr>
<tr>
<td>University of Ghana (UG)</td>
<td>4</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>45</strong></td>
</tr>
</tbody>
</table>

Source: Counselling Units/Department of Guidance and Counselling (2017)

**Sampling Procedure**

In this study, stratified and census sampling techniques were used. The first stage (stratified sampling technique) involved categorisation of universities into two groups, namely; public and private universities. Furthermore, the public university was subdivided into counsellor trainee and non-counsellor trainee universities. Two universities were drawn from each subgroup to obtain a total of four public universities. These four public universities (UG, KNUST, UCC and UEW) are the oldest universities in the country and they have well-established counselling units. Furthermore, the UCC and UEW are noted for the training of counsellors through academic programmes.

The second stage used the census sampling technique to selected participants from the accessible population (Molenberghs, 2013). The study used the census sampling technique as a result of the reduced form of the intact accessible population. From these four universities, all counsellors were selected for the study. The researcher obtained representatives of the selected public universities in the proportion in which they occur there. In all, 45 counsellors formed the sample for the study. The sample size comprised 4
(8.9%) counsellors from UG, 5 (11.1%) from KNUST and 19 (42.2%) from UCC and 17 (37.8%) from UEW.

Data Collection Instrument

The study used a questionnaire to collect data. I developed a Multicultural Competence Questionnaire (MCQ), the MCQ is a 41 items; the MCQ after development was used to assess multicultural competence of counsellors and how counsellors apply the constructs of multicultural counselling competencies. The MCQ was divided into two parts, the first part measured multicultural domains and was labelled Cultural Competence (CC). The second part of the questionnaire obtained participants’ views on how Ghanaian ethnic/tribal beliefs, customs and norms outline the choice of therapeutic skills/techniques.

In the view of Worthington and Whittaker (2006), errors that are made early on in a data collection instrument development frequently cause later complications, a sum of watchful stages was taken to design an instrument (questionnaire) to ascertain multiculturalism competency. DeVellis (2003) proposed that the ensuing ‘eight’ (8) main steps shape the data collection tool designing: (1) simply outline the idea anticipated for the dimension, (2) construct a declaration (statement) category, (3) outline the design of the tool (instrument), (4) solicit specialists to assess the identify declaration category, (5) reflect on the enclosure of rationalisation of the declarations (statements), (6) hand out the tool (instrument) to a developed stratum, (7) appraise declaratives (statements), and (8) enhance the tool’s (instrument) facet. With regards to DeVellis’s (2003) proposal, the preliminary phase employed in the tool (questionnaire) construction was to examine present methods of
multiculturalism instruments and used current philosophy to visibly outline and define what culturally-related competency tool (instrument) could give the impression like the three domains of multiculturalism and the cultural-contextual factors instrument (questionnaire).

I created the item declarations by means of current conception, theories and scholarly articles concerning cultural diversity (multicultural counselling), basic counselling skills (techniques) and contextual factors of culture. Throughout the item generation of declarations (statements), it was unwaveringly recognised that a ‘Likert’ type may be the pre-eminent answering system for assessing research subjects’ beliefs-attitudes, ideas and thoughts about multiculturalism (DeVellis, 2003). Furthermore, statement items that produced in a format of an affirmation declaration and attention was set as to whether a statement may back a changeable stage of agreement and divergence.

The cultural competency (CC) section was used to ascertain the counselling professionals’ consciousness of their cultural competences. The CC had three sections; the understanding (knowledge) subdivision obtained information on whether therapists are well-informed about their culture, help-seeker’s cultural beliefs, understanding of the world, and hopes for the process of psychotherapy with 9 items; the abilities (skills) subdivision obtained information on therapists’ proficiency to facilitate in an approach that is ethnically/tribally intelligent and appropriate with 8 items and attitude-beliefs (awareness) subdivision elicited information on the extent to which a counsellor is thoughtful to her/his individual beliefs and prejudices and the way such variables can impact views of the help-seeker, the help-seeker’s issue and the
process of psychotherapy with 13 items, in all bringing the total number of items on the CC to 30.

The responses on the CC ranged from ‘Strongly agree’=4, ‘Agree’=3, ‘Disagree’=2 and ‘Strongly disagree’=1 in that continuum for Knowledge section, ‘Very accurate’=4, ‘Somewhat accurate’=3, ‘Somewhat inaccurate’=2 and ‘Very inaccurate’=1 for Skills and Very Well=4, Fairly Well=3, Barely=2 and Not At All=1 in that continuum for Awareness (Attitude-Beliefs) section. Items were verbalised that a mark of 1 designated small (low) multiculturalism competency and a mark of 4 designated extraordinary (high) multiculturalism competency. Item statements were behaviourally and attitudinally stated, including (e.g., declarations originate with phrases such as [I am able to], [I realise], [I design], [I am skilled in], [I am able to]).

**Description of CC part sections**

The CC part sections were designed as an evaluation instrument to assess multiculturalism competency in the Ghanaian public universities’ framework. It strives to measure the competences essential for relevant and multiculturally subtle effort in personnel services (student affairs) within public universities in Ghana. This questionnaire of statements allowed counsellors to self-appraise the degree to which cultural understanding (knowledge), abilities (skill) and attitude/beliefs (awareness) have been attained. More or less of the research subjects over-estimated the extent of competency while other participants under-estimated their competency. Table 2 presents a description of CC part.
Table 2: Description of the Sections on the CC

<table>
<thead>
<tr>
<th>Section</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Knowledge</td>
<td>The extent to which counsellors are knowledgeable with Ghanaian culture that exist among the various ethnic groups, understanding (knowledge) of the help-seeker’s cultural beliefs and their worldview.</td>
</tr>
<tr>
<td>Skills</td>
<td>The extent to which counsellors view their basic counselling skills with regards to Ghanaian culture within the ethnic groups in Ghana and the capability to mediate in a way that is ethnically subtle and applicable.</td>
</tr>
<tr>
<td>Awareness</td>
<td>The extent to which a counsellor is subtle to her/his subjective beliefs and prejudices and the way such things might impact opinions of the help-seeker, the help-seeker’s issue and the therapeutic process</td>
</tr>
</tbody>
</table>

The second part of the questionnaire (Skills, Cultural Contextual Factors), was developed to gather data on the understandings of research subjects; whether Ghanaian cultural beliefs and cultural contextual factors influence counselling techniques and counselling service in Ghana. It was divided into two sections. Section (A) contained 5 items and cover items on how cultural beliefs and values in Ghana influence the selection of basic counselling skills and techniques, four Likert-point scales (‘Strongly agree’=4, ‘Agree’=3, ‘Disagree’=2 and ‘Strongly disagree’=1) was used to measure the degree to which counsellors come to an agreement with the item declarations. Section (B) contained 6 items; it elicited information from participants on cultural-contextual factors, the responses in this section ranged from ‘Strongly agree’=4, ‘Agree’=3, ‘Disagree’=2 and ‘Strongly disagree’=1.

Pilot-testing

The data collection instrument (MCQ) was pilot-tested at University of Mines and Technology (UMaT) and University of Professional Studies (UPS)
in the Western and Greater Accra Regions of Ghana respectively, with similar characteristics as those that were used for the actual study in the selected four public universities. Ten participants were selected for the pilot-test. In all, there were 6 males and 4 females who took part in the pilot-test with each respondent responding to the two instruments. I retrieved the instrument from the participants immediately after completion and the data obtained analysed and were used to check validity.

**Reliability**

The reliabilities of the instrument were estimated by using the Cronbach’s alpha to determine whether each item under the various sections was related to each other after the actual data collection for the study. Results obtained from the study were compared against the initial reliabilities. After the pilot testing exercise, the reliability estimates obtained ranged from 0.88 to 0.91 on the counsellors’ Cultural Competence (CC) part (as shown in Table 2) with an overall reliability estimate of 0.88. On the Skills, Cultural Contextual Factors part, the alpha reliability estimate obtained was 0.76. Table 3 presents the reliability estimates of the sections on the CC part after the actual data collection exercise.

<table>
<thead>
<tr>
<th>Section</th>
<th>Reliability Estimate</th>
<th>No. of Items</th>
</tr>
</thead>
<tbody>
<tr>
<td>Knowledge</td>
<td>0.91</td>
<td>9</td>
</tr>
<tr>
<td>Skills</td>
<td>0.89</td>
<td>8</td>
</tr>
<tr>
<td>Attitude-Beliefs</td>
<td>0.77</td>
<td>13</td>
</tr>
</tbody>
</table>

Source: Field Survey, Mensah (2017)

These reliability estimates were considered appropriate based upon the threshold of 0.60 suggested by Sodowsky et al. (1998) in determining whether
a research instrument is reliable or not and revealed that these sections were reliable.

Validity

The MCQ instrument was given to my two supervisors to define the content-face cogency (validity) of the tool especially since one of them had conducted similar research involving multicultural counselling. I used numerous foundations of information for my data collection tool, comprising critically: preceding multicultural assessment tools, advanced by other scholars; the study outline established from the appropriate works, but self-sufficient of previous assessment tools; comment from preliminary study participants and my supervisors on the representativeness of questions. Through this process, the appropriateness of the language used was checked in order that the participants understood the items on it. Again, certain wordings which were perceived to be ambiguous were also modified as well as checking the various items to certify that the item statements really assessed what they were intended to measure.

Data Collection Procedures

The self-constructed MCQ was used to collect data for the study within the months of September 2017 and February 2018. Prior to the actual data collection, the four public universities were visited by the investigator to create rapport between the researcher and the universities in question and also agree on when to collect the data. For every respondent, I gave the questionnaire to, I enlightened the aims of the research as well as assuring them of confidentiality of their responses.

The instrument was administered by the researcher in the various universities at the offices of the participants so that they will respond
accordingly. I gave the instrument to the participants and ask when I can pick it and luckily, they all agreed the same day. I went round to distribute the instruments, after three hours I went back to collect them. In all, 45 questionnaires were distributed and 45 were collected indicating 100% return rate.

**Data Processing and Analysis**

To answer research question one on how counsellors perceived their multicultural competence based upon the three dimensions (attitude=beliefs [awareness], understanding [knowledge] and abilities [skills]) on the CC part sections, the data obtained from the counsellors on the CC were scored for individual counsellors after which individual item means and overall section means were calculated. In order to do this, the responses that were obtained from the data collection process were coded from 1-4 for positively worded items from ‘strongly disagree’ to ‘strongly agree’; ‘very inaccurate’ to ‘very accurate’ and ‘not at all’ to ‘very well’ in that continuum. This indicated the relative standing of the individuals on the dimensions on the perception instrument. The means of individual items of the section and section means were ranked against a standard benchmark (decision rule) I have computed to determine which items deserve consideration. For example, all sections have the scoring keys of 1, 2, 3 and 4, making 4 items. The standard benchmark was computed as $\frac{1+2+3+4}{4} = 2.5$. A higher mean above the standard benchmark shows that the majority of the participants indicated that they have high multicultural competence while a mean below the standard benchmark indicates low multicultural counselling competence. Furthermore, the rate of recurrence
(frequencies) and fractions (percentages) were used to show the pattern of responses for each item.

Research Question Two sought after to determine the views of counsellors on the extent to which the selection of counselling techniques is influenced by Ghanaian cultural beliefs and values during the counselling process. The responses that were obtained from the data collection process were coded from 1-4 for positively worded items from ‘Strongly Disagree’ to ‘Strongly Agree’ in that continuum. Individual item means and standard deviations were computed. I used a decision rule of 2.5 to determine which items need to be commented on. A higher mean above the decision rule implies that most of the participants agreed to the statement and vice versa.

Research Question Three sought to determine the views of counsellors on the extent to which cultural-contextual factors influence the counselling process in Ghana. To answer this question, individual item averages (means), ‘standard deviations’ and rate of recurrence (frequency distributions) of the various items on the instrument was computed. The responses that were obtained from the data collection process were coded from 1-4 for positively worded items from ‘Strongly Disagree’ to ‘Strongly Agree’ in that continuum whiles for negatively worded statements the coding was reversed. The researcher used a decision rule of 2.5 to determine which items need to be commented on. A higher mean above the decision rule implies that most of the participants agreed to the statement and vice versa.

Research Hypothesis One was on whether there remained any substantial (significant) differences in multicultural counselling competencies of counsellors centred on gender. To test this hypothesis, a multivariate analysis
of variance (MANOVA, [one-way]) was conducted at 0.05 level of significance. The second Research Hypothesis was used to determine any possible associations among the CC section. To test this research hypothesis, Spearman Rank Correlation tests were conducted.

Chapter Summary

In this section, the methodological approach and the design of the study were outlined and situated within the descriptive survey design of research. It detailed the descriptive design used in the study and population. Building on the research design, this chapter further discussed the procedure for sampling, instrument (MCQ) for data collection, procedures used in collecting data as well as the processing and analysis of data obtained.
CHAPTER FOUR
RESULTS AND DISCUSSION

Introduction

In this section, the outcomes of the study into the assessment of multicultural competence of counsellors in the public universities in Ghana is showed and deliberated in with regards to the questions and hypotheses framed to guide the study. The Research Questions were analysed numerically by using descriptive statistical tools based on the three sections of the Cultural Competence (CC) part, namely; Knowledge, Skills, Awareness (Attitudes-Beliefs) and the Skills, Cultural Contextual Factors (SCF). The Research hypotheses one and two were analysed using MANOVA and Spearman’s correlation respectively. The outcomes (results) of the investigation are highlighted under the subsequent captions:

1. Demographic Characteristics of Participants
2. Research Question One: How do Ghanaian counsellors rate their multicultural competence on the dimension of knowledge, skills and attitude-beliefs (self-awareness), knowledge and skills in public universities in Ghana?
3. Research Question Two: How do Ghanaian cultural beliefs influence the use of counselling techniques in the counselling process?
4. Research Question Three: What cultural-contextual factors influence counselling services in public universities in Ghana?
5. Research Hypothesis One: There is no significant difference in counsellors’ perceived multicultural competence based on gender.

6. Hypothesis Two: There are no associations among sections on the CC section.

**Demographic Characteristics Participants**

A sample of 45 counsellors from four public universities in Ghana was involved in the study. The demographic characteristics of the participants include their gender, a total of multiculturalism programmes engaged and multicultural workshop grace with their presence. These elements were explored in order to offer a foundation for distinguishing amongst answers, subsequently, totalled answers might ignore some relevant quarantined issues. The demographic data were analysed using the rate of recurrence (frequency distributions). The outcomes (results) are presented in Table 4 and Table 5.

**Table 4: Gender of Participants**

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>Frequency (f)</th>
<th>Percentage (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>25</td>
<td>55.6</td>
</tr>
<tr>
<td>Female</td>
<td>20</td>
<td>44.4</td>
</tr>
<tr>
<td>Total</td>
<td>45</td>
<td>100</td>
</tr>
</tbody>
</table>

The Table 4 indicates that majority of the participants (55.6%) are males while 44.4% are female. Taking into account the levelled sexual category (gender) information, the study concluded that the totalled answers about the investigation into multicultural competencies of counsellors were more representative of the male perspective.
Table 5: Multicultural Courses completed and Workshop Attended

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>Frequency (f)</th>
<th>Percentage (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Courses</td>
<td></td>
<td></td>
</tr>
<tr>
<td>0</td>
<td>43</td>
<td>95.6</td>
</tr>
<tr>
<td>1-2</td>
<td>2</td>
<td>4.4</td>
</tr>
<tr>
<td>≥3</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Workshop</td>
<td></td>
<td></td>
</tr>
<tr>
<td>0</td>
<td>43</td>
<td>95.6</td>
</tr>
<tr>
<td>1-2</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>≥3</td>
<td>2</td>
<td>4.4</td>
</tr>
</tbody>
</table>

Source: Field Survey, Mensah (2018)

Table 5 indicates that 95.6% of the participants have not completed any multicultural training course while 2 (4.4%) have completed 1-2 multicultural training courses. Again, it is shown that majority of the participants, 95.6% have not received any specialised training through workshops. The rest of the participants (2) have received more than 3 specialised training in multicultural counselling through a workshop.

Results

Research Question One: How do Ghanaian counsellors rate their multicultural competence on the dimension of knowledge, skills and attitude-beliefs (self-awareness), knowledge and skills in public universities in Ghana?

This Research Question sought to determine counsellor’s cultural competence. The method used in analysing CC part typically involved mean, standard deviation and frequency distribution. The researcher obtained a standard benchmark of 2.5. A higher mean above the standard benchmark (2.5) shows that majority of the participants indicated that they have high multicultural competence while a mean below the standard benchmark indicates low multicultural competence. Those statements which recorded above the standard benchmark were selected and commented on as well as those...
statements whose means fell below the standard benchmark. Table 6 presents means, standard and frequency distribution on knowledge section.

Table 6: Knowledge Section

<table>
<thead>
<tr>
<th>Statements</th>
<th>M</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>I believe the human service professions especially counselling has done well to meet the cultural need of clients in Ghana.</td>
<td>2.40</td>
<td>0.72</td>
</tr>
<tr>
<td>I consider the value expectations innate in the main school of thoughts of counselling and comprehend the way these expectations might encounter with the beliefs of Ghanaian culture of the help seekers.</td>
<td>2.31</td>
<td>0.65</td>
</tr>
<tr>
<td>I am mindful of both the initial barriers and benefits culture brings to bear during counselling sessions.</td>
<td>2.98</td>
<td>0.50</td>
</tr>
<tr>
<td>I am well-informed of the ‘acculturation’ simulations for different tribal groups in Ghana.</td>
<td>2.15</td>
<td>0.57</td>
</tr>
<tr>
<td>I am mindful of specific tribal beliefs that is ethnically native simulations of counselling for diverse tribal groups in Ghana.</td>
<td>1.82</td>
<td>0.63</td>
</tr>
<tr>
<td>I design culturally relevant interventions for clients</td>
<td>1.67</td>
<td>0.66</td>
</tr>
<tr>
<td>I design programmes which facilitate contact to intervention by different help-seekers.</td>
<td>1.84</td>
<td>0.74</td>
</tr>
<tr>
<td>Most of my clients attribute psychological problems to another person or spiritual being.</td>
<td>3.16</td>
<td>0.56</td>
</tr>
<tr>
<td>During counselling sessions ambiguity and stress often result from Ghanaian cultural beliefs.</td>
<td>2.16</td>
<td>0.73</td>
</tr>
<tr>
<td>Total</td>
<td>2.28</td>
<td>0.31</td>
</tr>
</tbody>
</table>

Source: Field Survey, Mensah (2018)

Table 6 shows the means by which the participants sampled obtained perceived their multicultural knowledge competence. The table shows that statement 8 recorded the highest mean (3.16) with 24.4% and 66.7% of the participants selecting strongly agree and agree respectively. This indicates that
participants agree with the statement that ‘most of my clients attribute psychological problems to another person or spiritual being’. It is also shown that the participants agreed that they are ‘mindful of both the initial barriers and benefits of culture brings to bear during counselling sessions’ (M=2.98, S.D=0.50). The frequency distribution (as shown in Appendix B) further highlights that 8.9% and 82.2% of the counsellors strongly agree and agree with the statement that ‘both the initial barriers and benefits of culture brings to bear during counselling sessions respectively.

On the contrary, low multicultural competence of knowledge section is portrayed by looking at statements which fell below the standard benchmark. Statement six recorded the least mean score (1.67) with a standard deviation of 0.66. From Appendix B, the frequency distribution table recorded 55.6% and 37.8% of the participants disagree and strongly disagree with the view of designing culturally relevant interventions for clients.

Furthermore, statement five followed with a mean (M=1.82) and standard deviation (S.D=0.63) indicating low multicultural knowledge. This statement was used to find out from the participants whether they are mindful of specific tribal beliefs that is ethnically native simulations of counselling for diverse tribal groups in Ghana. As shown in Appendix B, the distribution of responses indicated that the following percentages of counsellors felt that there are no cultural indigenous models of counselling; 66.7% out of 45 participants selected ‘disagree’, 22.2% for ‘strongly disagree’, 2.2% and 8.9% for ‘strongly agree’ and ‘agree’ respectively.

It is also shown that the participants disagreed that they design programmes which facilitate contact to intervention by different help-seekers
(M=1.84, S.D=0.74). The frequency distribution (as shown in Appendix B) further highlights that 62.2% and 24.4% of the participants disagree and strongly disagree with the statement that ‘I design programmes which facilitate contact to intervention by different help-seekers’ respectively.

Again, statement four on this section recorded mean values below the standard benchmark indicating a low multicultural knowledge in acculturation models. This was used to find out from the participants whether they were well-informed of the ‘acculturation’ simulations for different tribal groups in Ghana. From Table 5, the mean and standard deviation of scores on statement five were as follows: M=2.15 and S.D=0.6 for counsellors. The distribution of responses on this statement indicated that, only 4.4% and 17.8% selected ‘strongly agree’ and agree perceived to be positive against 66.7% and 11.1% out of 45 participants selected ‘disagree’ and ‘strongly disagree’ respectively (as shown in Appendix B) who perceived their knowledge on acculturation models for various ethnic groups in Ghana to be low.

Statement nine sought to measure counsellor’s perception whether during counselling sessions ambiguity and stress often result from Ghanaian cultural beliefs, the mean scores and standard deviations obtained for were M=2.16 and S.D=0.73. The distribution of responses further indicates that majority of the participants perceived that, Ghanaian cultural beliefs cause stress and ambiguity during counselling session; 4.4% for ‘strongly agree’ and 24.4% for agreeing, 53.3% for ‘disagree’ and 17.8% for ‘strongly agree’ (as shown in Appendix B).

Although generally counsellors from the selected public universities perceived their cultural competence to be low on the Knowledge section, there
were noticeable differences in perceptions on statement two. Statement two obtained the following mean and standard deviation; M=2.31 and S.D=0.65. This statement was used to find out from the participants whether they consider the value expectations innate in the main school of thoughts of counselling and comprehend the way these expectations might encounter with the beliefs of the Ghanaian culture of the help seekers. From the rate of occurrence (frequency distribution table, as shown in Appendix B), 46.7% and 17.8% out of the participants selected ‘disagree’ and ‘strongly disagree’ indicating a failure on the side of counsellors to give appropriate attention to Ghanaian cultural values when selecting traditional counselling theory or approach in the counselling process.

Overall, counsellors from the selected universities perceived their multicultural counselling competency to be low as measured on the Knowledge section. The overall mean and standard deviation recorded on this section were M=2.28 and S.D=0.31 which fell below the standard benchmark of 2.5. The responses on the statement showed that the majority of the counsellors has a respectable information and thoughtfulness of their own self-perceived world but they have deficiencies in a particular understanding of ethnic groups they work with. The response pattern on this section was quite surprising considering generally traditional theories of counselling assertion of being culturally relevant.

The next section on the CC was Skills. The Skills section was used to determine the extent to which counsellors view their basic counselling skills with regards to Ghanaian culture within the ethnic groups in Ghana and their
ability to intervene in a manner that is culturally sensitive and relevant. Table 7 presents the means and standard deviation of skill section.

Table 7: Skills Section

<table>
<thead>
<tr>
<th>Statements</th>
<th>M</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>I review my cultural counselling skills by monitoring my functioning via consultation, supervision, and continuing education.</td>
<td>2.31</td>
<td>0.83</td>
</tr>
<tr>
<td>I apply specific counselling skills to create successful outcome regardless of the client’s cultural background.</td>
<td>2.64</td>
<td>0.57</td>
</tr>
<tr>
<td>I am aware of certain counselling skills, techniques, or approaches that are more likely to transcend culture and be effective with any clients.</td>
<td>2.64</td>
<td>0.53</td>
</tr>
<tr>
<td>I am aware of the differential interpretations of nonverbal communication (e.g., personal space, eye contact, handshakes) within various ethnic groups in Ghana.</td>
<td>2.29</td>
<td>0.63</td>
</tr>
<tr>
<td>I realise that counsellor-client incongruities in problem conceptualisation maybe as a result of my inability to view client’s problem from his cultural perspective.</td>
<td>2.51</td>
<td>0.70</td>
</tr>
<tr>
<td>I have a large repertoire of verbal and nonverbal skills to match with the cultural contexts of different clients.</td>
<td>2.20</td>
<td>0.76</td>
</tr>
<tr>
<td>I am skilled in a variety of different helping roles, methods, or approaches of the various ethnic groups in Ghana.</td>
<td>1.69</td>
<td>0.63</td>
</tr>
<tr>
<td>I am competent to communicate when a help-seeker’s issue emanate from ethnic bias.</td>
<td>2.36</td>
<td>0.68</td>
</tr>
<tr>
<td>Total</td>
<td>2.31</td>
<td>0.33</td>
</tr>
</tbody>
</table>

Source: Field Survey, Mensah (2018)

Table 7 shows the views of the participants concerning multicultural skills competence section. Statement 11 recorded a mean score of 2.64. From the frequency distribution table (as shown in Appendix C), 4.4% and 64.4% of the participants selected very accurate and somewhat accurate respectively for applying specific counselling skills to create successful outcome regardless of
the client’s cultural background. Also, statement 12 which sought determine whether participants are aware of certain counselling skills, techniques, or approaches that are more likely to transcend culture and be effective with any clients recorded a mean of 2.64. Furthermore, statement 14 which sought to determine whether participants realise that counsellor-client incongruities in problem conceptualisation maybe as a result of my inability to view client’s problem from his cultural perspective obtained a mean (2.51) higher than the standard benchmark.

On the other hand, statement 16 recorded the lowest mean (1.69). A look at the frequency distribution table further confirm that counsellors perceived their multicultural counselling skills to be low; 57.8% and 37.8% of the participants selected ‘somewhat inaccurate’ and ‘very inaccurate’ (as shown in Appendix C). This shows that participants are not skilled in different helping roles, methods and approaches of the various ethnic groups in Ghana. Furthermore, the mean score of statement 15 indicated that counsellors from selected public universities perceived the level of their multicultural counselling skills to be low. The following mean score and standard deviation were obtained on this statement; M=2.20 and S.D=0.4. The distribution of responses on statement 15 indicates that counsellors from the selected public universities do not have a large repertoire of verbal and nonverbal skills to match with the cultural contexts of different clients in Ghana as 66.7% of the participants selected ‘somewhat inaccurate’.

Statement 13 was on whether counsellors are aware of the differential interpretations of nonverbal communication (e.g., personal space, eye contact, handshakes) within various ethnic groups in Ghana. The following mean score
and standard deviation were recorded on this statement; M=2.24 and S.D=0.63. The distribution of responses indicated that the number of participants who perceived these differential interpretations of nonverbal communications to be negative was as follows; 2.2% out of 45 participants for ‘very accurate’, 28.9% for ‘somewhat accurate’, 60% of the participants selected ‘somewhat inaccurate’ and 8.9% of the participants for ‘very inaccurate’ (as shown in Appendix C). The responses on this statement strengthens the case that counsellors from the selected public universities have low multicultural counselling skills.

Again, statement 10 was perceived to be low on the Skills section with a mean value of 2.31 and a standard deviation of 0.83. From the frequency distribution table, 8.9% of the participants selected ‘very accurate’, 33.3% responded to ‘somewhat accurate’, 37.8% responded to ‘somewhat inaccurate’ and 20% of the participants selecting ‘very inaccurate’ (as shown in Appendix C). The responses on this statement indicated that most participants have low multicultural counselling skills as they do not review their counselling skills via consultation and multicultural training.

Statement 17 in coordination with multicultural counselling skills competence sought to find out whether counsellors are able to tell when a client’s problem relates to cultural bias by others from when the problem might be personal to the client. The mean score and standard deviation for were as follows; M=2.36 and S.D=0.68. The distribution of responses on statement 17 indicated that the following percentages of counsellors are not able to tell whether a client’s problem relates to culture; 33.3% out of 45 participants selected Somewhat Accurate and while majority of the participants 55.6% from
the selected public universities indicated ‘somewhat inaccurate’ (as shown in Appendix C).

The overall mean score and standard deviation on this section were as follows; M=2.31 and S.D=0.33. This indicates that counsellors from the selected public universities perceived their multicultural competence skills to be low. From the statement means and distribution of responses on the Skills section, it gives an indication that counsellors need multicultural training to be equipped with multicultural counselling skills based on cultural models and beliefs of the various ethnic groups in Ghana to be effective when they encounter any difficulty during the counselling session.

The third section, Awareness (Attitude-Belief), measured the extent to which counsellors are sensitive to their personal values and biases and how these may influence perceptions of their client, client’s problem and the counselling relationship. Table 8 present mean and standard deviation of statements on the awareness (attitude-beliefs) section.
Table 8: *Awareness (Attitude-Belief) Section*

<table>
<thead>
<tr>
<th>Statements</th>
<th>M</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>I am comfortable with differences that exist between me and my clients in terms of cultural values and beliefs.</td>
<td>3.29</td>
<td>0.51</td>
</tr>
<tr>
<td>I think clients who do not discuss intimate aspects of their cultural lives are not being resistant and defensive.</td>
<td>1.69</td>
<td>0.68</td>
</tr>
<tr>
<td>I recognise cultural beliefs affect psychosocial functioning and expressions of distress of clients</td>
<td>2.27</td>
<td>0.75</td>
</tr>
<tr>
<td>I recognise that beliefs and concepts of emotional well-being vary significantly from ethnic group to ethnic group during the counselling session.</td>
<td>2.42</td>
<td>0.54</td>
</tr>
<tr>
<td>I recognise that client’s problems are culturally based during the counselling session.</td>
<td>2.09</td>
<td>0.67</td>
</tr>
<tr>
<td>I accept that responses to client’s conditions and related treatment/interventions are heavily influenced by culture during counseling session.</td>
<td>2.47</td>
<td>0.82</td>
</tr>
<tr>
<td>I become sad and apologetic when giving bad news to clients.</td>
<td>3.11</td>
<td>0.49</td>
</tr>
<tr>
<td>I convey messages through proverbs, wise sayings and analogies to clients.</td>
<td>2.60</td>
<td>0.77</td>
</tr>
<tr>
<td>I agree that problems or illness come from chance occurrences: from both social and spiritual imbalances.</td>
<td>2.76</td>
<td>0.61</td>
</tr>
<tr>
<td>I am able to describe the social problems of the ethnic groups in my service area.</td>
<td>2.31</td>
<td>0.56</td>
</tr>
<tr>
<td>To a large extent I know the demographics, beliefs and values within communities of my service area.</td>
<td>2.27</td>
<td>0.54</td>
</tr>
<tr>
<td>I understand the social service needs within the ethnic groups that go unaddressed by the formal counselling service system in my community of service.</td>
<td>2.24</td>
<td>0.48</td>
</tr>
<tr>
<td>I am able to enshrine Ghanaian cultural values and beliefs during the counselling process to impart the society’s concepts of desirable morals.</td>
<td>2.02</td>
<td>0.71</td>
</tr>
<tr>
<td>Total</td>
<td>2.46</td>
<td>0.22</td>
</tr>
</tbody>
</table>

Source: Field Survey, Mensah (2018)
Table 8 shows the views of participants on multicultural awareness. The statement which sought to find out whether counsellors are comfortable with differences that exist between them and their clients in terms of cultural values and beliefs recorded the highest mean (3.29). The second highest mean (3.11) sought to determine whether counsellors become sad and apologetic when giving bad news to clients as 75.6% of the participants selected fairly well to agree with the statement. Furthermore, the statements ‘I convey messages through proverbs, wise sayings and analogies to clients’ and ‘I agree that problems or illness come from chance occurrences: from both social and spiritual imbalances’ recorded means of 2.60 and 2.76 respectively. With the exception of these four statements (18, 24, 25 and 26), whose mean scores were above a standard benchmark of 2.5 indicating a high multicultural awareness competence on those statements, however, the remaining nine statements on the Awareness (Attitude-Belief) section recorded mean scores below the standard benchmark for all counsellors which indicated a low multicultural awareness on those statements.

Particularly, the statement ‘I think that clients who do not discuss intimate aspects of their cultural lives are not being resistant and defensive’ had the lowest mean score of 1.69 with a standard deviation of 0.68 for selected counsellors from the public universities in Ghana. The mean score on statement 19 indicates that counsellors view clients who do not discuss intimate aspects of their cultural lives are not being resistant and defensive. From Appendix D, the distribution of responses on this statement, the number of participants who indicated that this attitude was negative were as follows; 2.2% out of 45
participants for ‘very well’, 6.7% of the participants selected ‘fairly well’, 48.9 of the participants for ‘barely’ and 42.2% of the participants for ‘not at all’.

Additionally, the low competence of counsellors’ attitude/belief dimension is reflected in the responses on statement 30 on the section with a mean score and standard deviation obtained on it being as follows; M=2.02 and S.D=0.7. The statement was used to find out from the participants whether they are able to enshrine Ghanaian cultural values and beliefs during the counselling process to impart the society’s concepts of desirable morals. The distribution of responses indicated that the majority of the participants show fail to enshrine Ghanaian cultural values and beliefs and are unaware of how their own cultural background influences psychological processes during counselling sessions; 2.2% of the participants selected ‘very well’, 17.8% of the participants selected ‘fairly well’, 60% of the participants selected ‘barely’ and 20% of the participants selected ‘not at all’ (as shown in Appendix D).

Furthermore, statement 22 sought to determine whether counsellors recognise the client’s problem culturally based during the counselling session. This statement recorded a mean of 2.09 and a standard deviation of 0.67. A low multicultural awareness competence is further highlighted as 62.2% out of 45 participants selected ‘barely’. In other words, statement 20 was used to measure the level counsellors recognise cultural beliefs affect psychosocial functioning and expressions of distress of clients. The mean scores obtained on this statement indicated that the counsellors perceived their level of competence in a counselling session to be low. The following mean score and standard deviation were obtained on this statement; M=2.27 and S.D=0.75. As shown in Appendix D, the distribution of responses on this statement recorded 2.2% of
the participants for ‘very well’, 37.8% of the participants for ‘fairly well’, 44.4% of participants for ‘barely’ and 15.6% of participants for ‘not at all’ indicated that their level of attitude and belief was low.

The desire to understand social service needs within the ethnic groups that go unaddressed by formal counselling service system was also evident from the responses on statement 29 which recorded the following mean score and standard deviation; \( M=2.24 \) and \( S.D=0.48 \). The distribution of responses on statement 29 indicated that the following percentages of participants perceived this practice to be low during counselling sessions; 2.2% of the participants selected ‘very well’, 20% of participants for ‘fairly well’, 77.8% of participants selected ‘barely’ (as shown in Appendix D). The overall mean and standard deviation scores obtained on this section were as follows; \( M=2.46 \) and \( S.D=0.22 \). The overall mean score of multicultural awareness obtained fell below the standard benchmark of 2.5 indicating low multicultural awareness competence.

The analysis of the data gathered from this research categorised participants into two groups identifying counsellors at either a low (where means of section <2.5) or high (where means of section ≥ 2.5) level of multicultural competence. Through an examination of the variables associated with these two groups, it can be concluded that counsellors labelled as low multicultural competent have not taken courses in multicultural training and workshop. The overall mean scores indicate that counsellors perceive their level of multicultural awareness competence in a counselling session to be low irrespective of the gender of counsellors. Table 9 presents the means and standard deviations of CC sections based on gender.
Table 9: Overall Section Means and Standard deviations on the CC Based on Gender

<table>
<thead>
<tr>
<th>Sections</th>
<th>Male</th>
<th></th>
<th>Female</th>
<th></th>
<th>Total</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>M  SD N</td>
<td></td>
<td>M  SD N</td>
<td></td>
<td>M  SD N</td>
<td></td>
</tr>
<tr>
<td>Awareness</td>
<td>2.45 0.27 25</td>
<td></td>
<td>2.41 0.13 20</td>
<td></td>
<td>2.43 0.22 45</td>
<td></td>
</tr>
<tr>
<td>Knowledge</td>
<td>2.32 0.34 25</td>
<td></td>
<td>2.24 0.14 20</td>
<td></td>
<td>2.28 0.31 45</td>
<td></td>
</tr>
<tr>
<td>Skills</td>
<td>2.35 0.38 25</td>
<td></td>
<td>2.27 0.22 20</td>
<td></td>
<td>2.31 0.33 45</td>
<td></td>
</tr>
</tbody>
</table>

Source: Field Survey, Mensah (2018)

From Table 9, participants who participated in the study perceived their multicultural counselling competency to be low in terms of the three sections they were measured on namely; Knowledge, Skills and Awareness (Beliefs-Attitude). To analyse the results of the aggregated CC scores, means were computed for each statement and each section. These means were then ranked against a standard benchmark of 2.5 to determine which statements deserve consideration. The section which was perceived to be lowest by female counsellors was Knowledge (M=2.24, S.D=0.22) with the highest perceived section being Awareness (Attitude-Belief; M=2.41, S.D=0.6) as shown in Table 9. Male counsellors however perceived Knowledge to be the lowest section in their multicultural counselling competence (M=2.32, S.D=0.34 with the Awareness section being the highest perceived (M=2.45, S.D=0.38).

These results indicate that counsellors based upon gender perceived all sections to be low in their multicultural counselling competence, they were unanimous in perceiving multicultural counselling competency to be low. Furthermore, the overall means of the three sections on CC were ranked below a standard benchmark of 2.5 indicating low multicultural competence of...
counsellors. These findings may be an indication that multicultural counselling is not given attention in Ghana. Ghana’s culture is multi-ethnic and diverse in nature with people from different background.

**Research Question Two: How do Ghanaian cultural beliefs influence the use of counselling techniques in counselling process?**

The researcher was of the view that counselling techniques are the enabling skills counsellors use to arrive at the desired outcome in their interaction with clients. Without them, a client’s problem could become worse. Hence, the second Research Question sought to determine how Ghanaian cultural beliefs influence the selection of counselling techniques during the counselling process.

The data obtained from the participants were analysed using descriptive statistics (means, standard deviations and frequency distribution). The researcher obtained a standard benchmark of 2.5. A higher mean above the standard benchmark shows that majority of the participants indicated that Ghanaian cultural beliefs influence counselling techniques. The results are presented in Table 10.
Table 10: *Ghanaian Cultural Beliefs and Counselling Techniques*

<table>
<thead>
<tr>
<th>Statement</th>
<th>Mean</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Questioning and listening techniques are appropriate for counselling in</td>
<td>3.78</td>
<td>0.89</td>
</tr>
<tr>
<td>the Ghanaian context.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ghanaian culture encourages the use of body gesture during counselling</td>
<td>3.38</td>
<td>0.73</td>
</tr>
<tr>
<td>process.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ghanaian culture facilitates the use of supportive skills in counselling</td>
<td>3.16</td>
<td>0.74</td>
</tr>
<tr>
<td>sessions.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ghanaian culture encourages the use of reflection during the counselling</td>
<td>2.76</td>
<td>0.86</td>
</tr>
<tr>
<td>process.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ghanaian culture facilitates the use of affective skills during counselling</td>
<td>3.53</td>
<td>0.67</td>
</tr>
<tr>
<td>sessions.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Source: Field Survey, Mensah (2018)

Table 10 shows how cultural values and beliefs in Ghana shape the effective use of counselling techniques as indicated by the participants. It can be seen that the statement ‘questioning and listening techniques are appropriate for counselling in the Ghanaian context recorded the highest mean of 3.78 and a standard deviation of 0.47. The frequency distribution pattern indicated 17.8% and 80% (as shown in Appendix E) of the participants selected agree and strongly agree respectively. This implies that counsellors ensured that questioning and listening skills are utilised within the framework of the cultural beliefs and values of clients. Furthermore, Ghanaian culture facilitates the use of empathy and silent or passive listening during counselling sessions recorded the second highest mean of 3.53 and a standard deviation of 0.67. Further indication on this statement shows that majority of the participants (35.6% and
60%, as shown in Appendix E) agree with the statement while few disagree with the statement.

Again, the statement ‘Ghanaian culture encourages the use of body gesture during counselling process recorded M=3.38, SD=0.73. The frequency distribution (as shown in Appendix E) further highlights that 62.2% and 37.8% of the participants agree and strongly agree with the statement respectively. This underpins the relevance of each non-verbal communication technique used in counselling services within the Ghanaian cultural setting.

Ghanaian culture facilitates the use of supportive skills in counselling sessions recorded a mean of 3.16 and a standard deviation of 0.74. The frequency distribution pattern indicated 66.7% and 24.4% (as shown in Appendix E) of the participants selected agree and strongly agree respectively while 8.9% disagreed with the statement. On the other hand, statement four recorded the lowest mean (2.76). The frequency distribution (as shown in Appendix E) revealed that majority of the participants (8.9% and 57.8%) from the selected public universities strongly agree and agree. This implies that counselling techniques which counsellors rarely use in counselling sessions were ‘reflection, confrontation and persuasive invitation’ as a result of the Ghanaian culture. Overall, it can be realised that the counsellors sampled always display various counselling techniques as a result of the influence of cultural beliefs and values of Ghanaians.
Research Question Three: What cultural-contextual factors influence counselling services in public universities in Ghana?

The third Research Question sought to determine how cultural-contextual factors influence the counselling process. The data obtained from the participants were analysed using descriptive statistics (means, standard deviations and frequency distribution). A higher mean above the standard benchmark (2.5) shows that majority of the participants indicated that cultural-contextual factors have a positive influence on the counselling process in Ghana. Table 11 presents the means and standard deviations of cultural-contextual factors influencing the counselling process in the public universities in Ghana.

Table 11: Cultural-contextual Factors of Counselling Process in Ghana

<table>
<thead>
<tr>
<th>Statement</th>
<th>M</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>I perceive the self as part of a social network/ likely to express closeness to, and interdependence with, family.</td>
<td>3.49</td>
<td>0.51</td>
</tr>
<tr>
<td>I display different conversation styles</td>
<td>3.44</td>
<td>0.50</td>
</tr>
<tr>
<td>I respond to silence with talk during the counselling process</td>
<td>2.84</td>
<td>0.64</td>
</tr>
<tr>
<td>I tend to take short turns, and distribute turns evenly regardless of who has introduced the topic</td>
<td>2.58</td>
<td>0.59</td>
</tr>
<tr>
<td>I consider interruption as a powerful discourse strategy influencing both relational and content dimensions of the counselling process</td>
<td>2.53</td>
<td>0.92</td>
</tr>
<tr>
<td>I establish common ground in shared beliefs, knowledge, and values during the counselling process.</td>
<td>3.51</td>
<td>0.58</td>
</tr>
</tbody>
</table>

Source: Field Survey, Mensah (2018)
Table 11 shows the influence of cultural-contextual factors as indicated by the participants. It can be seen that the statement ‘I establish common ground in shared beliefs, knowledge, and values during the counselling process’ recorded the highest mean of 3.51 and a standard deviation of 0.58. It is revealed that majority of the participants (31.1% and 60%, as shown in Appendix F) agreed and strongly agreed respectively with the statement while 0% and 8.9% selected strongly disagree and disagree respectively indicating a positive attitude towards establishing common ground. Next to this on section B of the SCC part, statement one was used to find out whether participants perceive the self as whole or units. The mean score and standard deviation obtained on this statement were as follows; M=3.49 and S.D=0.51. The distribution of responses indicated that the following percentages of counsellors perceived the self as a whole: 0% selected Strongly Disagree and Disagree, 51.1% out of 45 participants selected ‘Agree’ and 48.9% of counsellors selected ‘Strong Agree’ (as shown in Appendix F). The mean score and frequency distribution showed that counsellors perceive the self as part of a social network, expressed to closeness and interdependent with family within the Ghanaian cultural setting.

Again, statement two was also used to find out different communication styles. The statement was about whether the participants display different communication styles during the counselling session. The mean score and standard deviation obtained on this statement were as follows; M=3.44 and S.D=0.50 indicating a positive influence on the counselling process in Ghana. The pattern of the responses indicated that 55.6% and 44.4% of the participants agree and strongly agreed respectively that they displaying different communication styles during the counselling process.
A further indication of counsellor’s response to silence during counselling is captured through their responses on statement three. Statement three was used to find out from the participants whether they respond to silence with talk during the counselling process. The mean score and standard deviation obtained on this statement were as follows; M=2.84 and S.D=0.63 indicating a positive influence of silence in counselling sessions. The distribution of responses indicated that the following percentages of counsellors were measured on statement three; 0% selected Strongly Disagree, 28.9% out 45 participants selected ‘Disagree’, 57.8% of participants selected ‘Agree’ and 13.3% of counsellors selected ‘Strong Agree’ (as shown in Appendix F).

Again, statement 4 was used to find out from the participants whether they take short turns and distribute turns evenly regardless of who has introduced the topic. The mean score and standard deviation obtained on this statement were as follows; M = 2.58 and S.D = 0.59. The distribution of responses indicated that the following percentages of participants did agree to the statement; 4.4% selected Strongly Disagree, 35.6% out 45 participants selected ‘Disagree’, 57.8% of participants selected ‘Agree’ and 2.2% of counsellors selected ‘Strong Agree’ (as shown in Appendix F).

Statement 5 recorded the lowest mean and was used to find out from the participants whether they consider interruption as a powerful discourse strategy influencing both relational and content dimension of the counselling process. The mean score and standard deviation obtained on this statement were as follows; M = 2.53 and S.D = 0.92 indicating a positive influence of cultural-contextual factors towards the counselling process in Ghana. The distribution of responses indicated that the following percentages of participants did agree
to the statement; 8.9% selected Strongly Disagree, 37.8% out 45 participants selected ‘Disagree’, 44.4% of participants selected ‘Agree’ and 8.9% of the participants selected ‘Strong Agree’ (as shown in Appendix F). Overall, it can be realised that cultural-contextual factors serve as a foundation and influence the counselling process in the selected public universities in Ghana.

Hypothesis One: There is no significant difference in counsellors’ perceived multicultural competence based on gender.

H1: There is no significant difference in counsellors’ perceived multicultural competence based on gender in public universities in Ghana.

To test this hypothesis, one-way multivariate analysis of variance (MANOVA) was used to determine any gender related differences with CC sections as dependent variables and gender as an independent variable. I used MANOVA to discover which factor is truly important and protect against Type I errors that might occur if multiple ANOVA’s were conducted independently. Data obtained passed the following assumptions: two or more dependent variables should be measured at the interval or ratio level; independent variable made up of two independent groups (male and female); independence of observations where there was no relationship between the observations in each group or between the groups themselves; adequate sample size; there were no univariate or multivariate outliers; there was a multivariate normality; there was a linear relationship between each pair of dependent variables for each group of the independent variable; there was homogeneity of variance and there was no multicollinearity. Table 12 presents the statistical results obtained from the MANOVA test.
Table 12: MANOVA Test for Counsellors’ Cultural Competence

<table>
<thead>
<tr>
<th>Effect</th>
<th>Value</th>
<th>F</th>
<th>Hypothesis df</th>
<th>Error df</th>
<th>Sig.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Intercept</td>
<td>Pillai's Trace</td>
<td>.994</td>
<td>2393.645$^b$</td>
<td>3.000</td>
<td>41.000</td>
</tr>
<tr>
<td></td>
<td>Wilks' Lambda</td>
<td>.006</td>
<td>2393.645$^b$</td>
<td>3.000</td>
<td>41.000</td>
</tr>
<tr>
<td></td>
<td>Hotelling's Trace</td>
<td>175.145</td>
<td>2393.645$^b$</td>
<td>3.000</td>
<td>41.000</td>
</tr>
<tr>
<td></td>
<td>Roy's Largest Root</td>
<td>175.145</td>
<td>2393.645$^b$</td>
<td>3.000</td>
<td>41.000</td>
</tr>
<tr>
<td>Gender</td>
<td>Pillai's Trace</td>
<td>.093</td>
<td>1.059$^b$</td>
<td>3.000</td>
<td>41.000</td>
</tr>
<tr>
<td></td>
<td>Wilks' Lambda</td>
<td>.928</td>
<td>1.059$^b$</td>
<td>3.000</td>
<td>41.000</td>
</tr>
<tr>
<td></td>
<td>Hotelling's Trace</td>
<td>.102</td>
<td>1.059$^b$</td>
<td>3.000</td>
<td>41.000</td>
</tr>
<tr>
<td></td>
<td>Roy's Largest Root</td>
<td>.102</td>
<td>1.059$^b$</td>
<td>3.000</td>
<td>41.000</td>
</tr>
</tbody>
</table>

Source: Field survey, Mensah (2018)

The results of the MANOVA test from Table 12 indicated that there was no statistically significant difference in multicultural competence of counsellors, $F(3, 41) = 1.059$; Wilks’ lambda ($\lambda$) value of 0.928. The probability value (p-value) of 0.37 is greater than the 0.05 significant level which indicates that the hypothesis of the population means on the sections are the same for male and female counsellors can be supported and was therefore not rejected. The overall mean scores obtained by male and female counsellors showed that there was no significant difference indicating that counsellors’ low multicultural competence is not dependent on gender.

**Hypothesis Two: There are no associations among sections on the CC**

In order to determine the level of interaction among the three sections on the CC part, a simple correlation test was conducted using Spearman’s rank correlation coefficient.
H₁: There are no associations among sections on the Counsellors Cultural (CC) in public universities in Ghana.

Research Hypothesis two was formulated to determine the level of interaction among the CC sections. Hypothesis two states that there are no significant associations among CC sections. To test this hypothesis, Spearman’s rank correlation tests was conducted. Tables 13 presents the results of the correlation matrix.

Table 13: Association(s) Among CC Sections

<table>
<thead>
<tr>
<th>Sections</th>
<th>Knowledge</th>
<th>Skills</th>
<th>Beliefs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Knowledge</td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Skills</td>
<td>0.616*</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Awareness</td>
<td>0.407*</td>
<td>0.726*</td>
<td>1</td>
</tr>
</tbody>
</table>

*Significant, < 0.05

The results from Table 13 on the Spearman’s correlation test indicate that for counsellors, there was a strong positive correlations (0.726) among Knowledge section and Awareness section. There were significant strong positive correlations (0.616) among Knowledge section and Skills section. Furthermore, positive moderate correlations (0.407) were recorded among Skills section and Awareness section. This indicates that for those sections which correlated significantly with each other, an increase in one of the sections is central to an analogous growth in the other section.

The scatter plot indicates that although there are significant correlations among some of these sections, there are noticeable outliers. Figure 2 presents the scatter plot obtained for the correlation among sections on the CC for counsellors in the selected public universities in Ghana.
Discussion

The study revealed that counsellors sampled perceived their cultural competency to be low as measured on the sections. This low cultural competence is portrayed by looking at statements on the sections whose mean scores obtained were lower than the average means of the three sections (Awareness, Knowledge and Skills). This tally with the demographic data obtained from participants, which indicates that only a few of them have received or participated in multicultural training.

The responses to the statements of Knowledge section showed that the majority of the counsellors have a decent information and the understanding of their perceived worldview but have inadequate information about the cultures of other people. The response pattern on this statement was quite surprising considering that generally, traditional theories of counselling assertion of being applicable to a diverse population. From the statement means and distribution
of responses on the Skills section, it gives an indication that counsellors have inadequate skills to develop intervention and strategies needed in working with multi-ethnic groups in Ghana (Gyekye, 2013) and their inability to mediate in a way that is socio-culturally subtle and appropriate (Sue, Arrendodo & McDavies, as cited in Sue and Sue, 2016).

The findings of the current study give the impression that counsellors hardly find out the consciousness (awareness) of their personal conventions, beliefs and prejudices, in addition to the being thoughtful of the a different help-seeker’s worldview. Competency originates with consciousness (awareness) of an individual’s specific cultural beliefs and values in relation to other people’s culture. Furthermore, being aware of the socio-culturally knowledgeable traditions controls a life, by means of or devoid of a person’s approval. As a result, their concerns should always be paramount which can only be known through their active involvement in multiculturalism preparation appropriate to stimulate successful counselling services (Sue, Arrendodo & McDavies, as cited in Sue et al., 1999). Gyekye (2013) stressed that Ghanaian cultural values are multicultural, multi-ethnic and multilingual in nature. This situation needs attention, therefore, counsellors in Ghana should be knowledgeable and be able to understand various indigenous methods, values and beliefs about healing within the various ethnic groups as a result of a cultural values that can be said to be shared by the different ethno-cultural groups in Ghana (Gyekye, 2013).

Furthermore, these findings are in support with the findings of Sue and Sue (2016) that the counselling professionals have been using Western models of psychological advancement of personality which have been futile to recognised cultural variables. These inadequacies represent the needs of various
ethnic groups within the communities in Ghana (Awedoba, 2005). In a similar
vein, the findings of the present study are in line with the findings of Sue (2008)
that if counsellors are unaware of the impacts of their culture on their disposition
and relational patterns (styles), then counsellors may not be enhanced to be
capable to recognise the means in which socio-cultural values and beliefs impact
help-seeker behaviours, relations, beliefs and lifetime objectives. All these
findings support the earlier view of Pedersen, (1996) that counsellors must
realise that to some degree they sense and feel strongly about something but
could completely be insignificance to other people that may communicate
insights and choices, or facts which are value-laden. The current study highlight
the prerequisite to recognise the essence of our belief systems and values of
helping people in need which have been marginalised by the traditional theories.
It appears cultural workshops to train counselling professionals at the Ghanaian
public universities are limited as well as multicultural, diversity and inclusion
centres.

Conversely, the findings of the Research Question Two confirm what is
obvious in most counselling sessions in the public universities in Ghana, that
counselling techniques employed during counselling process are positively
influenced in Ghana as a result of socio-cultural views and beliefs centred on
the ethnicity of clients. The study showed that most counselling techniques such
as listening, reflection, motivating the involuntary client, confronting and
persuasive invitation are influenced by Ghanaian cultural beliefs. In this sense,
the findings can be deemed, to be honest responses from the participants.

This finding suggests the importance of cultural factors during
counselling (Sue & Sue, 2003). The findings confirm the findings of Nelson-
Jones (2013) that listening by counsellors has several significant positive impacts such as establishing rapport between counsellor and client, bridging cultures and background differences and helps clients to experience feelings. Ghanaian cultural beliefs may hinder the effective use of counselling techniques such as reflection, confrontation and persuasive invitation. This hindrance can be seen in the difference in the client-counsellor background as a result of inaccurate and inconsistent clients’ semantic and tonal descriptions of presenting problems (Egan, 2007).

Furthermore, the current findings validate the findings of Lane et al. (2002). These scholars stated specifically that when quietness (silence) is not competently and thoughtfully engaged by a counsellor, the help-seeker might experience the counsellor’s silence, like a detachment, unconcern or disconnection, central to non-observance of the belief and wellbeing of the counselling agreement due to cultural difference. Furthermore, a prerequisite for the existence of a successful therapist is being competent to prepare and convey the skillfulness of understanding or responding (empathy) in the counsellor-client relations (Raskin & Rogers, 1995). The implication of these findings is that even though counselling techniques are shaped by Ghanaian cultural beliefs and values, most counsellors only engaged in the use of these techniques based on Western culture.

Furthermore, the study revealed that the cultural-contextual dynamics such as self, grounding, silence, etc., are essential in the counselling process in Ghanaian public universities. The study found that the ‘self’ is perceived as a social network possible to exhibit ‘closeness’ (nearness) to and interdependence with the household or clan (family). Again, counsellors revealed that
counsellors display different communication styles and recognising miscommunication as a factor influencing counselling. Furthermore, the study showed that responding to silence with talk, taking short turns in conversation, establishing common ground in shared beliefs, knowledge and values and interruption all influence counselling process in Ghana.

The findings of the current study are in line with the findings of Labov and Fanshel as cited in Peavy & Li, 2003) that a person communicates conforming to socio-culturally formed directions for discourse, thus, the counsellor is certain to demonstrate diverse communication (conversation) forms (styles). They further highlighted that these ethnically well-defined conversation styles may extremely improve or impede the attainment of counselling interaction. The studies conducted by Markus and Kitayama, as cited in Peavy and Li (2003) and Gyekye (1996, 2013), confirmed that the members of a more collectivistic culture incline to see the ‘self’ as a fragment of a social setup. Furthermore, the current corroborate with the findings of Nytsul (1999) that the expressed common ground symbolises the relationship which exist in counselling. This indicates that the foundation or core (heart) of the counselling practice because it provides the strength and sustenance essential for the therapy career. As the counselling conversation advances, a mutual premise (common ground) is established, and the communication in counselling is increasingly purposeful and effective.

Again, the overall mean scores obtained by male and female counsellors showed that there was no significant difference indicating that counsellors’ low multicultural competence is not dependent on gender. The nonsignificant findings for attitude-beliefs, understanding (knowledge) and abilities (skills)
tend to back Sue et al.’s (1999) that a counsellor ideas concerning consciousness (awareness) of the ‘self’ and other people, and to a postulation that a solitary importance of traditional theories could be a restriction in the counselling process.

Paralleling the previous study conducted by Ottavi et al. (1994), the study discovered that the background information (demographic dynamics) of sexual characteristics (gender) did not explain somewhat significant extent of the difference for any of the three multicultural competence domains. A counsellor can be multiculturally competent through educational training and clinical experience. The present findings of the study also validate the significance emphasised by teachers (Sue et al., 1982; Sodowsky et al., 1998; Pedersen, 1996) on obtaining clinical and practicum experiences with clients from different ethnic background is essential and therefore Ghanaian counsellors need to be trained multiculturally to effectively help clients from diverse background. The current findings indicate that multicultural competence is not gender dependent.

Even though the outcomes of this present study are capable of presenting the results for the individual dimension of multiculturalism competences, there is the need to deliberate on the findings of the associations amongst the multicultural counselling competence dimensions. The CC sections’ intercorrelation results show that the three elements evaluated are dissimilar but then interrelated concepts (Ottavi et al., 1994). There were significant correlations among the three sections. The conviction that a person has no knowledge as well as responsiveness (awareness) and of other people’s culture could make a person disbelieve, whether right or wrong. Additionally, the findings of the
current study agree the findings of Sodowsky et al. (1998) that the competence dimensions have a penetrable border. This indicates that the sections which correlated significantly with each other, an increase in one of the sections is central to an analogous growth in the other section.

**Chapter Summary**

This section offered the results and discussion of the study. A sample of 45 counsellors was involved in the study. Counsellors from the selected public universities were found to have low multicultural competence. Application of counselling techniques was found to be helped by Ghanaian cultural values and beliefs. However, cultural-contextual factors influence the counselling process in Ghana. There was no difference in counsellors’ multiculturalism competencies based on sexual characteristics. There were significant associations among sections of the CC part.
CHAPTER FIVE
SUMMARY, CONCLUSIONS AND RECOMMENDATIONS

Introduction

This chapter presents the summary, implications for practice, conclusions and recommendations of the study. Suggestions for further research are also given in this chapter.

Summary

The study aimed at assessing counsellors’ multicultural competencies at the public universities in Ghana based on the domains of Attitude-beliefs (Self-awareness), Understanding (Knowledge) and Abilities (Skills). Specifically, the study sought to answer three research questions and two hypotheses.

Research Questions

1. How do Ghanaian counsellors rate their multicultural competence on the dimension of knowledge, skills and attitude-beliefs (self-awareness), knowledge and skills in public universities in Ghana?

2. How do Ghanaian cultural beliefs influence the use of counselling techniques in the counselling process?

3. What cultural-contextual factors influence counselling services in public in Ghana?

Hypotheses

1. H₀: There is no significant difference in counsellors’ perceived multicultural competence based on gender.

2. H₀: There are no associations among sections on the CC.
Literature related to the study were also reviewed. A descriptive survey approach was chosen for the study. This design ensured that the counsellors were studied in their counselling setting without manipulating their environment. A sample of 45 counsellors were selected via purposive and quota sampling procedures for the study. The study used questionnaires to obtain data from participants. The quantitative data were analysed descriptively and inferentially.

**Key Findings**

1. Generally, counsellors perceived their multicultural competence to be low on all the three sections (Awareness, Skills and Knowledge) they were measured on.

2. Views of counsellors underlined that Ghanaian cultural beliefs influence the use of counselling techniques in the counselling process. These findings were evident in the responses to techniques such as reflection, confronting, questioning, listening etc.

3. The third research question highlighted that cultural-contextual issues are core to the counselling process in Ghana. The findings revealed that self-construal, communication styles and miscommunication, grounding of common belief, turn-taking and silence are central for the counsellors to recognise the cultural context in which the counselling process takes place.

4. There were no statistically significant gender-related differences on three CC sections, namely Knowledge, Skills and Awareness (Attitude-belief). The findings of no significant differences in these three dimensions were all in not favour of counsellors in terms of the level of
the multicultural competence. These findings show that the level of multicultural competence is not reliant on gender.

5. There were significant associations among all sections of the CC part.

Conclusions

This study called for an assessment of multicultural competences of counselling professionals. The findings of the study have shown that counsellors’ multicultural counselling competencies were low for all sections; Awareness (Attitude-Beliefs), Skills and Knowledge. However, there were no significant differences in counsellors’ perceived multiculturalism competences. It must be emphasised, however, that to be effective in multicultural-oriented counselling interaction, the counsellor must be positively disposed to being dynamic and disposed to continuous learning and training beyond the formal classroom. This is because the issue of multiculturalism in counselling is an ongoing debate for which the parameters of practice have not been fully established as a result of its complexity.

Multiculturalism has been seen as a vehicle for professional development which can eventually lead to counselling transformation in Ghana. By integrating multicultural counselling theoretical framework (awareness, skills and knowledge) into the training of counsellors in Ghana, the diverse ethnic, tribal and cultural nature of our country would benefit more from counselling; a subject area brought nearby to the people. This will make the earlier observation of marginalisation of counselling progenitors in Ghana a thing of history.

Multicultural counselling competence is an important component of counsellor preparation, particularly given the potential benefits of continual
assessment as well as the negative implications. Hence, counsellor researchers should actively work to make available supplementary statistical backing for current counselling programme evaluation as well as endeavour to solve unnoticed marginalised bodies by designing innovative methods to evaluate community activism efforts, attitudes and beliefs.

**Implications for Practices**

From the findings and conclusion, the counsellors need to pay attention Ghanaian culture in relation to the specific ethnic and tribal groups. These will inform them of the basic elements identified in the cultures of these small groups in Ghana. To make counsellors effective, multicultural training, diversity and inclusion centres must be established by managements and the leadership of the universities in Ghana to facilitate effective counselling service. Furthermore, psychology and counselling programmes need to be diffused multiculturalism recognising pertinent issues with regard to death, marriage rites, age, sex, values, beliefs, religion, widowhood, taboos, etc., of the various ethnic tribes in Ghana. Again, a specialist degree needs to be introduced by counsellor trainee universities in Ghana whose theory, philosophy and ethical foundations as well as its curriculum (e.g. syllabus and content) are deep-rooted in multi-ethnic values of Ghanaian traditions.

**Recommendations**

From the findings, conclusions and implications for practice of this study, the following recommendations are offered:

1. As a result of the findings on the CC sections, counsellors should attend multicultural awareness training and workshop pertaining to Ghanaian cultural beliefs and ethnic diversity.
2. A permeated programme. Multiculturalism content should be diffused entirely into the current coursework in counselling and psychology programmes in the counsellor trainee universities in Ghana.

3. A multiculturalism programme set menu, whereby students select multiculturalism ‘courses’ from the directory should be introduced in counsellor trainee universities in Ghana. Course options could be chosen from different extents as Ghanaian beliefs, ethnicity and healing, ageing and aged, gender studies and anthropology.

4. A multicultural-focused course (programme) whose theory, philosophy and ethical foundations, in addition to its curriculum (e.g. syllabus and content), are deep-rooted in multi-ethnic (multiculturalism) standpoints of the Ghanaian culture should be introduced by counsellor trainee universities in Ghana to provide a professional (specialist) ‘degree’, which considers multiculturalism as a distinct educational field.

5. The management of public universities in Ghana should establish Multicultural Training Centres to promote diversity and inclusion in the services provided.

**Suggestions for Further Research**

In order to continue building upon the literature on counsellors’ multicultural counselling competence in Ghana and any possible cultural-contextual factors influencing the counselling process, the following suggestions are put forward:

1. The study identified low multicultural competence of counsellors, Ghanaian cultural beliefs influencing the selection of counselling skills as well as cultural-contextual factors influencing the counselling
process. However, the study did not identify the relationship between them. This study utilised the self-described instrument to investigate counsellors’ multicultural competence.

2. In addition, the relationships among multicultural training, ethnic identity, and multicultural competence deserve additional research in the future.

3. Furthermore, Ghanaian cultural variables influencing the counselling process need a thorough investigation to help prepare trainees.

4. Further research should be conducted to increase the assessment of counsellor competences to contain client viewpoints. Since the counsellor’s impression of effective therapy could be dissimilar from help-seekers’, the dynamics that are central to low competences may well be paralleled amongst counselling professionals and help-seekers.
REFERENCES


APPENDICE

APPENDIX A

Multicultural Competence Questionnaire

Direction for Counsellors

This questionnaire contains statements about practices which could take place in counselling session. There are no ‘right’ or ‘wrong’ answers. Your responses will be treated as confidential and will only be used for the purposes of this research.

Think about how well each statement describes your cultural competency.

Be sure to give a response for all statements. If you change your mind about any response, just cross it out and circle another.

Some statements in this questionnaire are fairly similar to other statements. Don’t worry about this. Please give your opinion about all statements by ticking [✓] in the box against your response.

Biographic Data

1. Sex: Male [ ] Female [ ]

2. Multicultural Courses and Workshop
   a. Number of multicultural courses taken as a counsellor
      i. 0 { } ii. 1-2 { } iii. ≥3 { }
   b. Number of multicultural workshops participated/conducted as a counsellor
      i. 0 { } ii. 1-2 { } iii. ≥3 { }
PART A-CULTURAL COMPETENCE

SECTION A: KNOWLEDGE

Assess yourself as honestly as possible rather than answering in the way you think would be desirable. To what extent do you agree with the following statements?

**Key: Strongly Disagree (1), Disagree (2), Agree (3) and Strongly Agree (4)**

<table>
<thead>
<tr>
<th>Item</th>
<th>Statements</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>I believe the human service professions especially counselling has done well to meet the cultural need of clients in Ghana.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>I consider the value expectations innate in main school of thoughts of counselling and comprehend the way these expectations might encounter with beliefs of Ghanaian culture of the help seekers.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>I am mindful of both the initial barriers and benefits culture brings to bear during counselling sessions.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>I am well-informed of the ‘acculturation’ simulations for different tribal groups in Ghana.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>I am mindful of specific tribal beliefs that is ethnically native simulations of counselling for diverse tribal groups in Ghana.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>I design culturally relevant interventions for clients</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>I design programmes which facilitate contact to intervention by different help-seekers.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Most of my clients attribute psychological problems to another person or spiritual being.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>During counselling sessions ambiguity and stress often result from Ghanaian cultural beliefs.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
SECTION B: CULTURAL SKILLS

The following statements cover counsellor practices in counselling situations. Indicate how accurate each describes you as a counsellor when working with various ethnic groups in a cultural counselling situation. Give ratings that you actually believe to be true rather than those you wish were true.

Key: Very Inaccurate=1, Somewhat Inaccurate=2, Somewhat Accurate=3 Very Accurate=4

<table>
<thead>
<tr>
<th>Item</th>
<th>Statements</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
</tr>
</thead>
<tbody>
<tr>
<td>10</td>
<td>I review my cultural counselling skills by monitoring my functioning via consultation, supervision, and continuing education.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>I apply specific counselling skills to create successful outcome regardless of the client’s cultural background.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>I am aware of certain counselling skills, techniques, or approaches that are more likely to transcend culture and be effective with any clients.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13</td>
<td>I am aware of the differential interpretations of nonverbal communication (e.g., personal space, eye contact, handshakes) within various ethnic groups in Ghana.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>14</td>
<td>I realise that counsellor-client incongruities in problem conceptualisation maybe as a result of my inability to view client’s problem from his cultural perspective.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>15</td>
<td>I have a large repertoire of verbal and nonverbal skills to match with the cultural contexts of different clients.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16</td>
<td>I am skilled in a variety of different helping roles, methods, or approaches of the various ethnic groups in Ghana.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>17</td>
<td>I am able to tell when a client’s problem relates to cultural bias.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
SECTION C: AWARENESS (ATTITUDE-BELIEFS)

The following statements cover counsellor beliefs and attitudes in counselling situations. Indicate how accurate each describes you as a counsellor when working with various ethnic groups in a cultural counselling situation. Give ratings that you actually believe to be true rather than those you wish were true.

Key: Not At All = 1            Barely = 2              Fairly Well = 3            Very Well = 4

<table>
<thead>
<tr>
<th>Item</th>
<th>Statements</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
</tr>
</thead>
<tbody>
<tr>
<td>18</td>
<td>I am comfortable with differences that exist between me and my clients in terms of cultural values and beliefs.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>19</td>
<td>I think that clients who do not discuss intimate aspects of their cultural lives are not being resistant and defensive.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>20</td>
<td>I recognise cultural beliefs affect psychosocial functioning and expressions of distress of clients</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>21</td>
<td>I recognise that beliefs and concepts of emotional well-being vary significantly from ethnic group to ethnic group during the counselling session.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>22</td>
<td>I recognise that client’s problems are culturally based during the counselling session.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>23</td>
<td>I accept that responses to client’s conditions and related treatment/interventions are heavily influenced by culture during counseling session.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>24</td>
<td>I become sad and apologetic when giving bad news to clients.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>25</td>
<td>As maybe appropriate, I convey messages through proverbs, wise sayings and analogies to clients.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>26</td>
<td>I agree that problems or illness come from chance occurrences: from both social and spiritual imbalances.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>27</td>
<td>I am able to describe the social problems of the ethnic groups in my service area.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>28</td>
<td>To a large extent I know the demographics, beliefs and values within communities of my service area.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>29</td>
<td>I understand the social service needs within the ethnic groups that go unaddressed by the formal counselling service system in my community of service.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>30</td>
<td>I am able to enshrine Ghanaian cultural values and beliefs during the counselling process to impart the society’s concepts of desirable morals.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
PART B- SKILLS, CULTURAL-CONTEXTUAL FACTORS

SECTION A: COUNSELLING TECHNIQUES

To what extent do you agree with the following techniques to be influenced by Ghanaian cultural beliefs and values during counselling process? Please give your opinion about all statements by ticking [✓] in the box against your response.

<table>
<thead>
<tr>
<th>Items</th>
<th>Statements</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Questioning and listening techniques are appropriate for counselling in the Ghanaian context.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Ghanaian culture facilitates the use of supportive skills in counselling sessions.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Ghanaian culture encourages the use of reflection during the counselling process.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Ghanaian culture facilitates the use of affective skills during counselling sessions.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Ghanaian culture encourages the use of body gesture during the counselling process.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
SECTION B: CULTURAL CONTEXTUAL FACTORS OF COUNSELLING

To what extent do you agree with the following cultural contextual factors influence counselling services in Ghana? Please give your opinion about all statements by ticking [✓] in the box against your response.

Key: Strongly Disagree (1), Disagree (2), Agree (3) and Strongly Agree (4)

<table>
<thead>
<tr>
<th>Items</th>
<th>Statements</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>I perceive the self as part of a social network/ likely to express closeness to, and interdependence with, family.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>I display different conversation styles</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>I respond to silence with talk during the counselling process</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>I tend to take short turns, and distribute turns evenly regardless of who has introduced the topic</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>I consider interruption as a powerful discourse strategy influencing both relational and content dimensions of the counselling process</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>I establish common ground in shared beliefs, knowledge, and values during the counselling process</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### APPENDIX B

Distribution of Responses (%) on the Knowledge Section

<table>
<thead>
<tr>
<th>Statements</th>
<th>SA</th>
<th>A</th>
<th>D</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>F</td>
<td>%</td>
<td>F</td>
<td>%</td>
</tr>
<tr>
<td>I believe the human service professions especially counselling has done</td>
<td>0</td>
<td>0</td>
<td>24</td>
<td>53.3</td>
</tr>
<tr>
<td>well to meet the cultural need of clients in Ghana.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I consider the value expectations innate in main school of thoughts of</td>
<td>6</td>
<td>13.3</td>
<td>10</td>
<td>22.2</td>
</tr>
<tr>
<td>counselling and comprehend the way these expectations might encounter</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>with beliefs of Ghanaian culture of the help seekers.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I am mindful of both the initial barriers and benefits culture brings to</td>
<td>4</td>
<td>8.9</td>
<td>37</td>
<td>82.2</td>
</tr>
<tr>
<td>bear during counselling sessions.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I am well-informed of the ‘acculturation’ simulations for different</td>
<td>2</td>
<td>4.4</td>
<td>8</td>
<td>17.8</td>
</tr>
<tr>
<td>tribal groups in Ghana.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I am mindful of specific tribal beliefs that is ethnically native</td>
<td>1</td>
<td>2.2</td>
<td>4</td>
<td>8.9</td>
</tr>
<tr>
<td>simulations of counselling for diverse tribal groups in Ghana.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I design culturally relevant interventions for clients</td>
<td>1</td>
<td>2.2</td>
<td>2</td>
<td>4.4</td>
</tr>
<tr>
<td>I design programmes which facilitate contact to intervention by</td>
<td>2</td>
<td>4.4</td>
<td>4</td>
<td>8.9</td>
</tr>
<tr>
<td>different help-seekers.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Most of my clients attribute psychological problems to another person or</td>
<td>11</td>
<td>24.4</td>
<td>30</td>
<td>66.7</td>
</tr>
<tr>
<td>spiritual being.</td>
<td></td>
<td></td>
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</tbody>
</table>
During counselling sessions ambiguity and stress often result from Ghanaian cultural beliefs.

<p>| | | | | | | | | |</p>
<table>
<thead>
<tr>
<th></th>
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<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>SD</td>
<td>2</td>
<td>4.4</td>
<td>11</td>
<td>24.4</td>
<td>24</td>
<td>53.3</td>
<td>8</td>
<td>17.8</td>
</tr>
</tbody>
</table>

SD = Strongly Disagree, D = Disagree, A = Agree and SA = Strongly Agree
### APPENDIX C

**Distribution of Responses (%) on the Skills Section**

<table>
<thead>
<tr>
<th>Statements</th>
<th>VA</th>
<th>SA</th>
<th>SI</th>
<th>VI</th>
</tr>
</thead>
<tbody>
<tr>
<td>I review my cultural counselling skills by monitoring my functioning via</td>
<td>4</td>
<td>15</td>
<td>33.3</td>
<td>9</td>
</tr>
<tr>
<td>consultation, supervision, and continuing education.</td>
<td>F</td>
<td>F</td>
<td>F</td>
<td>F</td>
</tr>
<tr>
<td>I apply specific counselling skills to create successful outcome</td>
<td>2</td>
<td>29</td>
<td>64.4</td>
<td>14</td>
</tr>
<tr>
<td>regardless of the client’s cultural background.</td>
<td>4.4</td>
<td>14</td>
<td>31.1</td>
<td>0</td>
</tr>
<tr>
<td>I am aware of certain counselling skills, techniques, or approaches</td>
<td>1</td>
<td>27</td>
<td>60</td>
<td>17</td>
</tr>
<tr>
<td>that are more likely to transcend culture and be effective with any</td>
<td>2.2</td>
<td>13</td>
<td>28.9</td>
<td>7</td>
</tr>
<tr>
<td>clients.</td>
<td>F</td>
<td>F</td>
<td>F</td>
<td>F</td>
</tr>
<tr>
<td>I am aware of the differential interpretations of nonverbal communication</td>
<td>1</td>
<td>13</td>
<td>28.9</td>
<td>7</td>
</tr>
<tr>
<td>(e.g., personal space, eye contact, handshakes) within various ethnic</td>
<td>2.2</td>
<td>25</td>
<td>55.6</td>
<td>15</td>
</tr>
<tr>
<td>groups in Ghana.</td>
<td>F</td>
<td>F</td>
<td>F</td>
<td>F</td>
</tr>
<tr>
<td>I realise that counsellor-client incongruities in problem</td>
<td>1</td>
<td>25</td>
<td>55.6</td>
<td>15</td>
</tr>
<tr>
<td>conceptualisation maybe as a result of my inability to view client’s</td>
<td>2.2</td>
<td>25</td>
<td>55.6</td>
<td>15</td>
</tr>
<tr>
<td>problem from his cultural perspective.</td>
<td>F</td>
<td>F</td>
<td>F</td>
<td>F</td>
</tr>
</tbody>
</table>
I have a large repertoire of verbal and nonverbal skills to match with the cultural contexts of different clients.

I am skilled in a variety of different helping roles, methods, or approaches of the various ethnic groups in Ghana.

I am able to tell when a client’s problem relates to cultural bias.

<table>
<thead>
<tr>
<th>Statement</th>
<th>VA</th>
<th>SA</th>
<th>SI</th>
<th>V I</th>
</tr>
</thead>
<tbody>
<tr>
<td>I have a large repertoire of verbal and nonverbal skills to match with the cultural contexts of different clients.</td>
<td>4</td>
<td>8.9</td>
<td>6</td>
<td>13.3</td>
</tr>
<tr>
<td>I am skilled in a variety of different helping roles, methods, or approaches of the various ethnic groups in Ghana.</td>
<td>1</td>
<td>2.2</td>
<td>1</td>
<td>2.2</td>
</tr>
<tr>
<td>I am able to tell when a client’s problem relates to cultural bias.</td>
<td>2</td>
<td>4.4</td>
<td>15</td>
<td>33.3</td>
</tr>
</tbody>
</table>

VA= Very Accurate, SA = Somewhat Accurate, SI = Somewhat Inaccurate and V I= Very Inaccurate
APPENDIX D

Distribution of Responses (%) on the Awareness Section

<table>
<thead>
<tr>
<th>Statements</th>
<th>VW</th>
<th>FW</th>
<th>B</th>
<th>NAA</th>
</tr>
</thead>
<tbody>
<tr>
<td>I am comfortable with differences that exist between me and my clients in terms of cultural values and beliefs.</td>
<td>14</td>
<td>31.1</td>
<td>30</td>
<td>66.7</td>
</tr>
<tr>
<td>I think that clients who do not discuss intimate aspects of their cultural lives are not being resistant and defensive.</td>
<td>1</td>
<td>2.2</td>
<td>3</td>
<td>6.7</td>
</tr>
<tr>
<td>I recognise cultural beliefs affect psychosocial functioning and expressions of distress of clients</td>
<td>1</td>
<td>2.2</td>
<td>17</td>
<td>37.8</td>
</tr>
<tr>
<td>I recognise that beliefs and concepts of emotional well-being vary significantly from ethnic group to ethnic group during the counselling session.</td>
<td>1</td>
<td>2.2</td>
<td>17</td>
<td>37.8</td>
</tr>
<tr>
<td>I recognise that client’s problems are culturally based during the counselling session.</td>
<td>1</td>
<td>2.2</td>
<td>9</td>
<td>20</td>
</tr>
<tr>
<td>I accept that responses to client’s conditions and related treatment/interventions are heavily influenced by culture during counseling session.</td>
<td>6</td>
<td>13.3</td>
<td>12</td>
<td>26.7</td>
</tr>
<tr>
<td>I become sad and apologetic when giving bad news to clients.</td>
<td>8</td>
<td>17.8</td>
<td>34</td>
<td>75.6</td>
</tr>
<tr>
<td>I convey messages through proverbs, wise sayings and analogies to clients.</td>
<td>10</td>
<td>22.2</td>
<td>15</td>
<td>33.3</td>
</tr>
<tr>
<td>I agree that problems or illness come from chance occurrences: from both</td>
<td>4</td>
<td>8.9</td>
<td>26</td>
<td>57.8</td>
</tr>
<tr>
<td></td>
<td>1</td>
<td>2.2</td>
<td>13</td>
<td>28.9</td>
</tr>
<tr>
<td>------------------------------------------------------------------</td>
<td>---</td>
<td>-----</td>
<td>----</td>
<td>------</td>
</tr>
<tr>
<td>I am able to describe the social problems of the ethnic groups in my service area.</td>
<td>1</td>
<td>2.2</td>
<td>13</td>
<td>28.9</td>
</tr>
<tr>
<td>To a large extent I know the demographics, beliefs and values within communities of my service area.</td>
<td>1</td>
<td>2.2</td>
<td>11</td>
<td>24.4</td>
</tr>
<tr>
<td>I understand the social service needs within the ethnic groups that go unaddressed by the formal counselling service system in my community of service.</td>
<td>1</td>
<td>2.2</td>
<td>9</td>
<td>20</td>
</tr>
<tr>
<td>I am able to enshrine Ghanaian cultural values and beliefs during the counselling process to impart the society’s concepts of desirable morals.</td>
<td>1</td>
<td>2.2</td>
<td>8</td>
<td>17.8</td>
</tr>
</tbody>
</table>

VW = Very Well, FW = Fairly Well, B = Barely and NAA = Not At All
# APPENDIX E

## Distribution of Responses (%) on Influence of Cultural Beliefs on Counselling Skills

<table>
<thead>
<tr>
<th>Statements</th>
<th>SD F</th>
<th>D F</th>
<th>A F</th>
<th>SA F</th>
</tr>
</thead>
<tbody>
<tr>
<td>Questioning and listening techniques are appropriate for counselling in the Ghanaian context.</td>
<td>0</td>
<td>1</td>
<td>2.2</td>
<td>8</td>
</tr>
<tr>
<td>Ghanaian culture facilitates the use of supportive skills in counselling sessions.</td>
<td>0</td>
<td>4</td>
<td>8.9</td>
<td>30</td>
</tr>
<tr>
<td>Ghanaian culture encourages the use of reflection during the counselling process.</td>
<td>0</td>
<td>15</td>
<td>33.3</td>
<td>26</td>
</tr>
<tr>
<td>Ghanaian culture facilitates the use of affective skills during counselling sessions.</td>
<td>1</td>
<td>2.2</td>
<td>1</td>
<td>16</td>
</tr>
<tr>
<td>Ghanaian culture encourages the use of body gesture during the counselling process.</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>28</td>
</tr>
</tbody>
</table>

SD = Strongly Disagree, D = Disagree, A = Agree and SA = Strongly Agree
### APPENDIX F

**Distribution of Responses (%) on Cultural-contextual Factors**

<table>
<thead>
<tr>
<th>Statements</th>
<th>SD</th>
<th>D</th>
<th>A</th>
<th>SA</th>
<th>F</th>
<th>%</th>
<th>F</th>
<th>%</th>
<th>F</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>I perceive the self as part of a social network/ likely to express closeness to, and interdependence with, family.</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>23</td>
<td>51.1</td>
<td>22</td>
<td>48.9</td>
<td></td>
<td></td>
</tr>
<tr>
<td>I display different conversation styles</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>25</td>
<td>55.6</td>
<td>20</td>
<td>44.4</td>
<td></td>
<td></td>
</tr>
<tr>
<td>I respond to silence with talk during the counselling process</td>
<td>0</td>
<td>0</td>
<td>13</td>
<td>28.9</td>
<td>26</td>
<td>57.8</td>
<td>6</td>
<td>13.3</td>
<td></td>
<td></td>
</tr>
<tr>
<td>I tend to take short turns, and distribute turns evenly regardless of who has introduced the topic</td>
<td>2</td>
<td>4.4</td>
<td>16</td>
<td>35.6</td>
<td>26</td>
<td>57.8</td>
<td>1</td>
<td>2.2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>I consider interruption as a powerful discourse strategy influencing both relational and content dimensions of the counselling process</td>
<td>4</td>
<td>8.9</td>
<td>17</td>
<td>37.8</td>
<td>20</td>
<td>44.4</td>
<td>4</td>
<td>8.9</td>
<td></td>
<td></td>
</tr>
<tr>
<td>I establish common ground in shared beliefs, knowledge, and values during the counselling process</td>
<td>0</td>
<td>0</td>
<td>4</td>
<td>8.9</td>
<td>14</td>
<td>31.1</td>
<td>27</td>
<td>60</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**SD = Strongly Disagree, D = Disagree, A = Agree and SA = Strongly Agree**