The purpose of this paper was to bring together the concept of educational accountability and a systems approach to delivering marital counseling services to a university community. In so doing a heavy emphasis was placed on outliving the basic assumptions underlying the current movement for educational accountability and presenting one, very viable, model for defining and achieving educational accountability. The only concrete reference to marital counseling was as an example of how the process model for defining and achieving educational accountability might be implemented. First, the increasing importance of accountability in the next few years was emphasized. Secondly, by giving an example of accountability theory in practice, it was shown that it is a nonthreatening issue and worthwhile in the design and implementation of campus mental health services. Finally, it was noted that while the example of implementing the accountability model was concerned with marital counseling, this model is applicable for all levels and types of mental health interventions on the college campus.
Accountability and a Systems Approach to Marital Counseling in the University

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A Paper Presented at the 1972 American Personnel and Guidance Association Annual Convention
Chicago, Illinois
March 26, 1972
INTRODUCTION

Educational philosophers and practitioners have long recognized the educational systems responsibility for its' consequences - for the results that it produces (Browder, Jr., 1971). There is currently a new movement for "accountability" in education which explicitly focuses on this responsibility for results. Morris (1971) has even argued that accountability will be the educational "watchword of the 70's" in much the same manner as technology was the watchword of the 60's. Whether or not this will be true remains to be seen. However, it is clear that accountability will be an important concept of central concern to educators for at least the next few years (Lessinger, 1970a, 1970b; Lieberman, 1970; Morris, 1971; Duncan, 1971; and Garvue, 1971).

DEFINING EDUCATIONAL ACCOUNTABILITY

Defining and delimiting what is currently being discussed as accountability in education is a complex task in itself. While this concept has been presented from different viewpoints by a diverse population of "accountability pushers" there are several elements common to most discussions and definitions. The following definitions are presented as being representative of both the common and the diverse elements in these discussions and definitions.

"...The emphasis of this new accountability in education must be on what has been learned. Too frequently, educational managers attempt to explain their activities in terms of resources and processes used, rather than learning results achieved." (Lessinger, 1970c).

"The firm direction for the 'accountability' movement seems to center around the very reasonable concern that we need to find ways to relate dollars to output (i.e., the cost of a
unit of 'education' of known quality and quantity in terms of dollars expended)." (Duncan, 1971).

"The concept of educational accountability is concerned basically with techniques to guarantee a certain level of student performance relative to stated objectives and goals with an accompanying efficient use of resources." (Garvue, 1971).

"...program accountability. That is, the responsibility of program personnel... to produce an optimum level of results with the resources available." (Kruger, 1970).

The following, then, are three elements common to all definitions and discussions of educational accountability: it is (1) a continuous process (2) of maximizing educational output (3) while minimizing educational costs. The next section of this paper presents a general system approach to the accountability issue which clearly illustrates the full scope of these three common elements.

A GENERAL SYSTEM MODEL FOR DEFINING AND ACHIEVING EDUCATIONAL ACCOUNTABILITY

Kaufman (1971) points out that defining and achieving educational accountability is, at base, a major function of education and a major task of educators. The continuous improvement of the educational process, then, is in itself, an accountability process. Kaufman presents the following six-step problem solving model which he feels is applicable to the process of the management of learning. (see Figure 1)

"This model has been called a "system approach" to education, representing a closed-loop, self-correcting process for proceeding from identified needs to predictable outcomes. It represents a suggested process model for defining educational accountability and for being accountable." (Kaufman, 1971)

Perhaps the most important aspect of Kaufman's presentation is that he relates this process model to currently available tools for the
measurable improvement of the educational process. In so doing, he not only makes explicit one very excellent approach to achieving educational accountability, but he also implicitly offers a sophisticated and intelligible definition of what educational accountability means. Kaufman's integration of the problem solving model and currently available tools for the measurable improvement of education resulted in the process model for defining and achieving educational accountability which is outlined in Figure 2.

Kaufman's model has been presented as a prelude to discussing the accountability of campus mental health workers and university psychological services. This viewpoint for defining and achieving accountability is the one which will be used as the basis for this paper. It has been selected because it not only identifies the theoretical underpinnings of what is involved in being accountable, but it also relates these directly to the means which are currently available for achieving accountability. In short, this model can be used theoretically and in practice.

ACCOUNTABILITY AND CAMPUS MENTAL HEALTH WORKERS

If this is the process model for being accountable, what then are educators (including campus mental health workers) accountable for? Part of the answer is implicit in the model itself. That is, they are accountable for defining their goals and objectives and demonstrating that they have achieved these goals. Lessinger and others further make it clear that educational accountability means accountability for results, for output achieved at least cost.

Harmes (1971) presents a point of view which seems especially relevant to this paper and will serve as the basis for conceptualizing the output of campus mental health workers. He argues that educational output can be classified into two types - process output and product.
output. Process output describes results in terms of what will be or have been done, i.e., what processes have been put into operation or what services have been rendered. Product output ignores these sorts of results and instead describes educational outputs in terms of changes that have occurred in the (learning) behavior of the student or participant. An example of educational process output relevant to counseling would be $X$ hours of $Y$ counseling intervention under $Z$ conditions. A similar example of product output would be $X$ change in $Y$ client on $Z$ criteria. "The major difference between product output... and process output... then, lies with the conditions specified as outcomes." (Harmes, 1971).

This discrimination between educational process and educational product output has been made so as to make clear the full scope of output for which campus mental health workers can and probably will be held accountable. Thus, not only are campus mental health workers accountable for providing needed services they are accountable for some evidence of the qualitative effect of these services. For example, if the goal of a drug prevention program is to cut down on the amount of drug usage in the campus community and it doesn't, then that program is not accountable (even though it may be meeting a stated need) and needs to be changed or eliminated.

The accountability challenge facing campus mental health workers is further complicated by the financial problems of most colleges and universities. The hue and cry is not only to deliver the needed services and to demonstrate their effectiveness, but to do so at least cost. In fact, it is the current financial squeeze which has spurred the inquiries into how much service is being rendered and with what effectiveness. This is the accountability challenge facing campus
Having noted that accountability is and will probably continue to be a major issue confronting educators, discussed what is meant by educational accountability, presented a process model for being accountable, and outlined a point of view about what campus mental health workers are accountable for, it would seem this paper could and should end. This is not the case. In order for this paper to be "Accountable" it needs to bridge the gap from theory to possibility, from general concepts and ideas to more specific, operational programs which are capable of being implemented. The remainder of this paper outlines and presents an example of how Kaufman's model for defining and achieving educational accountability could be aligned with a campus mental health orientation to achieve a higher degree of professional accountability.

The example is concerned with the problems associated with defining, developing and delivering marital counseling services to the campus community. Herein marital counseling services includes not only formal therapy and counseling but such experiences as marital groups, marital encounter groups, pre-marital counseling and groups, and other psychologically "supportive" or "growth" producing experiences for married or potentially married couples. Figure 3 shows, in outline form, the general conceptualization process which has led to the delimitation and narrowing down of the specific concern "How to define, develop, and deliver marital counseling services to a university community."

**Identification of the Problem (Step 1.0)**

The first step in the process is the identification of the problem.
While this may seem an obvious step, it is often the most neglected one in the development of mental health programs. The main emphasis of this step and its goal is to sort out and make clear the discrepancy between what is and what should be. Thus, a need exists and a problem is identified when the discrepancy between what is and what should be is greater than is reasonable or desired.

There are three things which can be done in attempting to identify the scope and import of the problems of delivering marital counseling services to a campus community. The first of these is a "needs survey." The focus of such a survey would be on assessing the number of potential marital counseling clients in the university community whose needs were going unmet. Such a survey could be conducted in cooperation with such groups as married student housing, student senate or government, department heads and deans, student health services, etc. In addition to assessing the number of persons experiencing marital difficulties who might like help, it would be essential to assess the nature of the difficulties that they desired help for. Without the latter information certain interventions may prove useless while others which may be very useful may not even be considered. The format for doing such a survey needs to be adapted to the individual campus and the more creatively this is done the more successful it will probably be.

However, two means for obtaining this data which would probably be successful on most campuses are (1) a short, one-page questionnaire mailed to all married staff, faculty, and students, or (2) a standardized interview polling procedure of a randomly selected sample of married couples in the university community. It is important that all members of the university community (not just students) be sampled in this needs survey. This is an especially important point if one assumes
a community mental health orientation to the campus community.

Paralleling a needs survey would be a resources survey. Rather simplistically this amounts to some one person or group of persons finding out what resources are available on the campus and in the surrounding community to meet the needs of persons seeking some sort of marital counseling. In conducting such a survey three things are important to assess: (1) who is actually offering marital counseling and related services, (2) who is available that could contribute to the development of such services (even though they might be engaged in activities other than marital counseling), and (3) what are the qualifications and ranges of experiences of these two groups of people. This resources survey is an important facet of identifying the problem since it helps to clarify the reality of what is available (in our example, available in terms of marital counseling services).

A final means to identifying the problem is through already existing data. This would involve surveying the mental health workers associated with the campus community regarding the number of actual clients involved in marital counseling. While this data may appear to be "after the fact" it is an important source of information which is often overlooked when developing new programs (such as marital counseling) and revising old ones. It is especially important when discussing the results of such a survey to note not only the number of marital clients actually being seen but to also pay attention to the number of persons who applied for this type of service.

The analysis of these three sorts of data should provide enough understanding of the nature and scope of the needs so as to be able to identify the problem. In fact, such a combination of surveys might show that the need for marital counseling is being adequately met. If
this is the case, then by accurately identifying the problem (on in this case the lack of one) needed funds and personnel will not be used inefficiently or ineffectively. However, if there does appear to be sufficient reason to warrant developing some sort of marital counseling intervention, then "determining solution requirements and alternatives" (step 2.0 of Kaufman's model) becomes the next major focus.

Determining Solution Requirements and Alternatives (Step 2.0)

This is a difficult and complex step in that it involves two interrelated processes. The first is to operationally and behaviorally outline what the desired state of affairs would be if all the needs were being met. The desired state of affairs, in terms of marital counseling, could be defined in several ways. One alternative would be that all couples who seek counseling regarding marital problems would receive that service within a week of their application (no waiting list). A slightly different alternative would be that all couples in the university community would be appraised of a series of experiences which are available to them which may be beneficial to their marital relationship. Included in these experiences would be such things as encounter groups for couples, group marital counseling, individual marital counseling, family planning counseling, married couples social-skills groups, or whatever range of activities it was decided to offer. The important point is that this desired state of affairs needs to be operationally defined against the background of the demonstrated needs and identified problems which are evident from the first step of the process.

Having operationally defined the desired state of affairs, every imaginable and workable alternative to obtaining this state of affairs is outlined and considered. Thus, if the desired state of affairs is that every couple on campus who is experiencing problems in their marriage
has the opportunity to work out those problems with professional help, then every therapeutic intervention which is plausible or has some demonstrated effectiveness is outlined. If the desired state of affairs is that every couple on campus has the opportunity to further grow in and enrich their marital relationship as well as work through difficulties they are having, then a wider range of human relationship interventions (in addition to therapeutic interventions) needs to be operationalized and outlined. **In all of these instances, however, it is very important to "tie-down" all objectives and all interventions to the most specific requirements possible. This requires that the solution alternatives be stated in clear, precise and behaviorally defined language. Unless this is done, the next step in the process will become redundant and ineffectual.**

**Select Solution Strategies and Tools (Step 3.0)**

This next step also involves two phases, the first one being the determination of the exact criteria by which the solutions to the identified problem (steps 1.0 and 2.0) will be assessed. Thus, if budgetary concerns are a major factor in developing a marital counseling program then cost factors of various interventions need to be clearly analyzed. This relates to step 2.0 where the solutions or alternatives were operationally defined and their objectives and sub-objectives clearly delineated. When this has been correctly done, the relative merits of the various solutions can be more meaningfully weighed against the anticipated cost.

This, in fact, is the second phase of step 3.0. Once the criteria and the priorities for assessing solution alternatives have been made explicit and operationally clear, they can then be used in the actual determination of what intervention or type of program will be used.
Criteria which might be used in assessing solution alternatives for delivering marital counseling to the university community are: cost factors; number of persons served; number of hours of service available to persons seeking service; need for special facilities or equipment; use of already existing staff, facilities and equipment; desired level of expertise of persons offering the service; and the desired future growth of the program originally offered.

The following hypothetical example may serve to clarify what has been said to this point. On campus A, step 1.0 was completed with the general results that 30% of the married students (about 150 couples) indicated a strong desire for experiences which might enhance their marital relationship while another 10% (about 50 couples) indicated a strong need for professional help in working through difficult marital problems. On this campus there were no appropriate experiences or appropriate resources which marital couples could seek out to enhance their marital relationship (such as encounter or sensitivity groups for couples, human consciousness groups, settings for couples to rap or to simply gripe about their problems and concerns, etc.). There were no formally trained marital counselors on the campus even though about 10% of the students who applied for counseling did so for marital problems. Finally, only 1% of the counseling being done on the campus was with married couples.

Step 2.0 resulted in a veritable cornucopia of solution alternatives (just trying to see if anyone has continued to read this far!). These ranged from a complex total program of encounter groups, rap sessions, social groups, and expanded formal therapy to simply developing and providing a referral network for persons experiencing marital problems and seeking professional help.
The three criteria that were determined as being the most important were: (1) cost must be held down, although a limited amount of new funds could be made available - somewhere in the dollar range of a new staff member (Ph.D. with experience) and a secretary (2) persons offering services to married students must be qualified psychologists and possess expertise in the marital and group counseling area and (3) other services to students would not be significantly curtailed at the expense of expanding the marital counseling program.

Given these criteria and the documented needs from step 1.0 it was decided to hire a full time person whose charge would be to implement a program of group experiences for marital couples aimed at enhancing their marital relationship. In addition, this person's responsibilities would include supervising already existing counseling staff in marital counseling. In this way they could better meet the need for such counseling services by expanding the amount of service they felt they could offer (they didn't feel well qualified as a total staff for everyone to be doing marital counseling and that is why they were seeking so few couples).

Implement (Step 4.0)

The next step in Kaufman's model for defining and achieving educational accountability is to implement the solution alternative decided upon (step 4.0). In the example being followed this is a somewhat "cloudy" phase since the solution alternative was to hire someone new to implement the desired program. In continuing the example it will be assumed that the person hired followed through on the two mandated directions of the new program - the group experiences and the in-service training of existing staff.

There are several alternatives available in terms of how this new
person might actually implement such a marital program. Only one way, however, will be presented. This is being done because the author of this paper has found this method extremely effective for similar projects and programs, because various forms of this technique have been used with documented effectiveness, and because it is one of the techniques suggested by Kaufman's model as being effective for implementation.

The method or technique is a modification of Cook's (1966) Program Evaluation Review Technique (PERT). The first step is to list every act that needs to be performed in order for the program to be implemented. As this is done each act is assigned the amount of time it is realistically estimated it will take to complete that act (real limit). In addition, the amount of time the act will take to complete if everything goes wrong (outer limit) is also estimated and noted. All acts are then arranged in the "correct" sequence for the completion of the total task. This is done via the use of "flow-charts." While the flow-chart remains the same (since the necessary sequence of events remains stable, i.e., some events have to be completed before others can start) it can be related to both the real time limits and the outer time limits. By using such flow-charts it can be reasonably expected that the implementation of the program will progress as planned.

**Determine Program Effectiveness (Step 5.0) and Revise as Needed (Step 6.0)**

The fifth step of Kaufman's model, determining program effectiveness, is not a fifth and final step. In fact, it is inextricably bound up with the sixth step of the model, "revise as needed." Kaufman makes it clear that step 5.0 involves not only assessing the total or final achievements of the program but the on-going assessment of all the steps and phases of the program as they are completed. It is the latter sort of evaluation which makes step 6.0 not only possible, but of major importance. It is
this kind of daily assessment which allows the total system to be self-
correcting and responsive to changes in needs and priorities.

There are several ways to assess the effectiveness of marital
counseling programs. The key to the process, however, goes back to
step 2.0 of our (Kaufman) model. If the goals and objectives are clearly
and operationally defined at this point, they can be readily assessed,
when appropriate. Drawing on our mythical "university A" for the final
time we can see how this might be done.

Two aspects of the program developed at university A will be dis-
cussed to illustrate the two ways of determining program effectiveness
(terminal achievement and process achievement). One of the programs was
a series of encounter groups for couples. The general goal of these
groups was to enhance the individual participants awareness and under-
standing of how people communicate in their interpersonal relations.
More specifically this involved increasing the ability to listen and
attend to other persons verbal and non-verbal communications, increasing
awareness of how one's own style of verbal and non-verbal communication
affects others, and trying new ways and means of communication to other
persons.

To determine the effectiveness of the groups two things were done.
First, a questionnaire focusing on communication issues, skills, and
behaviors in the marital relationship was developed. It asked such
questions as "Does your spouse communicate feelings in non-verbal ways
which you understand?" This questionnaire was administered pre- and
post-encounter group experience to see if the experience did, in fact,
enhance the marital relationships intra-communication. Secondly, the
participants were asked to rate the effectiveness of all the activities
which were part of the encounter experience and to note especially ways
things could be done differently and more beneficially. By gathering this data at the end of each group and analyzing it before the next group, changes in goals, activities, and formats could be made. This demonstrates the self-correcting nature of the evaluation feedback loop.

A second aspect of the program at "university A" which will illustrate the terminal achievement style of evaluation stems from the expanded marital counseling therapy services offered. Herein a "marital problem check list" was developed and administered when the couple first came for counseling and after they were terminated. Since the general goal of marital counseling at "university A" was seen to be helping couples work through marital problems, such a check list was seen as a legitimate measure of the effectiveness of that counseling. This was especially true since the check list administered to terminated couples asked them to state how much help their counseling had been in working through their specific problems. This is considered terminal assessment of effectiveness because the data was not available in large enough quantities until the end of the year to be utilisable. In addition it was only available after the couple had terminated and thus not self-correcting in terms of their counseling (although it could be useful self-correcting information for the counselor before he saw another couple).
SUMMARY

The purpose of this paper has been to bring together the concept of educational accountability and a systems approach to delivering marital counseling services to the university community. In so doing a heavy emphasis has been placed on outlining the basic assumptions underlying the current movement for educational accountability and presenting one, very viable, model for defining and achieving educational accountability.

This has somewhat slighted the issue of marital counseling in the university community. In fact, the only concrete reference to marital counseling was as an example of how the process model for defining and achieving educational accountability might be implemented. This has been pointed out, on the one hand as a means to summarize the paper, and on the other to next illustrate two reasons why the paper took this approach.

First, it is felt that accountability is going to become a far more important topic in the next few years than it is now and thus merits ample consideration and discussion. Secondly, by giving an example of how accountability theory could be put into practice, it is hoped to make clear that this can be a nonthreatening issue and, in fact, one which might be both generative and regenerative for campus mental health workers as they design and implement their services. Finally, it should be noted that while our example of implementing the accountability model was concerned with marital counseling, this model is applicable for all levels and types of mental health interventions on the college campus.
References


Lessinger, L.M. Accountability in education: Every kid a winner. SRA, 1970. (a)


Other sources available upon request.
Figure 1 *

"A six-step problem solving model for application to Education. The six steps are identified, five within the boxes, and the sixth represented by the broken line which indicates revision as required by performance."

Figure 2 *

"The relationship between current tools for the improvement of Education and their relationship with a problem solving process and a possible model for educational management, and defining and achieving educational accountability."

Figure 3

A model for accountability, "Thought Through."

<table>
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<tr>
<th>1.0 Identify Problem</th>
<th>2.0 Determine Solution Requirements and Alternatives</th>
<th>3.0 Select Solution Strategies and Tools</th>
<th>4.0 Implement</th>
<th>5.0 Determine Performance Effectiveness</th>
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A GENERAL DESCRIPTION OF EACH STEP

The problem is identified from documented needs. A need is defined as the discrepancy between what is and what should be.

Description of the necessary requirements to get from what is to what should be. Involves a detailed delineation of general objectives and sub-objectives followed by a detailed outline of possible solution tools and strategies.

Determination of criteria by which solutions to the identified problem will be assessed. Then these criteria are used to select the solution strategies and tools.

Involves designing and/or obtaining the tools & solution strategies & utilizing these in implementing the desired programs to meet the documented needs (step 1.0).

Evaluation of the extent to which the desired results are achieved (terminal achievement) as well as for process utility. (formative evaluation)

AN EXAMPLE OF EACH STEP BASED ON THE DELIVERY OF MARITAL COUNSELING TO THE UNIVERSITY COMMUNITY

Needs Survey - Questionnaire to all married persons associated with the university-a poll of randomly selected married persons done in person.

Resources Survey - A survey of who is doing marital counseling, how much is being done, and who else could contribute to a marital counseling service.

Data Collection - What data is already available regarding the need for marital services & the meeting of this need.

Operational definitions of the desired state of affairs - example - all couples seeking marital counseling will be seen within 1 week of their application (no waiting list). Descriptions (in behavioral & operational terms) of possible interventions to be used in reaching the desired state of affairs (including type of therapy to be offered, under what conditions, etc.).

Criteria and priorities to be assigned in terms of the total mental health services offered to the university. Possible major criteria: budget, new use of personnel, facilities & equipment, and desired level of expertise of persons doing the marital counseling.

Use of flow-charts, PERT diagrams, etc. to guarantee smoothly run program and especially see that all administrative details are handled properly.

Terminal achievements: What are outcomes of therapeutic interviews? - Have overall objectives been reached?

Formative evaluation: Are goals as stated, attainable? - Is the program implemented smoothly? - Do persons in the program know what is being done & why?
1. DEFINING EDUCATIONAL ACCOUNTABILITY

2. A GENERAL SYSTEM MODEL FOR DEFINING AND ACHIEVING EDUCATIONAL ACCOUNTABILITY.

3. ACCOUNTABILITY AND CAMPUS MENTAL HEALTH WORKERS

4. ACCOUNTABILITY AND THE DELIVERY OF MARITAL COUNSELING SERVICES TO THE UNIVERSITY COMMUNITY.

   A. Identification of the Problem (Step 1.0)
   B. Determining Solution Requirements and Alternatives (Step 2.0)
   C. Select Solution Strategies and Tools (Step 3.0)
   D. Implement (Step 4.0)
   E. Determine Program Effectiveness (Step 5.0) and Revise as Needed (Step 6.0).

5. SUMMARY