

## Cooper – Norcross Inventory of Preferences (C-NIP)

On each of the items below, please indicate your preferences for how a psychotherapist or counsellor should work with you by circling a number. A 3 indicates a *strong* preference in that direction, 2 indicates a *moderate* preference in that direction, 1 indicates a *slight* preference in that direction, 0 indicates no preference in either direction/an equally strong preference in both directions.

### 'I would like the therapist to...'

1. Focus on specific goals No or equal preference Not focus on specific goals  
 3                      2                      1                      0                      -1                      -2                      -3

2. Give structure to the therapy No or equal preference Allow the therapy to be unstructured  
 3                      2                      1                      0                      -1                      -2                      -3

3. Teach me skills to deal with my problems No or equal preference Not teach me skills to deal with my problems  
 3                      2                      1                      0                      -1                      -2                      -3

4. Give me 'homework' to do No or equal preference Not give me 'homework' to do  
 3                      2                      1                      0                      -1                      -2                      -3

5. Allow me to take a lead in therapy No or equal preference Take a lead in therapy  
 -3                      -2                      -1                      0                      1                      2                      3

**Scale 1.** If score is 8 to 15 then strong preference for therapist directiveness. If score is -2 to 7 then no strong preference. If score is -3 to -15 then strong preference for client directiveness.

6. Encourage me to go into difficult emotions No or equal preference Not encourage me to go into difficult emotions  
 3                      2                      1                      0                      -1                      -2                      -3

7. Talk with me about the therapy relationship No or equal preference Not talk with me about the therapy relationship  
 3                      2                      1                      0                      -1                      -2                      -3

8. Focus on the relationship between us No or equal preference Not focus on the relationship between us  
 3                      2                      1                      0                      -1                      -2                      -3

9. Encourage me to express strong feelings No or equal preference Not encourage me to express strong feelings  
 3                      2                      1                      0                      -1                      -2                      -3

10. Focus mainly on my thoughts No or equal preference Focus mainly on my feelings  
 -3                      -2                      -1                      0                      1                      2                      3

**Scale 2.** If score is 7 to 15 then strong preference for emotional intensity. If score is 0 to 6 then no strong preference. If score is -15 to -1 then strong preference for emotional reserve

11. Focus on my life in the past No or equal preference Focus on my life in the present  
 3                      2                      1                      0                      -1                      -2                      -3

12. Help me reflect on my childhood No or equal preference Help me reflect on my adulthood  
 3                      2                      1                      0                      -1                      -2                      -3

13. Focus on my future No or equal preference Focus on my past  
 -3                      -2                      -1                      0                      1                      2                      3

**Scale 3.** If score is 3 to 9 then strong preference for past orientation. If score is -2 to 2 then no strong preference. If score is -3 to -9 then strong preference for present orientation.

14. Be challenging No or equal preference Be gentle  
 -3                      -2                      -1                      0                      1                      2                      3

15. Be supportive No or equal preference Be confrontational  
 3                      2                      1                      0                      -1                      -2                      -3

16. Not interrupt me No or equal preference Interrupt me and keep me focused  
 3                      2                      1                      0                      -1                      -2                      -3

17. Be challenging of my own beliefs and views No or equal preference Not be challenging of my own beliefs and views  
 -3                      -2                      -1                      0                      1                      2                      3

18. Support my behaviour unconditionally No or equal preference Challenge my behaviour if they think it's wrong  
 3                      2                      1                      0                      -1                      -2                      -3

**Scale 4.** If score is 4 to 15 then strong preference for warm support, If score is -3 to 3 then no strong preference. If score is -4 to -15 then strong preference for focused challenge.

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**Additional client preferences for exploration and consideration (as appropriate to service provision)**

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Do you have a **strong** preference for:

- A therapist of a particular **gender, race/ethnicity, sexual orientation, religion, or other personal characteristic**?
- A therapist/counsellor who speaks a **specific language** that is most comfortable for you?
- **Modality** of therapy: such as individual, couple, family, or group therapy?
- **Orientation** of therapy: such as psychodynamic, cognitive, person-centred, or other?
- **Number** of therapy sessions: such as four, dependent on review, open-ended, or other?
- **Length** of therapy sessions: such as 50 mins, 60 mins, 90 mins or other?
- **Frequency** of therapy: such as twice weekly, weekly, monthly, ad hoc or other?
- **Medication**, psychotherapy, or both in combination?
- Use of **self-help** books, self-help groups, or computer programs in addition to therapy?
- **Any other** strong preferences that come to mind? (and do raise them at any point in therapy)
- What would you most **dislike** or **despise** happening in your therapy or counselling?