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## Relationships of Level of Self-disclosure and Levels of Facilitative Functioning and Manifest Anxiety

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RELATIONSHIPS OF LEVEL OF SELF-DISCLOSURE  
AND LEVELS OF FACILITATIVE FUNCTIONING  
AND MANIFEST ANXIETY

by

Ezequiel Nieto-Cardoso

A Dissertation Submitted to the Faculty of the Graduate School  
of Loyola University of Chicago in Partial Fulfillment  
of the Requirements for the Degree of  
Doctor of Philosophy

October 1974

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## VITA

Ezequiel Nieto-Cardoso was born in Valle de Santiago, Guanajuato, Mexico, October 28, 1933. He graduated from Colegio Cristobal Colon High School in 1949 and obtained the Bachelor of Arts degree at the Christian Brothers Scholasticate in Mexico City in 1954. He taught social sciences for four years at Instituto Frances de la Laguna, In Gomez Palacio, Durango, Mexico. In 1958, he obtained the Master of Arts degree in Social Sciences at the Universidad de Coahuila, Saltillo, Mexico. In 1962, he obtained the Master degree in Theology at the Institute of the Brothers of the Christian Schools in Rome, Italy, and in 1968 began graduate work in Guidance and Counseling at Loyola University of Chicago, where he obtained the degree of Master of Education in 1971. The same year, 1971, he was accepted as a candidate for the doctoral program at the same university. In February 1973 he was appointed professor in the Department of Psychology at the University of Monterrey, Mexico; and in August 1974 he was named chairman of the Department of Psychology at the same university.

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## CHAPTER I

### THE PURPOSE AND SCOPE OF THE STUDY

#### Background of the Problem

Fairly recent attention has shifted from counselee self-disclosure toward the value of counselor self-disclosure and its relationships to the therapeutic encounter. Rogers<sup>1</sup> speaks of counselor "congruency" or "genuineness," Truax and Carkhuff<sup>2</sup> of helper "transparency," Jourard<sup>3</sup> of therapist "transparent self," Kell and Mueller<sup>4</sup> of "therapist unveiling" or "therapist selective revelations," and Allen<sup>5</sup> of counselor "psychological openness."

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<sup>1</sup> C.R. Rogers, On Becoming a Person (Boston: Houghton-Mifflin, Co., 1961).

<sup>2</sup> C.B. Truax and R.R. Carkhuff, "Client and Therapist Transparency in the Psychotherapeutic Encounter," Journal of Counseling Psychology, XXII (1965), 3-9.

<sup>3</sup> S.M. Jourard, The Transparent Self (New York: Van Nostrand Reinhold Company, 1971).

<sup>4</sup> B.L. Kell and W.J. Mueller, Impact and Change: A Study of Counseling Relationships (New York: Appleton Century Crofts, 1966).

<sup>5</sup> T.W. Allen "Effectiveness of Counselor Trainees as a Function of Psychological Openness," Journal of Counseling Psychology, XIV (1967), 35-40.

Jourard<sup>6</sup> and Carkhuff<sup>7</sup> see self-disclosure as a critical factor of effective communication in the helping process. Jourard<sup>8</sup> has declared that no man can come to know himself truly except as an outcome of self-revelation to another significant person. He also has stated that counselor self-disclosure is a critical factor in effective counseling and psychotherapy and that it would seem important to assess the relationship between the counselor's readiness to reveal his authentic being and his measured level of facilitative functioning.

Although the specific term self-disclosure is relatively new, the concept is not. Early concerns in psychotherapy dealt with the "uncovering process" and the value of counselee "self-revelation." Dolliver<sup>9</sup> identified the various labels applied to self-disclosure in the past, e.g., Freud's "The Unconscious,"

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<sup>6</sup> S.M. Jourard, op. cit.

<sup>7</sup> R.R. Carkhuff, Helping and Human Relations, Vol. 1 (New York: Holt, Rinehart and Wiston, Inc. 1969).

<sup>8</sup> S.M. Jourard, Disclosing Man to Himself (New York: Van Nostrand Reinhold Company, 1968).

<sup>9</sup> R.H. Dolliver, "'Expressive' and 'Instrumental' as Conceptualization of Counseling," Journal of Counseling Psychology, XII (1965), 414-415.

Jung's "The Collective Unconscious" and the "Undiscovered Self," Rogers' "The Self Which One Truly Is," the existential therapist's "Authentic Being."

Rogers<sup>10</sup> stated that it is not the counselor's technique or theoretical orientation which is the crucial component in the counseling relationship. Rather, it is the ability of the counselor to be "congruent," "genuine," authentic, or transparently real. This position has been adopted by Truax and Carkhuff<sup>11</sup>, Carkhuff and Berenson<sup>12</sup>, Jourard<sup>13</sup>, and Pietrofesa, Leonard and Van Hoose<sup>14</sup>.

Although most counselors would agree that the manner of

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<sup>10</sup> C.R. Rogers, "The Characteristics of a Helping Relationship," Personnel Guidance Journal, XXXVII (1958), 6-16.

<sup>11</sup> C.B. Traux and R.R. Carkhuff, op. cit.

<sup>12</sup> R.R. Carkhuff and B.G. Berenson, Beyond Counseling and Therapy (New York: Holt, Rinehart and Wiston, Inc., 1967).

<sup>13</sup> S.M. Jourard, op. cit.

<sup>14</sup> J.J. Pietrofesa, G. E. Leonard, and W. Van Hoose, The Authentic Counselor (Chicago: Rand McNally, 1971).

the counselor's being when in the presence of the client creates one of the necessary and sufficient conditions for therapeutic change (Rogers<sup>15</sup>), in the past there appears to have been relatively little research on the topic. Luborsky, Chandler, Auerbach, Cohen, and Bacharch<sup>16</sup> reviewed one hundred and sixty-six studies of predictions of individual psychotherapy outcome with adult clients. Their search covered a period of 23 years of research, from 1946 through 1969. By far, the largest number of studies reviewed dealt with counselee factors and only a few with counselor factors.

This rather current investigation of the counseling literature has led to the conclusion that there is a relative scarcity of research on counselor's readiness for self-disclosure, especially in relation to other variables, such as facilitative functioning and manifest anxiety level. It is in the light of this

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<sup>15</sup> C.R. Rogers, "The Necessary and Sufficient Conditions of Therapeutic Personality Change," Journal of Consulting Psychology, XXI (1957), 95-103.

<sup>16</sup> L. Luborsky, M. Chandler, A.H. Auerbach, J. Cohen, and H.M. Bachrach, "Factors Influencing the Outcome of Psychotherapy. A Review of Quantitative Research," Psychological Bulletin, LXXV (1971), 145-185.

lack of research, that this present study is offered.

### Purpose of the Study

Recent studies (Rogers<sup>17</sup>, Demos<sup>18</sup>, Kell and Mueller<sup>19</sup> Truax and Carkhuff<sup>20</sup>, Carkhuff and Berenson<sup>21</sup>, Carkhuff<sup>22</sup>,) have indicated that it may be less the technique or the theoretical orientation of the counselor which foster human growth; rather it appears to be the manner of the counselor's being when in the presence of the client which helps to create the necessary and

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<sup>17</sup> C.R. Rogers, "The Therapeutic Relationship: Recent Theory and Research," Australian Journal of Psychology, XVII (1965), 95-108.

<sup>18</sup> G.D. Demos, "The Application of Certain Principles of Client Centered Therapy to Short-term Vocational-Educational Counseling," Journal of Counseling Psychology XI (1964) 280-281.

<sup>19</sup> B.L. Kell and W.J. Mueller, Impact and Change: A Study of Counseling Relationships (New York: Appleton-Century-Crofts, 1966).

<sup>20</sup> C.H. Truax and R.R. Carkhuff Toward Effective Counseling and Psychotherapy (Chicago: Aldine Publishing Co., 1967).

<sup>21</sup> R.R. Carkhuff and B.G. Berenson, op. cit.

<sup>22</sup> R.R. Carkhuff, op. cit.



sufficient conditions for therapeutic change. Rogers<sup>23</sup>, and Jourard<sup>24</sup> affirm that effective counselors seem to follow this implicit hypothesis: growth is fostered if therapists let their clients be themselves. In other words, growth is fostered if counselors, avoiding compulsions to silence, to reflection to interpretation, to impersonal techniques, strive to know their counselee involving themselves in his situation and then respond to his utterances with their authentic selves. Also the indication is that readiness and spontaneity for self-disclosure by the counselor during a counseling interview do not mean that the counselor eliminates the use of techniques, diagnoses, judgments, but rather that he is free enough to think and feel aloud and truly express himself to his counselee.

Then, this present study is based on the premise that there are critical necessary and sufficient characteristics a counselor must possess or promote in himself to effect an

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<sup>23</sup> C.R. Rogers, "The Interpersonal Relationships: The Core of Guidance," Harvard Educational Review, XXXII (1962), 416-429.

<sup>24</sup> S.M. Jourard, op. cit.

atmosphere of facilitation and growth. It is assumed that these characteristics are high-order variables drawn from a theoretical understanding of the demands posed by the counseling relationship.

It is the purpose of this dissertation to examine the importance of the counselor-trainee's readiness to be disclosing regarding his authentic life as a high-order variable in relation to counselor-trainee level of facilitative functioning. Since counselor anxiety has been demonstrated to be a deterrent to a counselor's ability to communicate, understand, and help the client (Steiber<sup>25</sup>), this study also explores the level of interaction between self-disclosure, facilitative functioning, and anxiety.

### Statement of the Problem

This research attempts to assess the relationships between counselor-trainee's degree of readiness for self-disclosure and his measured level of facilitative functioning and manifest anxiety. It

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<sup>25</sup> J.K. Steiber, "Counselor Anxiety and Interview Behavior." (Unpublished doctoral dissertation, Columbia University, 1967).

is hoped that a determination of these relationships might prove useful in the development of criteria for selecting and training of prospective professional counselors.

The total sample consisted of 30 practicum students, in addition, selected groups, defined as those subjects whose scores above (13 Ss) or below (14 Ss) the median on the self-disclosure pretest, were examined.

### Hypotheses

In relation to the purpose of this study and the scope of the design, the following questions were considered.

1. What are pre-practicum counselor-trainee levels of self-disclosure, facilitative functioning, and manifest anxiety?
2. What are post-practicum counselor-trainee levels of self-disclosure, facilitative functioning, and manifest anxiety?
3. Are there significant differences between pre and post-practicum results on any of these variables?
4. Are there significant differences on any of these

variables at pre or post-practicum testing between the two selected groups, consisting of those subjects either above or below the median on pretest self-disclosure?

5. What is the predictive ability of pre-practicum self-disclosure score in relation to post-practicum facilitative functioning level?

The following null hypotheses were tested for the total sample and/or the selected groups:

Null hypotheses pertaining to the total sample.

1. No significant relationships exist for the total sample between readiness for self-disclosure, facilitative functioning, and manifest anxiety at pretest situation.

2. No significant relationships exist for the total sample between readiness for self-disclosure, facilitative functioning, and manifest anxiety at posttest situation.

3. No significant differences exist for the total sample from pretest to posttest situation on readiness for self-disclosure, facilitative functioning, and manifest anxiety.

4. No significant relationships exist for the total sample between pretest readiness for self-disclosure and posttest facilitative functioning.

Null hypotheses pertaining to selected groups.

5. No significant relationships exist for the high group between readiness for self-disclosure, facilitative functioning, and manifest anxiety at pretest situation.

6. No significant relationships exist for the high group between readiness for self-disclosure, facilitative functioning and manifest anxiety at posttest situation.

7. No significant differences exist for the high group from pretest to posttest situation on readiness for self-disclosure, facilitative functioning, and manifest anxiety.

8. No significant relationships exist for the high group between pretest readiness for self-disclosure and posttest facilitative functioning.

9. No significant relationships exist for the low group between readiness for self disclosure, facilitative functioning, and

manifest anxiety at pretest situation.

10. No significant relationships exist for the low group between readiness for self-disclosure, facilitative functioning, and manifest anxiety at posttest situation.

11. No significant differences exist for the low group from pretest to post-test situation on readiness for self-disclosure, facilitative functioning, and manifest anxiety.

12. No significant relationships exist for the low group between pretest readiness for self-disclosure and posttest facilitative functioning.

13. No significant differences exist for the high versus low group at pretest situation on readiness for self-disclosure facilitative functioning, and manifest anxiety.

14. No significant differences exist for the high versus low group at posttest situation on readiness for self-disclosure facilitative functioning, and manifest anxiety.

15. No significant differences exist for the high versus low group between readiness for self-disclosure, facilitative functioning,

and manifest anxiety from pretest to posttest.

### Definitions of Terms

Certain terms while in general use, have special meaning in relation to this study and are specifically defined as follows:

Self-disclosure refers to the ability to communicate, verbally or behaviorally, to others feelings of anger, affection, fear doubts or any emotion being experienced in the counseling relationship. Self-disclosure is operationally defined as the score on the Jourard Self-Disclosure Questionnaire for Selecting High- and Low-Disclosing Subjects.

Facilitative functioning has a twofold meaning. One, it is the counselor's ability to catch and discern that which is happening in the total relationship and what the client is actually saying: two, it is the counselor's ability to discern that which is helpful to do or say in a given situation. Facilitative functioning is that which frees the client to attain higher and more personally rewarding levels of inter - and intra - personal functioning. Two variables are assessed in evaluating and rating counselor-trainee facilitative functioning:

(1) the level of facilitative conditions offered by the counselor and  
(2) the counselor's action orientation (Carkhuff<sup>26</sup>). Facilitative functioning is operationally defined as the score on the Carkhuff Scale of Gross Ratings of Facilitative Functioning.

Anxiety. Taylor and Spence<sup>27</sup> defined anxiety in terms of an acquired drive which has the capacity to generally energize the organism. Anxiety is operationally defined as the score on the Taylor Manifest Anxiety Scale.

Counselor trainees were those students enrolled in the course Practicum in Guidance and Counseling, Guidance 495, during the Summer session, 1972, at Loyola University of Chicago.

Coached client. A coached client is analogous to an actor playing a role, i.e., a student seeking help from a counselor. His role is constructed in such manner that he will confront the counselor

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<sup>26</sup> R.R. Carkhuff, op. cit. pp. 115-123.

<sup>27</sup> J.A. Taylor and K.W. Spence, "The Motivational Components of Manifest Anxiety: Drive and Drive Stimuli," in Anxiety and Behavior ed. by Charles D. Spielberger. (New York: Academic Press 1966) pp. 291-326.



with a variety of problems resembling those confronted by a counselor doing his job.

### Procedure

A pretest-posttest design was used. Subjects were 30 counselor-trainees enrolled in the Practicum in Guidance and Counseling, Guidance 495, during the Summer session of 1972 at Loyola University of Chicago. Clients interviewed for purposes of this research were coached clients. Instruments used were: Jourard Self-Disclosure Questionnaire for Selecting High and Low-Disclosing Subjects, Taylor Manifest Anxiety Scale, and the Carkhuff Scale of Gross Ratings of Facilitative Functioning.

In addition to the analysis of the total sample, selected groups defined as those subjects whose scores fell above or below the median on self-disclosure pretest were examined. It was thought that the selected groups\* provide differentiated cases, being located on either side of the statistical curve.

The statistical procedures employed in this design included the Product-Moment Method (Pearson r) and partial

correlation analysis for assessing the correlations between self-disclosure, facilitative functioning, and manifest anxiety in pre-practicum, post-practicum, and change situations; t test for uncorrelated samples in comparing the total sample and the selected groups on the same instruments at different points in time.

### Limitations

Instruments used. While it would have been helpful and even valuable to have used additional instruments only single instruments were used in assessing self-disclosure, facilitative functioning, and manifest anxiety. Self-report inventories are especially subject to faking and social desirability. Despite introductory statements to the contrary, most items on such inventories have one answer that is recognizable as socially more desirable or acceptable than the others. The tendency to choose socially desirable responses on a self-report inventory need not indicate deliberate deception on the part of the respondent. Whatever the cause of the relation between the social desirability variable to personality test responses, the effectiveness of the

test in discriminating individual differences in specific, content-related traits is reduced.

The sample. Because of the small sample and local nature of the project, it is difficult to generalize the results obtained by this research to other populations of counselor-trainees.

The Practicum. Even though all counselor-trainees were exposed to the same structured counseling experiences it cannot be assumed that all practica are similar. But a conscious attempt was taken to equalize the counseling analogue experiences. There were four supervisors in the Practicum Staff. Two supervisors were doctoral candidates. The other two had their doctorates in guidance and counseling with several years of professional practice. In general, all experiences were similar whether it was role-playing, video taping, listening exercises, counseling interviews, or the listening to professional counseling tapes.

### Organization of the Study

Chapter I has presented an introduction to the study, the background of the problem and its importance, the purpose of the research, a statement of the problem, hypotheses, definitions of

terms, assumptions, procedure, limitations, and a delineation of the study.

Chapter II is a review of the relevant literature related to the study. The review is organized under two main categories. A general review of the literature relating to counselor's characteristics and a review of the literature pertaining to counselor's self-disclosure and counselor's anxiety.

Chapter III is a description of the design of the experiment, including a rationale and a description of the population used in the research, instruments used and procedures followed in obtaining rating and evaluating the data, and, finally, the methodology used in testing results for statistical significance.

Chapter IV is a presentation of the findings of the study. The results are presented and discussed.

Chapter V includes a summarization of the study, conclusions, limitations, and a presentation of recommendations for future research.

## CHAPTER II

### REVIEW OF RELATED COUNSELING LITERATURE

The areas of theory and research related to the specific purpose of this study will be reviewed here. They are as follows: ( 1 ) theory and research related to counselor characteristics for facilitative functioning and ( 2 ) theory and research related to self-disclosure and anxiety as high order traits in relation to effective interpersonal communication.

#### Counselor Characteristics

The importance of the counselor's characteristics to counseling outcome has long been recognized. A continuously increasing number of studies on counseling and psychotherapy are investigating the complex nature of counselor-client relationships. Two basic interrelated questions raised in those studies appear to be: what can counselors do to increase successful therapy outcomes and what are the critical "necessary and sufficient" characteristics a counselor must possess or promote in himself to effect facilitative functioning.

According to Shertzer and Stone<sup>28</sup> research on counselor characteristics has been approached in four ways: speculation, identifying effective and ineffective counselors, hypothesizing counselor characteristics, and using correlational analysis methods.

The work of some writers in the early days of counseling was to draw up lists of counselors traits (Karraker<sup>29</sup>), or to present opinions on the characteristics of the ideal counselor (Cox<sup>30</sup>, Patterson<sup>31</sup>, APGA<sup>32</sup>). The National Vocational Guidance Association<sup>33</sup> issued a statement that counselors, ideally, were interested in people, patient, sensitive to others, emotionable, stable, objective, respectful of facts, and trusted by others.

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<sup>28</sup> B.S. Shertzer and S.C. Stone, Fundamentals of Counseling (Boston: Houghton, Mifflin, Co., 1968).

<sup>29</sup> W.J. Karraker, "Desirable Counselor Attitudes," Occupations, XXIX (1951), 605.

<sup>30</sup> R.D. Cox, Counselors and Theirs Work (Harrisburg: Archives Press, 1945).

<sup>31</sup> C.H. Patterson, Characteristics of Vocational Rehabilitation Counselor Trainees (Urbana, Ill.: College of Education, University of Illinois Press, 1960).

<sup>32</sup> American Personnel Guidance Association, "A Statement of Policy," Personnel Guidance Journal, XL (1961), 402-407.

<sup>33</sup> National Vocational Guidance Association, Counselor Preparation (Washington: The Association, 1949).

Problems of selection and training have stimulated much research to determine the necessary or desirable characteristics of counselors (Burnett<sup>34</sup>, Santavica<sup>35</sup>, Rishell<sup>36</sup>, Stefflre, King and Leafgren<sup>37</sup>, Thewatt<sup>38</sup>, Carkhuff<sup>39</sup>, <sup>40</sup>, Pierce, Carkhuff, and Berenson<sup>41</sup>).

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<sup>34</sup> C.W. Burnett, "Selection and Training of School and College Personnel Workers," Review of Educational Research, XXIV (1954), 121-133.

<sup>35</sup> G.G. Santavica, "Supervised Experience and Selection of Counselor Trainees," Personnel Guidance Journal, XXXVIII (1959), 195-197.

<sup>36</sup> D.F. Rishell, "Selecting Counselors," in Counselor Selection, Education and Supervision, ed. by Arthur M. Wellington (Pennsylvania: State College, Counselor Education Press, 1962).

<sup>37</sup> B. Stefflre, P. King, and F. Leafgren, "Characteristics of Counselors Judged Effective by Their Peers," Journal of Counseling Psychology, XI (1962), 335-340.

<sup>38</sup> R.C. Thewatt, "Development of Counselor Trainee Self-Insight: Evaluation in Effectiveness of Self-Selection," Counselor Education and Supervision, II (1963), 78-81.

<sup>39</sup> R.R. Carkhuff, "Training in the Counseling and Therapeutic Practices: Requiem or Reveille?," Journal of Counseling Psychology, XIII (1966), 360-367.

<sup>40</sup> R.R. Carkhuff, "Critical Variables in Effective Counselor Training," Journal of Counseling Psychology, XVI (1969), 238-245.

<sup>41</sup> R. Pierce, R.R. Carkhuff, and B.G. Berenson, "The Differential Effects of High and Low Functioning Counselors upon Counselors-in-Training," Journal of Clinical Psychology, XXIII (1967), 212-215.

Brams<sup>42</sup> investigated the relationship between the personal characteristics of counselor trainees and effective communication in counseling. The result of Brams' study indicated that effective communication in counseling is related to the trainee's degree of tolerance for ambiguity.

Abeles<sup>43</sup> found by means of the Allport-Vernon-Lindsey Study of Values, the MMPI, the Guilford Inventory of Factors, STDCR, the Guilford-Martin Inventory of Factors, GAMIN, and the Guilford-Martin Personnel Inventory that religious values, love for people, and importance of the search for truth were generally valued highly by the trainees. Also, test scores indicated that male trainees' interests, values, and attitudes were more feminine than the general population.

Giblette<sup>44</sup> found six characteristics differentiated counselors

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<sup>42</sup> J. M. Brams, "Counselor Characteristics and Effective Communication in Counseling," Journal of Counseling Psychology, VIII (1961), 25-30.

<sup>43</sup> N. Abeles, "A Study of the Characteristics of Counselor Trainees." (Unpublished doctoral dissertation, University of Texas, (1958).

<sup>44</sup> J. F. Giblette, "Differences Among Above, Average, and Below Average Secondary School Counselors," Dissertation Abstracts, XXI (1960), 812-813.



from other professional workers at the .01 level of significance. These characteristics were: general empathy, the traits of vigorous, emotional stability, and reflective thinking, measured by means of the Thurstone Temperamental Schedule, practical judgment, and knowledge of counseling practice.

O'Hearn and Arbuckle<sup>45</sup> attempted to develop an instrument that would measure the degree of sensitivity possessed by potential counselors. They attempted to determine the effects of a number of variables, e.g., sex, age, education, experience, intelligence and grades, on the measured degree of sensitivity. They found that scores on the scale were not related to the factors mentioned above. Nevertheless, the final sensitivity scale developed by the researchers seemed to have some predictive value in that most potential counselors who were judged most effective in counseling practice, scored significantly higher on sensitivity than those judged least effective.

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<sup>45</sup> J.S. O'Hern and D.S. Arbuckle, "Sensitivity: A Measurable Concept?," Personnel Guidance Journal, XLII (1964), 572-576.

Russo, Kelz, and Hudson<sup>46</sup> conducted a research on counselor openmindedness. They found that the high positive correlation of expert judge rating of counselors obtained using coached clients and a rating scale with an openmindedness measure secured a year and a half later, appeared to lend support to the statement that openmindedness is an important counselor quality.

Tosi<sup>47</sup> indicated that several research studies have singled out dogmatism as a trait for study and related it to judge facilitative functioning of counselor trainees.

Kemp<sup>48, 49</sup>, Stefflre, King and Leafgren<sup>50</sup>, Cahoon<sup>51</sup>,

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<sup>46</sup> J.R. Russo, J.W. Kelz, and G.R. Hudson, "Are Good Counselors Open-Minded?," Counselor Education and Supervision, III (1964), 74-77.

<sup>47</sup> D.J. Tosi, "Dogmatism Within the Counselor-Client Dyad," Journal of Counseling Psychology, XVII (1970), 284-288.

<sup>48</sup> C.G. Kemp, "Influence of Dogmatism on Counseling," Personnel and Guidance Journal, XXXIX (1961), 662-665.

<sup>49</sup> C.G. Kemp, "Influence of Dogmatism on the Training of Counselors," Journal of Counseling Psychology, IX (1962), 155-157.

<sup>50</sup> B. Stefflre, P. King, and F. Leafgren, "Characteristics of Counselors Judged Effective by Their Peers," Journal of Counseling Psychology, IX (1962), 335-340.

<sup>51</sup> R.A. Cahoon, "Some Counselor Attitudes and Characteristics Related to the Counseling Relationship," Dissertation Abstracts, XXIII (1963), 3472-3473.

Russo, Kelz and Hudson<sup>52</sup>, Milliken and Patterson<sup>53</sup>, found a high positive correlation between expert judge rating of counseling students and the Rokeach Dogmatism Scale. They found the better counselors to be less dogmatic. They concluded that openmindedness is an important counselor quality.

Kemp<sup>54</sup> stated that those who are highly dogmatic do not approach a new experience openly; they are defensive, insecure, and more threatened. They are inclined to ignore, rationalize, project, distort, or narrow in their attempts to deal with new experiences.

In a later study Kemp<sup>55</sup> found that counselor trainees

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<sup>52</sup> J.R. Russo, J.W. Kelz, and G.R. Hudson, op. cit.

<sup>53</sup> R.L. Milliken and J.J. Patterson, "Relationships of Dogmatism and Prejudice to Counseling Effectiveness, "Counselor Education and Supervision, VI (1967), 125-129.

<sup>54</sup> C.G. Kemp, "Influence of Dogmatism on Counseling," pp. 662-665.

<sup>55</sup> C.G. Kemp, "Influence of Dogmatism on the Training of Counselors," pp. 155-157.

who were high in dogmatism and closed belief systems had fewer understanding and supportive responses than those with an open belief system. The close-minded, who were less in contact with their visceral and sensory stimuli, who to varying degrees narrowed or distorted meanings in relation to their early beliefs and/or authority figures, were more inclined to perform poorly when counseling.

Patterson<sup>56</sup> found that students in the later stages of counselor education scored higher on the CPI scales of Sociability, Social Presence, Tolerance, Intellectual Efficiency, and Flexibility and lower on the Dogmatism and Opinionation scales.

The general rationale in research studies on dogmatism seems to be that the more flexible individual can dip into and attune himself to personal feelings and thereby become more responsive to the nuances of feelings expressed by a client.

The difference in the approach to experience between the open- and closed-minded thinker leads to the assumption

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<sup>56</sup> C.H. Patterson, "Effects of Counselor Education on Personality," Journal of Counseling Psychology, XIV (1967), 444-448.

that in situations requiring transfer of learning, the making of inferences, and the analysis and evaluation of ideas the highly dogmatic individual would be less likely to function as a facilitative counselor (Vacchiano, Straus, and Hochman<sup>57</sup>).

The literature reviewed above presents a trait-factor approach in assessing counselor facilitative functioning traits. The trait theory suggests that on the basis of measurable differences among traits, or characteristics, it is possible to predict performances or behavior. However, some have felt that the trait-factor approach has been generally inconclusive in assessing counselor characteristics. According to Havens<sup>58</sup>, it has been obsolete in identifying effective counselors or prospective counselors.

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<sup>57</sup> R.B. Vacchiano, P.S. Straus, and L. Hochman, "The Open and Closed Mind: A Review of Dogmatism," Psychological Bulletin, LXXI (1969), 261-273.

<sup>58</sup> R.I. Havens, "An Exploratory Search for Characteristic Patterns of High Performance Rated and Low Performance Rated Counselor Candidates in a Counseling Practicum." (Unpublished doctoral dissertation, University of Michigan, (1966).

Allen<sup>59</sup> suggested a study of counselor high-order variables drawn from a theoretical understanding of the demands posed by the helping relationship; from the identification of the components of counseling effectiveness; and, from the factors involved in the personal composition of ineffective counselors. In other words, it is suggested that there are combinations of characteristics or traits which when taken together will discriminate among criterion groups (Whiteley, Sprinthall, Mosher, and Donaghy<sup>60</sup>). This approach has been called pattern analysis (Gaier and Lee<sup>61</sup>, Allport<sup>62</sup>).

The following studies are related to counselor high-order variables, or the pattern analysis approach in the helping relationship.

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<sup>59</sup> T.W. Allen, "Effectiveness of Counselor Trainees as a function of Psychological Openness," Journal of Counseling Psychology, XIV (1967) 35-40.

<sup>60</sup> J.M. Whiteley, N.A. Sprinthall, R.L. Mosher, and R.T. Donaghy, "Selection and Evaluation of Counselor Effectiveness," Journal of Counseling Psychology, XIV (1967), 226-239.

<sup>61</sup> E.L. Gaier and M.C. Lee, "Pattern Analysis: The Configured Approach to Predicted Measurement," Psychological Bulletin, L (1953), 140-148.

<sup>62</sup> G. Allport, "Traits Revised," American Psychologist, XXI (1966), 1-10.

After reviewing research studies on the nature of the helping professions, Combs and Soper<sup>63</sup> suggested that the crucial question in regard to the counselor is not his use of a given type of behavior technique or way of helping. Rather they believe facilitative functioning to be dependent upon the nature of the counselor's attitudes and ways of perceiving himself, his tasks, his client, and his purpose.

Rogers<sup>64</sup> has listed three counselor conditions he believes necessary and sufficient to counseling in counselors and increase prospects for therapeutic success: ( 1 ) congruency-genuineness, ( 2 ) positive regard, and ( 3 ) empathy.

A considerable amount of research studies (Halkides<sup>65</sup>,

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<sup>63</sup> A.W. Combs and D.W. Soper, "The Perceptual Organization of Effective Counselors," Journal of Counseling Psychology, X (1963), 222-226.

<sup>64</sup> C.R. Rogers, "The Necessary and Sufficient Conditions of Therapeutic Personality Change," Journal of Consulting Psychology, XXI (1957), 95-103.

<sup>65</sup> G. Halkides, "An Experimental Study of Four Conditions Necessary for Therapeutic Change," (Unpublished doctoral dissertation, 1958, cited by C.R. Rogers) Psychological Abstracts, No. 157, 1966-1967.

Barrett-Lennard<sup>66</sup>, Demos<sup>67</sup>, Rogers<sup>68</sup>, VanderVeen<sup>69</sup>, Traux, Wargo, Frank, Imber, Battle, Hoenh-Saric, Nach, and Stone<sup>70</sup>,

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<sup>66</sup> G.T. Barrett-Lennard, "Dimensions of Therapist Response as a Causal Factor in Therapeutic Change," Psychological Monographs, LXXVI (1962), Whole No. 562.

<sup>67</sup> G.D. Demos, "The Application of Certain Principles of Client-Centered Therapy to Short-Term Vocational-Educational Counseling," Journal of Counseling Psychology, XI (1964), 280-281.

<sup>68</sup> C.R. Rogers, "The Therapeutic Relationship: Recent Theory and Research," Australian Journal of Psychology, XVII (1965), 95-108.

<sup>69</sup> F. VanderVeen, "Effects of Therapist and the Patient on Each Other's Therapeutic Behavior," Journal of Counseling Psychology, XXIX (1965), 19-26.

<sup>70</sup> C.B. Traux, D.B. Wargo, J.D. Frank, S.D. Imber, C.C. Battle, R. Hoenh-Saric, E.H. Nash, and A.R. Stone, "The Therapist's Contribution to Accurate Empathy, Non-Possessive Warmth and Genuineness in Psychotherapy," Journal of Clinical Psychology, XXI (1966), 331-334.



Vitalo<sup>71</sup>, Johnson<sup>72</sup>, Mullen and Abeles<sup>73</sup>, Scott and Kemp<sup>74</sup>) have attempted to determine the simultaneous presence of all three of Rogers' conditions and their effects on (a) therapeutic change, (b) case success, and (c) explorations of client feeling.

Whiteley, Sprinthall, Mosher, and Donaghy<sup>75</sup> investigated cognitive flexibility as a high-order dimension of counselor effectiveness. The subjects were selected from a class of beginning candidates for the degree of Master of Education in Guidance

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<sup>71</sup> R.L. Vitalo, "Effects of Facilitative Interpersonal Functioning in a Conditioning Paradigm," Journal of Counseling Psychology, XVII (1967), 141-144.

<sup>72</sup> C.W. Johnson, "Effects of Warmth of Interaction, Accuracy of Understanding, and the Proposal of Compromises on Listener's Behavior," Journal of Counseling Psychology, XVIII (1971), 207-216.

<sup>73</sup> J. Mullen and N. Abeles, "Relationship of Liking, Empathy, and Therapist's Experience to Outcome of Therapy," Journal of Counseling Psychology, XVIII (1971), 39-43.

<sup>74</sup> R.W. Scott and D.E. Kemp, "The A-B Scale and Empathy, Warmth, Genuineness, and Depth of Self-Exploration," Journal of Abnormal Psychology, LXXVII (1971), 49-51.

<sup>75</sup> J.M. Whiteley, N.A. Sprinthall, R.L. Mosher, and R.T. Donaghy, op. cit.

at Harvard University. Cognitive flexibility was defined as an ability or capacity to think and act simultaneously and appropriately in a given situation. It refers to dimensions of openmindedness, adaptability, and resistance to premature closure in perception and cognition. Rigidity assumes the opposite, an intolerance of ambiguity or an excessive need for structure, a difficulty in adaptation, especially to ambiguous situations.

The researchers hypothesized that the flexible counselor will respond easily to both the content of what the client says and his feelings. He will answer questions if necessary and yet will keep the counseling dialogue open for additional exploration by the client. The authors pointed out that flexibility would simple be a general avoidance of either excessive structuring in the counseling situation, or the complete ambiguity of nondirection. They defined cognitive flexibility as the ability to listen, to respond to the client's view of the world. Cognitive flexibility requires that the counselor operate from an open-ended cognitive system within himself.

Flexibility in counseling behavior was predicted from the; Rorschach, T.A.T., Personal Differentiation Test, case studies

depicting critical counseling situations, and a simulated counseling case. The major finding of the study was that cognitive flexibility rigidity, as predicted on the bases of projective tests, correlated 0.78 with supervisors' ratings on the same dimensions. The second major finding of the study was that the critical incident case episodes correlated 0.73 with supervisors' ratings of counselor behavior.

For a number of years Truax<sup>76</sup>, Carkhuff and Berenson<sup>77</sup>, Truax and Carkhuff<sup>78</sup>, have been systematically and extensively gathering evidence attesting to the crucial importance of empathy, positive regard, genuineness, and concreteness in the therapeutic relationship. Carkhuff<sup>79</sup>, <sup>80</sup> after extensive research, has found

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<sup>76</sup> C.B. Truax, "Effective Ingredients in Psychotherapy: An Approach to Unraveling the Patient-Therapist Interaction," Journal of Counseling Psychology, X (1963), 256-263.

<sup>77</sup> R.R. Carkhuff and B.G. Berenson, Beyond Counseling and Therapy (New York: Holt, Rinehart and Wiston, Inc., 1967).

<sup>78</sup> C.H. Truax and R.R. Carkhuff, Toward Effective Counseling and Psychotherapy (Chicago: Aldine Publishing Co., 1967).

<sup>79</sup> R.R. Carkhuff, "Differential Functioning of Lay and Professional Helpers," Journal of Counseling Psychology, XV (1968), 117-126.

<sup>80</sup> R.R. Carkhuff, "Critical Variables in Effective Counselor Training," Journal of Counseling Psychology, XVI (1969), 238-245.

certain features in the personality of successful lay counselors. The treatments which they offer appear to have the following distinctive advantages when compared to their professional counterparts: (a) the increased ability to enter the milieu of the distressed, (b) the ability to take an active part in the client's total life situation, (c) the ability to provide clients with a more effective transition to more effective levels of functioning within the social system.

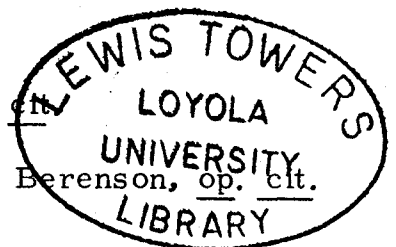
Truax and Carkhuff<sup>81</sup> have accumulated an impressive body of data that indicates the importance of five facilitative conditions to counseling outcomes. These are concreteness, non possessive warmth, accurate empathy, genuineness, and degree of intensity-intimacy. The presence of high levels of these conditions seems closely related to counselee growth and low levels of these conditions can be related to no growth or regression.

Pierce, Carkhuff, and Berenson<sup>82</sup> declared that there

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<sup>81</sup> C.H. Truax and R.R. Carkhuff, op. cit.

<sup>82</sup> R. Pierce, R.R. Carkhuff, and B.G. Berenson, op. cit.



exists extensive evidence establishing the relationship between the facilitative conditions of counselor empathy, respect, genuineness, concreteness, and self-disclosure and indices of successful counseling for constructive client change. In other words, it is possible to predict movement toward the level at which their counselors are functioning (Carkhuff<sup>83</sup>, Alexik and Carkhuff<sup>84</sup>, Kratochvil, Aspy, and Carkhuff<sup>85</sup>).

Tyler<sup>86</sup> pointed out that the counselor's ability for establishing a sound counseling relationship is the most tangible element of the therapeutic change.

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<sup>83</sup> R.R. Carkhuff, The Counselor's Contribution to Facilitative Process (Urbana, Illinois: Parkinson, 1966).

<sup>84</sup> M. Alexik and R.R. Carkhuff, "The Effects of the Manipulation of Client Depth of Self-Exploration upon High and Low Functioning Counselors," Journal of Clinical Psychology, XXIII (1967), 210-212.

<sup>85</sup> D. Kratochvil, D. Aspy, and R.R. Carkhuff, "The Differential Effects of Absolute Level and Direction of Growth in Counselor Functioning upon Client Level of Functioning," Journal of Clinical Psychology, XXIII (1967), 216-217.

<sup>86</sup> L.F. Tyler, The Work of the Counselor (New York: Appleton-Century-Crofts, Inc., 1969).

Jourard<sup>87</sup> sees authenticity as the high-order variable for lay and professional people of the helping profession and defines the authentic being in these terms,

Authentic being means being oneself, honestly, in one's relations with his fellows. It means taking the first step at dropping pretense, defense, and duplicity. It means an end to 'playing it cool,' and end to using one's behavior as a gambit designed to disarm the other fellow, to get him reveal himself before you disclose yourself to him. (p. 133).

### Particular Traits

#### Counselor Self-Disclosure

It has been argued that self-disclosure is intimately associated with human growth and adjustment. Mowrer<sup>88</sup> sees concealment of failures, both from ourselves and from others, as a pathogenic self-deception. He sees this refusal to manifest one's misbehavior to significant others in one's life as a break with reality, and breaking with reality often leads to emotional disorders.

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<sup>87</sup> S.M. Jourard, The Transparent Self (New York: Van Nostrand Reinhold Company, 1971), p. 133.

<sup>88</sup> O.H. Mowrer, "Loss and Recovery of Community: A Guide to the Theory and Practice of Integrity Therapy," in Theories and Methods of Group Psychotherapy and Counseling, ed. by G.M. Gazda (Springfield, Ill.: Charles C. Thomas, 1967).

Jourard<sup>89, 90, 91</sup> has been investigating the implications of concealment and self-disclosure in a wider and more positive context than Mowrer's. Jourard<sup>92</sup> defines self-disclosure as "the act of making yourself manifest, showing yourself so others can perceive you." He backs up Mowrer's idea that concealment is pathological. Moreover, he thinks of concealment as a danger for self-identity, a source of emotional stress, loneliness and depression, and ingredient of mental rigidity, and physical stiffness.

Egan<sup>93</sup> also discusses self-disclosure as a kind of behavior not easily acquired and displayed. He delineates a

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<sup>89</sup> S.M. Jourard, Disclosing Man to Himself, (New York: Van Nostrand Reinhold Company, 1968).

<sup>90</sup> S.M. Jourard, The Transparent Self.

<sup>91</sup> S.M. Jourard, An Experimental Analysis of The Transparent Self (New York: John Wiley and Sons, Inc., 1971)

<sup>92</sup> S.M. Jourard, The Transparent Self, p. 19.

<sup>93</sup> G. Egan, Encounter: Group Process for Interpersonal Growth (Belmont, California: Brooks/Cole Publishing Company, 1970), pp. 207-234.

variety of "sources of resistance" to self-revelation and their effects. These sources are: (1) the flight from self-knowledge, (2) fear of intimacy, (3) flight from responsibility, and finally (4), the "reverse halo effect."

According to Egan, self-disclosure, as a true, genuine and healing story, is the kind of self-revelation that counselors need for facilitative functioning. This self-revelation appears to be one of the effective counselor's high-order traits (Halverson and Shore<sup>94</sup>).

Bennett<sup>95</sup> points out the need for self-disclosure or revelation on the part of every person who functions as a

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<sup>93</sup> G. Egan, Encounter: Group Process for Interpersonal Growth (Belmont, California: Brooks/Cole Publishing Company, 1970), pp. 207-234.

<sup>94</sup> C.F. Halverson and R.E. Shore, "Self-Disclosure and Interpersonal Functioning," Journal of Consulting and Clinical Psychology, XXXIII (1969), 213-217.

<sup>95</sup> C.C. Bennett, "What Price Privacy?," American Psychologist, XXII (1967), 371-376.



counselor. He says,

Anyone who undertakes to influence the lives of other people must accept an obligation to let them know where he stands, to reveal his motives, to share his purposes. The attorney owes this to his client, the teacher to his students, the parent to his child, the statesman to his public. An honest mind should be an open window. (p. 371).

Mowrer<sup>96</sup>, Jourard<sup>97</sup>, and Luft<sup>98</sup> affirm that self-revelation per se is not necessarily a mark of soundness in a person nor an indication of depth in relationship. They say that the key issue is appropriateness in self disclosure, the balance of spontaneity and discretion reflecting the nature of the relationship. But a question remains, when is self-disclosure appropriate? Luft<sup>99</sup> cited ten conditions for "appropriate self-revelation": (1) when it is a function of the ongoing relationship, (2) when it occurs reciprocally, (3) when it is timed to fit what is happening,

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<sup>96</sup> O.H. Mowrer, op. cit.

<sup>97</sup> S.M. Jourard, The Transparent Self.

<sup>98</sup> L. Luft, Of Human Interaction (Palo Alto, California: National Press Books, 1969).

<sup>99</sup> J. Luft, op. cit.

(4) when it concerns what is going on within and between persons in the present (5) when it moves by relatively small increments, (6) when it is confirmable by the other person (7) when account is taken of the effect disclosure has on the other person (8) when it creates a reasonable risk, (9) when it is speeded up in a crisis (10) finally when the context is mutually shared.

The simple disclosure of feelings does not necessarily show one's genuineness or congruency, says Rogers, feelings must be appropriately disclosed. By appropriateness Rogers<sup>100</sup> means that the feelings and reactions disclosed in the context of a helping relationship are to be relevant to what is transpiring in the relationship and what the helpee is experiencing at the moment. Finally, the style of a counselor's disclosure should communicate ownership of the disclosure, in other words, the counselor should not imply that the feelings, reactions and perceptions revealed are facts about the counselee but that they are his own.

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<sup>100</sup> C.R. Rogers, "The Interpersonal Relationship: The Core of Guidance", Harvard Educational Review, XXXII (1962), 416-429.

Egan<sup>101</sup> affirms that self-disclosure is not just useless when inappropriate but it is even dangerous if: (a) it is exhibitionism - a way of merely using the listener to satisfy his own distorted needs, (b) the revealing person receives no support for his openness, which is usually interpreted as rejection, (c) a person engages in self-revelation and then reneges, (d) self-disclosure is incomplete in a situation that calls for complete openness.

Jourard's self disclosure thesis points out that people can only become less alienated by disclosing themselves to each other. Self-concealment is viewed by Jourard as both a symptom and a cause of unhealthy personality adjustment.

Jourard<sup>102, 103</sup> has undertaken a research approach to self-disclosure by using a questionnaire measure. This

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<sup>101</sup>G. Egan, op. cit.

<sup>102</sup> S.M. Jourard, The Transparent Self, pp. 211-227.

<sup>103</sup> S.M. Jourard, An Experimental Analysis of the Transparent Self.

measure, the Self-Disclosure Questionnaire, has been employed in a number of published investigations by Jourard and his colleagues.

Jourard and Lasakow<sup>104</sup> were concerned with the study of the various patterns of self-disclosure. They devised questionnaire items according to six general categories of information about the self, e.g., attitudes, opinions, tastes and interests, work, studies, money, personality, body. Subjects were asked to indicate on a four point scale, to what extent they had revealed self-information to five target persons (viz., mother, father, male friend, female friend, and spouse). As expected they found that the amount of self-disclosure varied with the category of information as well as with target person. Single males and females showed the highest self-disclosure to mother, with less amounts to father, male friend and female friend. Also, two clusters of aspects emerged; a high disclosure cluster for attitudes and opinions, tastes and interests,

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<sup>104</sup> S.M. Jourard and P. Lasakow, "Some Factors in Self-Disclosure," Journal of Abnormal and Social Psychology, LVI (1958), 91-98.

and work: and a low disclosure cluster which included money, personality, and body. These findings suggest that self-disclosure is arranged along a personal-impersonal continuum.

Moreover, the type and amount of self-disclosure suggested a "cultural consensus" of what should or should not be readily disclosable. Some of the findings related to this cultural consensus factor indicated that white subjects were higher in self-disclosure than negroes, females were higher in self-disclosure than males in most samples, and married subjects revealed more to spouse and less to other target persons than unmarried subjects. American subjects scored higher on self-disclosure than subjects from Puerto Rico and England, and Jewish males were higher in self-disclosure than male subjects of other religious denominations (Jourard<sup>105</sup>).

Several studies appeared in the literature which investigated the relationship between self-disclosure and healthy personality. Jourard<sup>106</sup> summarized some of the

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<sup>105</sup> S.M. Jourard, An Experimental Analysis of The Transparent Self. pp. 53-54.

<sup>106</sup> S.M. Jourard, The Transparent Self. pp. 25-33.

earlier results in this area. One of the findings which he reports is that persons with abnormal MMPI Profiles showed lower disclosure levels, particularly to their parents, than subjects with normal profiles. Mullaney<sup>107</sup> using college males as subjects, found that low disclosers were significantly higher on the Social Introversion scale (Si) on the MMPI but that there were not other significant differences on the other MMPI scales. Jourard<sup>108</sup> found that, among student nurses, high self-disclosure scores were related to a high ability to communicate and relate to patients.

A final factor in self-disclosure which is pertinent to this study is what Jourard terms the "dyadic effect" in disclosing. Jourard and Landsman<sup>109</sup>, Jourard and Richman<sup>110</sup>,

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<sup>107</sup> A.J. Mullaney, "Relationships Among Self-Disclosure Behavior, Personality, and Family Interaction," Dissertation Abstracts, XXIV (1964), 4290.

<sup>108</sup> S.M. Jourard, The Transparent Self, pp. 179-188.

<sup>109</sup> S.M. Jourard and M.J. Landsman, "Cognition, Cathexis, and the Dyadic Effect in Men's Self-Disclosure Behavior," Merril-Palmer Quarterly of Behavior and Development, VI (1960), 178-186.

<sup>110</sup> S.M. Jourard and P. Richman, "Disclosure Output and Input in College Students," Merril-Palmer Quarterly of Behavior and Development, IX (1963), 141-148.

Jourard<sup>111, 112</sup>, Jourard and Jaffe<sup>113</sup>, and Persons and Marks<sup>114</sup> all found that there is a positive relationship between disclosure input and disclosure output. That is, self-disclosure to a person tends to beget disclosure from that person in return.

As a result of the preceding review of the various research studies on self-disclosure it appears reasonable, as Jourard has suggested, to conclude that self-disclosure is a personality high-order trait and self-disclosure would contribute to the effective facilitative functioning of the counselor in the therapeutic encounter.

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<sup>111</sup> S.M. Jourard, Disclosing Man to Himself.

<sup>112</sup> S.M. Jourard, The Transparent Self.

<sup>113</sup> S.M. Jourard and P.E. Jaffe, "Influence of an Interviewer's Disclosure on the Self-Disclosing Behavior of Interviewees, Journal of Counseling Psychology, XVII (1970), 252-257.

<sup>114</sup> R.W. Persons and P.A. Marks, "Self-Disclosure with Recidivists: Optimum Interviewer-Interviewee Matching," Journal of Abnormal Psychology, LXXVI (1970), 387-391.

In Rogers' theory of the necessary and sufficient conditions for therapeutic change (Rogers<sup>115</sup>) the importance of counselor self-disclosure is discussed under the heading of therapist "congruence-genuineness."

Rogers suggested that the more genuine and congruent a counselor is in relating to his client the greater the chances of personal growth and personality change in that counselee. According to Rogers there are two focal aspects to being congruent and genuine. One is awareness of the complex of feelings flowing in oneself, in other words, functioning at a high level of "self-experiencing." The second, is being able to live these feelings in the counseling relationship, not covering them up or hiding them. Rogers pointed that the counselor's verbal communication of his feelings is a very crucial aspect of his living his feelings in the counseling friendship.

Rogers<sup>116</sup> maintains that the style of counselor's

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<sup>115</sup> C.R. Rogers, On Becoming a Person (Boston: Houghton-Mifflin, Co., 1961), pp. 339-342.

<sup>116</sup> C.R. Rogers, "The Interpersonal Relationship: The Core of Guidance," Harvard Educational Review, XXXII (1962), 416-429.



disclosure, its appropriateness, and the counselor's degree of openness to his full range of feelings at the time are all crucial to the therapeutic value of the self-disclosure.

Much research has cited "congruence-genuineness" as a single element of critical importance in its effects on the dependent variables of successful outcomes and constructive counselee change (Barrett-Lennard<sup>117</sup>, Demos<sup>118</sup>, Rogers<sup>119</sup>, Truax and Carkhuff<sup>120</sup>.) Within the cited research the related concepts of "transparency" (Truax and Carkhuff<sup>121</sup>) and "psychological openness" (Allen<sup>122</sup>) have been operationally defined and studied.

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<sup>117</sup> G. Barrett-Lennard, "Dimensions of Therapist Response as a Causal Factor in Therapeutic Change" Psychological Monographs, LXXVI (1962), Whole No. 562.

<sup>118</sup> G.D. Demos, op. cit.

<sup>119</sup> C.R. Rogers, "The Necessary and Sufficient Conditions of Therapeutic Change," pp. 95-103.

<sup>120</sup> C.B. Truax and R.R. Carkhuff, "Client and Therapist Transparency in the Psychotherapeutic Encounter," Journal of Counseling Psychology, XXII (1965), 3-9.

<sup>121</sup> Ibid.

<sup>122</sup> T.W. Allen, op. cit.

From the research cited it seems clear to affirm that the concepts of congruence, genuineness, transparency, authenticity, and psychological openness are related to the phenomenon in which the counselor's meaning, intentions, and feelings are revealed to the client, in essence, a phenomenon in which counselor self-disclosure occurs (Kell and Mueller<sup>123</sup>).

Truax and Carkhuff<sup>124</sup> assumed that the Rogerian necessary and sufficient elements (congruency, positive regard, and empathy) to effect facilitative functioning, genuineness or congruency is perhaps the basic element for empathy and positive regard. In order to test their assumption the authors conducted a series of clinical investigations with therapy cases involving hospitalized mentally ill subjects and institutionalized juvenile delinquents. They examined two major hypotheses: (1) the greater the degree of transparency, self-disclosure, or self-exploration within the client during the therapeutic encounter,

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<sup>123</sup> B.L. Kell and W.J. Mueller, Impact and Change: A Study of Counseling Relationships (New York: Appleton-Century-Crofts, 1966).

<sup>124</sup> C.B. Truax and R.R. Carkhuff, "Client and Therapist Transparency in the Psychotherapeutic Encounter," p. 3-9.

the greater will be the evidence of constructive personality change in the client; and (2) an increase in the degree of therapist transparency or self-congruence will be related to an increase in the degree of transparency, self-disclosure or self-exploration within the client.

Truax and Carkhuff's research<sup>125</sup> showed a significant relationship between therapist transparency and client's level of self-disclosure. The second major hypothesis was confirmed for hospitalized neurotic psychiatric subjects; the greater the degree of therapist transparency during the therapeutic encounter, the greater the constructive change in clients. However, with delinquent subjects, the researchers found that the less the therapist self-disclosure, transparency, or self-exploration, the greater the positive personality change. The authors pointed out that their findings may suggest that the effectiveness of therapist self-disclosure may be contingent on whether the illness is mental or social, or whether the disturbance is internal or external.

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<sup>125</sup> C.B. Truax and R.R. Carkhuff, "Client and Therapist Transparency in the Psychotherapeutic Encounter," pp. 5-9.

Mills and Zytowski<sup>126</sup> have questioned the assumption that increased amounts of counselor self-disclosure measured in a therapeutic relationship would effect improvement in counselor-counselee relationships and ultimate therapy outcome. They suggested that there may be counselor response contingencies for the various beneficial characteristics of a helping relationship. In other words, there may be times and circumstances where the absence of therapist self-disclosure might strengthen the ultimate therapy relationship and results.

### Counselor Anxiety

In his earliest formulation, Freud considered anxiety to be the outcome of repressed somatic sexual tensions. He believed that libidinal images that were perceived as dangerous were repressed; and that the libidinal energy was cut off from normal expression and transformed into anxiety. He later replaced this notion with the much broader conception of anxiety as a signal for danger; distinguishing now between objective anxiety

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<sup>126</sup> D.H. Mills and D.B. Zytowski, "Helping Relationships: A Structural Analysis," Journal of Counseling Psychology, XIV (1967), 193-196.

(fear) and neurotic anxiety, depending on whether the danger came from the outside world or from internal impulses (Freud<sup>127</sup>). Freud's followers in the course of the years proposed many modifications of his views. For example, Horney<sup>128</sup> suggested that anxiety's origin was social; that is it was the result of the child's experience of vulnerability to an alien, hostile world; in Adler's formulation (Adler<sup>129</sup>), anxiety was the consequence of the individual's sense of inadequacy and inferiority. Sullivan<sup>130</sup> proposed that the source of anxiety is the interpersonal experiences which threaten the self-system. Existential theory holds that anxiety

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<sup>127</sup> S. Freud, The Problem of Anxiety (New York: Psychoanalytic Quarterly Press, 1936).

<sup>128</sup> K. Horney, The Neurotic Personality of Our Time (New York: W.W. Norton and Co., 1937).

<sup>129</sup> A. Adler, The Practice and Theory of Individual Psychology (London: Routledge and Kegan Paul, 1929).

<sup>130</sup> H.S. Sullivan, The Interpersonal Theory of Psychiatry, edited by Helen Swich Perry and Mary Ladd Gawel (New York: W.W. Norton, 1953).

represents consciousness of the brevity and meaninglessness of human life (Frankl<sup>131</sup>).

May<sup>132</sup> and a host of other psychologists and analysts have concerned themselves with anxiety as a prominent and significant characteristic in individual behavior. May characterized anxiety as "the apprehension cued off by a threat to some value the individual holds essential to his existence as a personality." Thus, anxiety is generally accepted as one core concept in personality theory having important implications for mental health of the individual.

Definitions of anxiety vary widely, for it has biological and cultural as well as psychological components. Sometimes it

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<sup>131</sup> V. Frankl, The Doctor of the Soul (New York: Knopf, 1965).

<sup>132</sup> R. May, The Meaning of Anxiety (New York: Ronald Press, 1960).

is treated as a stimulus or drive state (Taylor<sup>133</sup>, 134, 135, Pepinsky and Pepinsky<sup>136</sup>), sometimes as a response, and sometimes as including both. It has been treated as observable or manifest behavior and as an inferred state not overtly manifest.

Writers such as Fenichel<sup>137</sup>, May<sup>138</sup>, and Mowrer<sup>139</sup>,

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133 J.A. Taylor, "The Relationship of Anxiety to the Conditioned Eyelid Response," Journal of Experimental Psychology, XLI (1961), 81-92.

134 J.A. Taylor, "A Personality Scale of Manifest Anxiety," Journal of Abnormal and Social Psychology, XLVIII (1953), 285-290.

135 J.A. Taylor, "Drive Theory and Manifest Anxiety," Psychological Bulletin, LIII (1956), 303-320.

136 H.B. Pepinsky and P.N. Pepinsky, Counseling: Theory and Practice (New York: Ronald Press, 1954).

137 O. Fenichel, The Psychoanalytic Theory of Neurosis (New York: W.W. Norton, 1945).

138 R. May, op. cit.

139 O.H. Mowrer, "Anxiety Theory as a Basis for Distinguishing Between Counseling and Psychotherapy," in Concepts and Programs of Counseling, edited by R.F. Berdie (Minneapolis: University of Minneapolis Press, 1951) pp. 7-26.

<sup>140</sup>, have distinguished neurotic and normal forms of anxiety. May<sup>141</sup> considered normal anxiety as a reaction proportional to objective threat which does not include repression or other defensive mechanism, and which can be coped with constructively on the level of conscious awareness.

Fenichel<sup>142</sup> formulated a triple stratification of anxiety in terms of trauma -anxiety automatic and unspecified-, danger -anxiety in the service of the ego, affect created by anticipation, controlled and utilized as warning signal- and, panic -failure of ego control, affect becoming overwhelming, regression to the first stratum.

Mowrer<sup>143</sup>, <sup>144</sup> in making a distinction similar to May's

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<sup>140</sup> O.H. Mowrer, "Neuroses and Psychotherapy as Interpersonal Processes: A Synopsis," in Psychotherapy: Theory and Research, edited by O.H. Mowrer (New York: Ronald Press, 1953), pp. 69-94.

<sup>141</sup> R. May, op. cit.

<sup>142</sup> O. Fenichel, op. cit.

<sup>143</sup> O.H. Mowrer, "Anxiety Theory as a Basis for Distinguishing Between Counseling and Psychotherapy," pp. 7-26

<sup>144</sup> O.H. Mowrer, "Neuroses and Psychotherapy as Interpersonal Processes: A Synopsis," pp. 69-94.



views both normal and neurotic anxiety associated with the experience of conflict in contrast to fear, which does not necessarily rest in conflict at all. Normal anxiety is also considered situational and the individual is aware of the causes of his anxiety. The individual experiencing such a reaction may deal with it constructively and rationally, or on the other hand, dissociatively -disruptively from the point of view of the individual's problem solving capacities. Mowrer<sup>145</sup> has defined anxiety as a conditioned form of the pain reaction. As such, it is a response which, like other responses, can itself produce additional stimuli having motivating qualities.

In the context of the previous paragraphs, anxiety is perceived as (1) a stimulus and a response as discussed by Mowrer and (2) manifest behavior assumed to be indicative of pure residual anxiety not masked by defensive responses.

Sullivan's ideas on anxiety are particularly relevant in

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<sup>145</sup> O.H. Mowrer, "Neuroses and Psychotherapy as Interpersonal Processes: A Synopsis," pp. 69-94.

understanding some implications proper to counselor anxiety Sullivan<sup>146</sup> referred to anxiety as the state of tension arising from the experience of disapproval in interpersonal relations. When the anxious counselor is faced with the occurrence of anxiety-producing events in his own behavior, his own awareness, he could employ two sets of behaviors in order to maintain a tension-free awareness: (1) the counselor learns to be selectively inattentive to situations that will produce anxious thoughts, feelings, and the like: and (2) the counselor can learn to replace the anxiety-producing responses with others that do not have that effect. The first is called selective inattention; the second group of events was termed substitutive processes.

According to Sullivan, selection of inappropriate or poorly designed avoidance behaviors (security operations) or excessive reliance on selective inattention and the substitutive processes predisposes a counselor to further behavioral difficulties. Several of these may be listed here in order to represent the sort of "snow-ball effect" to which Sullivan was

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<sup>146</sup> H.S. Sullivan, op. cit.

pointing:

1. Avoidance behaviors result in restrictions in freedom or living. To the extent that a person has learned to avoid situations and to be selectively inattentive to others, he becomes the victim of a sort of behavioral impoverishment.

2. Avoidance behaviors may interfere directly with the necessary interpersonal relations that must occur if the person is to obtain a satisfactory outcome to his important behavior.

3. Substitutive thought sequences the person must use in order to avoid the occurrence of derogatory responses toward himself may in turn render him ineffective in situations where he tries to interact.

4. The most serious consequent follows when important responses or interrelationships are deleted from the individual's repertoire altogether.

According to Dollard and Miller<sup>147</sup> the behavior of all

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<sup>147</sup> J. Dollard and N.E. Miller, Personality and Psychotherapy (New York, Mc Graw-Hill, 1950) pp. 31-32.

human beings is learned. There are four fundamental factors that are important for all learning: drive or motivation, the cue or stimulus, response, and reinforcement.

Drives are strong stimuli that impel action. Certain classes of stimuli are primary, or innate drives, e.g. pain, thirst, hunger, etc. There are also secondary, or learned, drives which are acquired on the basis of primary drives, represent elaboration of them, and serve as a facade behind which the functions of the underlying innate drives are hidden. For Dollard & Miller anxiety is a major learned drive.

Common to all theories on anxiety cited in this chapter is the idea that past experiences influence the individual's expectation of how others will react thus determining his own response tendencies. Therefore, anxiety is the unpleasant anticipation that social interaction is likely to be a source of pain and defeat.

Since everyone experiences anxiety, its presence in others is readily sensed. In an experimental situation

Mattson<sup>148</sup> showed anxiety's contagion from one partner, threatened by a painful stimulus, to a non threatened partner. Changes in voice pitch and rate of speech were readily identifiable as signals of anxiety as Ruesch and Prestwood<sup>149</sup> demonstrated.

While physiological changes are known to accompany the subjective experience of anxiety, experimental efforts to show consistent relationships between the two have not succeeded. Jackson and Bloomberg<sup>150</sup> attempted to assess relationships among a number of single measures which purported to measure anxiety. They obtained no significant correlation between eye blink rate, skin conductance, and scores on an anxiety self-rating scale. Other studies were also unable to relate psycho-

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<sup>148</sup> P.O. Mattson, "Communicated Anxiety in a Two-Person Situation," Journal of Consulting Psychology, XXIV (1960), 448-495.

<sup>149</sup> J. Ruesch and A.R. Prestwood, "Anxiety: Its Initiation, Communication and Interpersonal Management," Archives of Neurological Psychiatry, LXII (1949) 527-550.

<sup>150</sup> D.N. Jackson and R. Bloombert, "Anxiety: Unitas or Multiplex?," Journal of Consulting Psychology, XXII (1958), 225-229.

logical measures and self-ratings of anxiety (Lotsof and Downing<sup>151</sup>, Dibner<sup>152</sup>, Winter, Ferreira, and Ransom<sup>153</sup>).

Counselor anxiety has not yet received much attention from researchers. Cutler<sup>154</sup> found that therapists who dictated accounts from memory of interviews which had been taped and rated by independent judges, tended to distort reports of hostility and aggression connected with their personal anxieties. Bandura<sup>155</sup> found a negative relationship between therapists' rated anxiety level and their rated therapeutic competence.

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<sup>151</sup> E.J. Lotsof and W.L. Downing, "Two Measures of Anxiety," Journal of Consulting Psychology, XX (1956), 170.

<sup>152</sup> A.S. Dibner, "Ambiguity and Anxiety," Journal of Abnormal and Social Psychology, LVI (1958), 165-174.

<sup>153</sup> W.D. Winter, A.J. Ferreira, and R. Ransom, "Two Measures of Anxiety: A Validation," Journal of Consulting Psychology, XXVII (1963), 520-524.

<sup>154</sup> R.L. Cutler, "Countertransference Effects in Psychotherapy," Journal of Consulting Psychology, XXII (1950), 349-356.

<sup>155</sup> A. Bandura, "Psychotherapists' Anxiety Level, Self-Insight and Psychotherapeutic Competence," Journal of Abnormal and Social Psychology, LII (1956), 333-337.

Russell and Snyder<sup>156</sup> showed that hostile clients aroused more counselor anxiety than friendly ones. All the studies cited here except the last one used global assessment of anxiety as criterion variables. Russell and Snyder included physiological measures, e.g., palmar sweat and eye blink rates. The physiological measures failed to relate to global judgments.

May's definition of anxiety is particularly apt for the counselor. May<sup>157</sup> terms it, "the apprehension cued off by a threat to some value which the individual holds essential to his existence as a personality." Client expressions of hostility, dependency, and fears, evoke counter-responses rooted in the needs, past experiences, and value system of the counselor.

The ambiguity inherent in the counseling situation is

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<sup>156</sup> P.D. Russell and W.V.\* Snyder, "Counselor Anxiety in Relation to Amount of Clinical Experience and Quality of Affect Demonstrated by Clients," Journal of Consulting Psychology, XXVII (1963), 358-363.

<sup>157</sup> R. May, op. cit. p. 191.

another source of anxiety. Frank<sup>158</sup> has pointed out how the client's uncertainty enhances his susceptibility to influence and suggestion from the counselor. There is also ambiguity for the counselor which sensitizes him to cues from the client. Moreover, the counselor is confronted by tentative and fragmentary information provided by an unfamiliar person. The counselor or the counselor-trainee is especially likely to feel that his role demands that he rapidly understand the client's problem and provide clarification and help. He is pressured by the client's expectations and feels uncertain of his ability to fulfill these expectations.

The counselor needs assurance of his own competence. Mullan and Sangiuliano<sup>159</sup> affirm that the use of techniques and gimmicks is frequently an attempt to control direction of the therapy and in so doing, the counselor minimizes his anxiety. Perhaps when counselor is learning "appropriate

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<sup>158</sup> J.D. Frank, "The Dynamics of the Psychotherapeutic Relationships: Determinants and Effects of the Therapist's Influence," Psychiatry, XXII (1959), 17-39.

<sup>159</sup> H. Mullan and I. Sangiuliano, The Therapist's Contribution to the Treatment Process (Springfield, Ill.: Charles C. Thomas, 1945).



responses" he may be learning task-relevant responses to anxiety.

It seems, from the research cited here, that there has been more theoretical deduction than controlled observation of the effects of counselor anxiety on therapy outcomes. Bordin<sup>160</sup>, for example, has said,

When the client reveals conflicting feelings that bear upon his own conflicts, the counselor may press upon the client certain interpretations which are not necessarily relevant to the client's problem or his present stage in the counseling process, but which are imperative to the counselor's defense against his own conflict. (p. 168).

Bandura<sup>161</sup> provided a rare instance of experimental evidence supporting the hypothesis that the situation provoking anxiety in the patient also provokes anxiety in the therapist designed to avoid the anxiety-producing situation. His study showed that therapists with high hostility and anxiety were more inclined to avoid than approach patient hostility. Patients in the study were more inclined to drop hostile topics and

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<sup>160</sup> E.S. Bordin, Psychological Counseling (New York: Appleton-Century-Crofts, 1955), p. 168.

<sup>161</sup> A. Bandura, op. cit.

change the object of their hostility following avoidant therapist responses.

Because the counselor's anxiety may be cued off by stimuli outside his conscious awareness, he may not recognize how they alter his behavior. To be effective the counselor should not be overwhelmed and controlled by unconscious hostile, dominant, affectional, or anxious needs in the counseling interview.

Steiber<sup>162</sup> undertook to investigate whether anxious counselor behavior in an interview was associated with counselor anxiety as measured by the Taylor Manifest Anxiety Scale, the Heineman Anxiety Scale, and the Anxiety Index.

To assure minimal client variability Steiber employed an analogue of a counseling interview in which 34 counselor-in-training interviewed two actor clients. The counselor did not know the clients were actors at the time of the interviews.

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<sup>162</sup> J.K. Steiber, "Counselor Anxiety and Interview Behavior." (Unpublished doctoral dissertation, Columbia University, 1967).

Each actor portrayed a preassigned role: one, dominant-hostile, the other, dominant-friendly. The selection of roles was based on the expectation that client hostility would evoke greater counselor anxiety than client friendliness.

Steiber developed rating methods to be used in scoring counselor anxiety from tapes and typescripts of the interviews. The indices of counselor anxiety were: (1) extralinguistic behavior, primarily speech disruptions, and (2) the content of counselor statements which experienced therapy supervisors had previously designed as symptomatic of anxiety.

The scores based on the extralinguistic and content measures were correlated with scores on the TMAS, HAS, and AI. No significant correlation was obtained between any one of the pre-interview anxiety scales and any reliably scored anxious counselor behavior in the interview. Nevertheless, Steiber found that additional analysis revealed significant differences in the mean frequency of occurrence of several of the observed anxious behaviors.

In the friendly interview there was higher speech

disruption ratio than in the hostile interview. In the hostile interview the counselor changed the topic and commented on the client's behavior as a manifestation of client feelings, significantly more often than in the friendly interview.

The findings were interpreted as indicating counselor attempts to avoid client hostility and responses to the client's blatantly provocative behavior. It was concluded that client behavior may be a more potent determinant of the designated counselor behaviors than counselor anxiety as measured by self-report inventories such as TMAS, HAS, or AI.

Finally, there is much evidence that when individuals feel anxious, afraid, lonely or unsure of themselves, the sheer presence of others is particularly rewarding. Schachter<sup>163</sup> tested the hypothesis that anxiety conditions will lead to an increased affiliative tendency. He recruited college women to participate in an experiment. When they arrived in the

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<sup>163</sup> S. Schachter, The Psychology of Affiliation: Experimental Studies of the Source of Gregariousness (Stanford, Calif.: Stanford University Press, 1959).

experimental rooms, the experimenter claimed that his investigation was concerned with the effects of electric shock. The description of the shock experiment was designed to make some of the women highly anxious, while leaving the remainder of the women calm.

Once some women had been made more anxious than others, Schachter could examine how anxiety affected their desire to be with other individuals. He assessed subjects' desire to affiliate in the following way. The experimenter claimed that there would be about a ten minute delay while several pieces of equipment were secured. Subjects were told that during the ten minute break they could wait in a private cubicle. Those rooms were said to be comfortable and spacious; they all contained armchairs and there were books and magazines in each room. The experimenter also commented that some of them might want to wait with other girls. If they preferred to wait with others, they were asked to let the experimenter know. He then passed out a sheet upon which the subject could indicate whether she preferred to wait alone, or with others, or had no preference at all.

Shachter found support for his hypothesis that anxious people will be especially inclined to seek the company of others. Sixty-three per cent of the subjects in the high-anxiety condition wanted to wait with other subjects. In the low-anxiety condition only thirty-three per cent of subjects wished to wait with others.

While anxiety appears to increase as individual's need for affiliation, there is evidence that anxious individuals are selective about the others with whom they wish to affiliate. Anxious people apparently do not wish to be in the company of just any other person. Instead, anxious individuals seem to prefer to associate with people who are in a situation similar to their own.

### Summary

Supervised practicum in counseling is an accepted necessity in the professional preparation of counselors. Standards for programs of counselor education and state certification requirements emphasize this prerequisite. In many counselor preparation programs, the practicum is the culminating experience toward which previous didactic courses

are directed. It should follow that the supervision of potential counselors would be considered crucial to counselors educators.

The function of supervision is one of influencing by creating an atmosphere for human growth. The emphasis is usually upon acquiring basic assumptions and attitudes, e.g., being more congruent, transparent; rather than upon specific methods or techniques. The counselor-trainee is not forced to conform to a rigid system, but is helped to find his own style of counseling within the framework of the attitudes which are considered the necessary and sufficient conditions for therapeutic personality change.

Supervision is also a human relationship. And as in any relationship, including the counseling relationship, there is an element of threat that may trigger anxiety. In fact, it is more threatening than many other relationships. This is something that must be recognized, since we know anxiety inhibits and restricts learning in the counselor-trainee, that it leads to defensiveness and resistance. It appears that counselor's anxiety leads to the creation of relationships which

reach an impasse in therapy. If then, we expect the counselor-trainee to change, to grow, to develop, and to be a facilitative functioning therapist, we must reduce anxiety in him to a normal level. (Mueller and Kell<sup>164</sup>).

This suggest that the methods or techniques of supervision are more similar to those of psychotherapy than they are to subject matter or didactic instruction.

It is clear from the review of the literature that the importance of the counselor's characteristics to counseling outcome has long been recognized. Most writers agree upon the importance of and the difficulties inherent in the identification and measurement of the characteristics of the counselor. The literature is abundant, varied, and generally inconclusive. (Wicas and Mahan<sup>165</sup>).

The majority of writers on the field agree that the

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<sup>164</sup> W.J. Mueller and B.L. Kell, Coping with Conflict: Supervising Counselors and Psychotherapists (New York: Appleton-Century-Crofts, 1972).

<sup>165</sup> E.A. Wicas and T.W. Mahan, "Characteristics of Counselors Rated Effective by Supervisors and Peers, "Journal of Counselor Education and Supervision, VI (1966), 50-56.



counselor's personality is a crucial variable to facilitative functioning. However, agreement virtually ceases when analyzed in terms of specific characteristics seen as "necessary and sufficient" for successful therapy. Nevertheless, the apparent differences and lack of agreement among the various writers stimulated attempts to "pin down the counselor's elusive traits and to determine if there is such a thing as a counselor personality" (Arbuckle<sup>166</sup>).

Outcome of therapy has not been related to affiliation with a particular school of psychotherapy. On the contrary, there is some evidence that success in therapy relates to therapist's "high-order" personality traits, e.g., cognitive flexibility, psychological openness, empathy, genuineness, and self-disclosure.

A number of variables are beginning to appear which relate to effective counseling, e.g., counselor congruence.

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<sup>166</sup> D.S. Arbuckle, "Client Perceptions of Counselor Personality," Journal of Counseling Psychology, III (1956), 93-96.

Several characteristics repeatedly appear out of the maze of data generated by the quick approach to screening counselor trainees and the deductive approach to testing specific hypotheses. The best documented variable is dogmatism, followed by the qualities of empathy, "congruence" or consistency of behavior with self-awareness. Other variables appear less reliable as predictors of counseling effectiveness but the variability of results may be due to different methodologies employed by different studies.

Self-disclosure of the client has generally been recognized as an important factor in personality change, but until quite recently, little consideration had been given to counselor self-disclosure as a "high order" trait. Counselor's self-disclosure was related to transparency, openness, genuineness, affecting therapy outcomes.

In general, all of the literature related to self-disclosure pointed to evidence that counselor self-disclosure is an important variable as it related to successful therapy outcome (Halkides<sup>167</sup>),

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<sup>167</sup> G. Halkides, op. cit.

to positive client change (Barrett-Lennard<sup>168</sup>, Truax and Carkhuff<sup>169</sup>, Rogers<sup>170</sup>), and to personality characteristics of successful counselors (Demos<sup>171</sup>, Allen<sup>172</sup>).

Anxiety in the counselor was regarded as a deterrent to the counselor's ability to understand and help the client. Counselor's anxiety restricts learning, leads to defensiveness and resistance. Moreover, it leads to the creation of counseling relationships which reach impasses in therapy. Bandura<sup>173</sup> reported a negative relationship between anxiety and facilitative functioning.

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<sup>168</sup> G. Barrett-Lennard, op. cit.

<sup>169</sup> C.B. Truax and R.R. Carkhuff, "Client and Therapist Transparency in the Psychotherapeutic Encounter, pp. 3-9.

<sup>170</sup> C.R. Rogers, ed. The Therapeutic Relationship and Its Impact: A Study of Psychotherapy with Schizophrenics (Madison, Wis.: University of Wisconsin Press, 1967).

<sup>171</sup> G.D. Demos, op. cit.

<sup>172</sup> T.W. Allen, op. cit.

<sup>173</sup> A. Bandura, op. cit.

The review of the literature related to this research does indicate that it would be important to examine the relationships between counselor-trainee's degree of readiness for self-disclosure and his measured level of facilitative functioning and manifest anxiety.

## CHAPTER III

### DESIGN OF THE STUDY

Three main objectives are pertinent to this chapter. First, an explanation of the experiment, including a description and a rationale of the sample used in the research and the experiences they shared. Second, instruments used and procedures followed in obtaining and evaluating the data. Finally, the design and methodology used in analyzing the results.

As previously stated, the purpose of this dissertation is to examine the importance of the counselor-trainee's readiness to be disclosing regarding his authentic life in relation to level of facilitative functioning. The study also explores the relationship of anxiety with those other two variables.

While this purpose is somewhat easily stated, and while the actual statistical tests employed are not extensively intricate, the actual research design for the dissertation is somewhat involved and demands careful explanation.

## The Experiment

### Subjects

The subjects (Ss) in this experiment were thirty graduate students enrolled in the course Practicum in Guidance and Counseling, Guidance 495, Department of Guidance and Counseling, during the Summer session 1972 at Loyola University of Chicago.

The subjects were divided into four groups for purposes of training; selection into the four groups was based mainly on age and sex. Some of the personal and professional characteristics of the counselor-trainees involved in the experiment are indicated in Table 1. The data was taken from a short questionnaire administered during the first class session.

TABLE 1

## FREQUENCY DISTRIBUTION OF THIRTY COUNSELOR-TRAINEES

## ARRANGED BY AGE AND SEX

Age	Males	Females	Total	Yrs. of Exp.*	Males	Females	Total
15-21	1	12	13	1-5	6	19	25
26-30	3	5	8	6-10	0	4	4
31-35	0	2	2	11-15	0	0	0
36- and over	2	5	7	16 and over	0	1	1
Total	6	24	30	Total	6	24	30
Mean age	30.16	29.7	29.8	Mean Yrs. Exp.	4.2	4.9	4.8

\* Teaching experience.

There were twenty-four females and six males involved in the experiment. Comparison of the age distribution of the females and male subjects reveal similarity. The mean age of female subjects was 29.7, closely resembles the mean age of male subjects, 30.1. The mean age for all subjects was 29.8.

The counselor-trainees' years of teaching experience are also identified in Table 1. Similarity in number of years of teaching experience is also found between female and male subjects. The mean for female subjects, 4.9, closely resembles the mean for male subjects, 4.2. The mean for all subjects was 4.8.

For purpose of this study one sample was used, the 30 subjects; also, selected groups, defined as those subjects whose scores fell above or below the median on self-disclosure pretest, were examined.

### Supervisors

There were four supervisors, two males and two females, in the Practicum Staff, one for each group of 8 counselor-trainees. Two supervisors held the doctorate in Guidance and Counseling with several years of professional practice; the other two were doctoral candidates also with several years of experience in practicum supervision. The supervisors based the course, Practicum in Guidance and Counseling, Guidance 495, on a developmental concept of training



with increased facilitative functioning as the major goal. Special attention was given to insure that all the students in the Practicum had the same kind of experiences, including role-playing, video taping, listening to "professional" tapes, counseling analogue interviews, and actual counseling sessions with volunteer clients.

### Clients

Clients interviewed for purposes of this research were 15 coached clients. A coached client is analogous to an actor playing a role, i.e., a student seeking help from a counselor. The vast majority of clients were undergraduate college students from Loyola University of Chicago.

The clients were told that the primary interest for this research was to study the counseling skill of the counselor-trainees but it would be also an excellent opportunity to discuss their concerns concerning school or home. The client role was constructed in such a manner that the client confronted the counselor with a variety of problems resembling those confronted by a counselor doing his job. The clients were

asked to sign up for two interviews.

Clients were interviewed on the first (pretest situation) and last day (posttest situation) of the Summer session, 1972, at Loyola University of Chicago. Clients were assigned to counselor-trainees on a random basis assuring that no one individual were interviewed twice by the same counselor-trainee.

An important technical problem that was taken into consideration was having the clients behave in a reasonably consistent manner from interview to interview without structuring the interview so tightly that the counselor would not have sufficient reign to display his own style in approaching counseling problems.

### The Practicum

The course, Practicum in Guidance and Counseling, Guidance 495 (Silverman and Garte<sup>174</sup>), is offered each semester and

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<sup>174</sup> M.S. Silverman and S.H. Garte, Syllabus for Practicum 495 (Loyola University of Chicago, Summer session 1972).

during Summer sessions as part of the counselor education program in the Department of Guidance and Counseling, School of Education, at Loyola University of Chicago. The rest of this section is the description taken directly from the course syllabus.

This course is based on a developmental concept of training with counseling competencies being a human growth experience. The primary skill to be mastered by the individual counselor-trainee are: (1) learning to "listen," i.e., sharpening abilities of empathetic understanding; (2) better understanding of oneself; (3) better understanding of counseling theory and techniques, and (4) learning to communicate all of the above effectively, providing the feedback needed for change and growth.

During the course the counselor-trainees were exposed to a wide range of activities including group process, group meetings, video-taping, listening exercises, role-playing, listening to tapes of counseling by professionals or "learned other," and above all individual counseling experience.

### Description of activities.

Group processes: wherein the trainees interacted with each other in an open and honest forum. Through such interaction trainees exercised their listening ability in a group setting which provided verification of the accuracy of their empathy. In return, the trainees received feedback from group members to enable a clear understanding of self and how others perceived them.

Group meetings: wherein the trainees had the opportunity to review counseling tapes. Group members related to each other through their counseling tapes, gaining a more congruent relationship between student as "person" and student as "counselor." There were no formal demarcations between group process and group meetings. At these meetings the trainee evaluated where he or she was in regard to the skill being gained, and planned with the group future goals in counseling growth.

Video-tape: through observations of self and others on television, the trainees had immediate feedback on the images that were being projected.

Listening exercises: several written exercises were used in the course which analysed the ability to interpret words into feelings. Statements were read and then the trainees were asked to note the kind of feelings being expressed. After each of these exercises there followed a discussion of the feelings involved in the statements, and perhaps why an individual reacted as he did to each.

Role-playing: during the course, each trainee practiced counseling skill with classmates in counselor-client situations. Occasionally this was done via the two-way mirror allowing the entire group of trainees to view a "private" counseling session. Discussion usually followed each role-playing situation. The purpose of the role-playing was to help the trainee learn to respond to counseling situations. This activity also aided the trainee in achieving a better understanding of exactly what a "client" was saying.

Learned others: the trainee listened to recorded tapes of counseling by experts or "learned others." Thus, the trainees gained insight into the various styles, their similarities and differences and they were able to relate these styles to

one's own developing style and philosophy of counseling.

Counseling interviews: the trainees had the opportunity to work individually with clients, most of whom were high school students. Tapes of four such sessions were considered to be a minimum for purposes of supervision.

Special attention was given to insure that all the trainees in the practicum had similar experiences, whether it was role-playing, video-taping, listening exercises, counseling interviews, or the listening to professional counseling tapes.

At the end of the course the trainees were asked to submit evaluations for each member, including themselves, of their work, which were shared. The purpose of these evaluations was to have each trainee look at himself in relationship to his counseling skills (Silverman and Garte<sup>175</sup>).

#### Instruments Used

Three test instruments used to obtain data deemed

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<sup>175</sup> M.S. Silverman and S.H. Garte, op. cit.

essential to the investigation were: the Jourard Questionnaire for High versus Low Disclosers (JSDQ), the Carkhuff Scale of Gross Ratings of Facilitative Interpersonal Functioning (CSGR), and the Taylor Manifest Anxiety Scale (TMAS).

The Jourard Questionnaire for High vs. Low Disclosers.

The Jourard Questionnaire for High vs. Low Disclosers (see Appendix A) is a forty-item version of the original Journal Self-Disclosure Questionnaire. The subjects (Ss) respond to 40 items twice for a total point possibility of 80.

Jourard<sup>176</sup> reports that the Self-Disclosure Questionnaire of lengths that include 15, 25, 35, 45, and 60 items have satisfactory reliability, odd-even coefficients for larger sub-totals run in the 80s and 90s. He also states that the method has some validity but is subject to the usual problems of personality measures based on self-report.

Some of the main findings obtained by Jourard and his

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<sup>176</sup> S.M. Jourard, The Transparent Self (New York: Van Nostrand Reinhold Company, 1971) p. 228.

colleagues (Jourard<sup>177</sup>) in the series of explorations with the Questionnaire related closely to the purpose of this dissertation. The authors found that (a) there are large individual differences in self-disclosure scores, indicating that people differ widely in willingness to be known, (b) various groups have characteristic levels of self-disclosure, (c) readiness to be self-disclosing was found to be a factor in interpersonal functioning, (d) there are wide differences in person's readiness to disclose various kinds of personal data, (e) there are marked interaction group membership of subjects, targets, subject matter, and personality in self-disclosure.

The 80 point JSDQ was used in assessing counselor-trainees' readiness to be disclosing regarding their authentic life. The JSDQ gives no specific norms.

The Carkhuff Scale of Gross Ratings of Facilitative Functioning.

Truax and Carkhuff and their colleagues (Truax and

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<sup>177</sup> ibid., pp. 101-103.



Carkhuff<sup>178</sup>, Carkhuff and Berenson<sup>179</sup>, Carkhuff<sup>180</sup>) in their research on counseling and psychotherapy have identified what they consider to be the core dimensions related to client constructive change in therapy. The core dimensions or the dimensions of "human nourishment" are empathy, understanding, positive regard, genuineness, concreteness or specificity in expression. Five point rating scales were taken directly from Carkhuff<sup>181</sup> for purposes of this study (see Appendix B).

Carkhuff<sup>182</sup>, <sup>183</sup> pointed out that the scale presents some limitations, especially a significant degree of subjectivity

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<sup>178</sup> C.H. Truax and R.R. Carkhuff, Toward Effective Counseling and Psychotherapy (Chicago: Aldine Publishing Company, 1967).

<sup>179</sup> R.R. Carkhuff and B.G. Berenson, Beyond Counseling and Therapy (New York: Holt, Rinehart and Wiston, Inc. 1967).

<sup>180</sup> R.R. Carkhuff, Helping and Human Relations, Volumes I and II (New York: Holt, Rinehart and Wiston, Inc., 1969).

<sup>181</sup> ibid., p. 113.

<sup>182</sup> R.R. Carkhuff and B.G. Berenson, Beyond Counseling and Therapy, p. 5.

<sup>183</sup> R.R. Carkhuff, Helping and Human Relations, Volume I, page 130.

on the part of the raters. Nevertheless, the scale was found to be a valid and reliable instrument in assessing discrimination.

The Carkhuff Scale of Gross Ratings of Facilitative Interpersonal Functioning is used to assess counselor discrimination. By discrimination Carkhuff understands two things: first, he understands that a counselor can catch and discern that which is happening in the total relationship and what the client is actually saying; second, the counselor is able to discern that which is helpful to do or say in a given situation.

From a great body of empirical research (Carkhuff<sup>184</sup>) it has been found that high indexes of communication of the core facilitative dimensions identify "helpers" who can relate effectively with persons seeking help. Carkhuff<sup>185</sup> maintains that discrimination is a necessary but no sufficient condition of communication. Therefore, the expectation is that persons discriminating at high levels would be able to translate

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<sup>184</sup> R.R. Carkhuff, Helping and Human Relations.

<sup>185</sup> ibid., p. 113.

communication of the core facilitative dimensions into meaningful interpersonal relationships.

The CSGR with a score range of 0 to 5, with 3 considered to be a minimally facilitative response, was used in assessing counselor-trainees' level of facilitative functioning.

In order to rate and evaluate counselor-trainees level of facilitative functioning each subject (S) had a ten minute interview on the first and last day of the six week Summer session 1972, with one of the coached clients previously described.

The very same problem was presented to counselor-trainees (Ss). There is no doubt that there would be some variation in the presentation of the problem, but basically, consistency was retained by presenting the same problem and by providing the same time sequence. The standard problems presented were (a) questions about college choice and (b) questions of vocational choice and technical education.

#### The Taylor Manifest Anxiety Scale

The Taylor Manifest Anxiety Scale is one of a number

of inventories of different kinds taken from the 550 items of the Minnesota Multiphasic Inventory (MMPI). Taylor<sup>186</sup> originally developed the scale as a device selecting subjects for an experiment in eye-lid conditioning. The relationship of scores to clinically observable anxious behavior was not at issue. Taylor<sup>187</sup> was interested in a measure of motivational drive level. She constructed the scale of fifty items from the MMPI chosen according to a criterion of clinical judgment. Only if four of five psychiatrists agreed that a given item should measure anxiety was that item included in the scale.

Taylor<sup>188</sup> showed a high test-retest reliability, 0.89, for the scale and reported some indirect validity data.

Studies undertaking to relate TMAS scores to clinical

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<sup>186</sup> J.A. Taylor, "A Personality Scale of Manifest Anxiety," Journal of Abnormal and Social Psychology, XLVIII (1953), 285-290.

<sup>187</sup> J.A. Taylor, "Drive Theory and Manifest Anxiety," Psychological Bulletin, LIII (1956), 303-320.

<sup>188</sup> J.A. Taylor, "A Personality Scale of Manifest Anxiety," pp. 285-290.

judgments of anxiety have yielded low but significant correlations in a number of instances (Holtzman and Bitterman<sup>189</sup>, Hoyt and Magoon<sup>190</sup>, Buss, Weiner, Durkee and Baer<sup>191</sup>, Terwillinger and Fiedler<sup>192</sup>, Lauterbach<sup>193</sup>, Davitz<sup>194</sup>, Davitz and Mason<sup>195</sup>).

The TMAS measures a predisposition to anxiety, not an

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<sup>189</sup> W.H. Holtzman, A.D. Calvin, and M.E. Bitterman, "New Evidence for the Validity of Taylor's Manifest Anxiety Scale," Journal of Abnormal and Social Psychology, XLVII (1952), 853-854.

<sup>190</sup> D.P. Hoyt and T.M. Magoon, "A Validation Study of the Taylor Manifest Anxiety Scale," Journal of Clinical Psychology, X (1954), 357-361.

<sup>191</sup> A.H. Buss, M. Wiener, A. Durkee, and M. Baer; "The Meaning of Anxiety in Clinical Situations," Journal of Consulting Psychology, XIX (1955), 125-129.

<sup>192</sup> J.S. Terwillinger and F.E. Fiedler, "An Investigation of Determinants Inducing to Seek Personal Counseling," Journal of Consulting Psychology, XXII (1958), 288.

<sup>193</sup> C.G. Lauterbach, "The Taylor Anxiety Scale and Clinical Measures of Anxiety," Journal of Consulting Psychology, XXII (1958), 314.

<sup>194</sup> J. Davitz, "Manifest Anxiety and Social Behavior," Journal of Consulting Psychology, XXIV (1960), 554.

<sup>195</sup> J. Davitz and D.J. Mason, "Manifest Anxiety and Social Perception," Journal of Consulting Psychology, XXIV (1960), 554.

immediate state. Taylor<sup>196</sup> has well demonstrated that the scale distinguishes nicely between normal groups and samples of psychiatric patients. The former obtain an average of about 15, and the latter, about 28.

Research suggests that anxiety-proneness is related to certain broader personality tendencies, which may be thought of as styles (Levitt<sup>197</sup>). It has been found that anxious individuals tend to have low esteem, are more prone to feelings of guilt, have less curiosity and less sensation-seeking behavior, daydream more often, and are more resistant to hypnosis. The evidence does not indicate that these styles form a constellation which characterizes the anxious person. Most probably, there are several different anxious personalities, each comprising different styles, depending largely on developmental influences.

The TMAS (see Appendix C)\* with a possible point total

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<sup>196</sup> J.A. Taylor, "A Personality Scale of Manifest Anxiety," pp. 285-290.

<sup>197</sup> E.E. Levitt, The Psychology of Anxiety (New York: The Bobbs-Merril Company, Inc., 1967).

of 50, was employed in assessing counselor-trainees' level of manifest anxiety.

### Judges

For purposes of rating and evaluating the counselor-trainees' level of facilitative functioning, three qualified judges rated and evaluated taped counseling analogue interviews. The judges all had doctorates in counseling psychology and several years of experience in counselor education and supervision.

Table 2 indicates that there were no significant differences between the ratings of each judge and expert ratings ( $t = -0.7; 0.0; -1.6$ ; at .05% level =  $\pm 1.96$ ). In other words, the judges' scores are all within the plus or minus 1.96 which indicates that it made no significant difference who evaluated the tapes since there was an inner consistency among the judges.

TABLE 2

t-TEST USED TO SHOW INNER CONSISTENCY AMONG THE JUDGES

	Expert	Judge A	t-Test
Mean	3.78	3.71	
S. D.	.24	.30	
d <sup>2</sup>	.98	1.48	
N	16	16	-0.7

	Expert	Judge B	t-Test
Mean	3.78	3.78	
S. D.	.24	.24	
d <sup>2</sup>	.98	.98	
N	16	16	0.0

	Expert	Judge C	t-Test
Mean	3.78	3.62	
S. D.	.24	.37	
d <sup>2</sup>	.98	2.25	
N	16	16	-1.6



### Data Gathering Procedures: Pretest Situation

The Jourard Questionnaire for High vs. Low Disclosers and the Taylor Manifest Anxiety Scale were administered by the researcher to the thirty subjects on the first day of the six week Summer session 1972 at Loyola University of Chicago.

Also, on the first day of the Summer session 1972, every counselor-trainee recorded on tape a ten minute counseling interview with a coached client. After all interviews had been recorded, they were coded in order to secure anonymity.

Identical instructions (see Appendix D) were given by the researcher to each one of the four groups of counselor-trainees.

### Data Gathering Procedures: Posttest Situation

During the last day of Summer session 1972 the counselor-trainees re-took the JSDQ and the TMAS. These tests were re-administered to see if there were any significant changes in readiness for self-disclosure and manifest anxiety from pretest to posttest.

Also, the same day, each one of the subjects (Ss) made another taped interview lasting ten minutes with another coached client. The very same instructions which were given to clients in the pretest interview existed for the posttest tape. All these recorded interviews were also coded for purposes of anonymity.

#### Data Evaluating and Rating

The Self-Disclosure Questionnaire and the Taylor Manifest Anxiety Scale were rated and evaluated by the researcher following instructions given by each instrument.

The taped interviews were evaluated by three independent judges. The judges rated and evaluated the tapes according to rating procedures indicated by Carkhuff<sup>198</sup> for assessing facilitative functioning. The tapes were unmarked except for coding, to avoid identification of pre and post interviews by the judges. Each judge rate all 60 tapes.

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<sup>198</sup> R.R. Carkhuff, Helping and Human Relations, Volume I, pp. 115-123.

Prior to the rating and evaluation of tapes, the researcher had the judges evaluate a series of counselor responses to client stimulus expressions and compared them against expert responses. The excerpts taken from Carkhuff's Index of Discrimination (Carkhuff<sup>199</sup>) were sixteen expressions by clients of problems, and in response to each expression there were four possible counselor responses. The t test was then employed to establish the hypothesis of equality or inner consistency between the judges. The hypothesis proposed stated that the three judges were equal or had inner consistency in their rating attitudes to that of an expert. Therefore, each judge's rating scores were compared against those of the expert, and on the basis of the results of t test, we can either accept or reject the hypothesis proposed concerning the two sample groups.

As can be noticed from t test (Table 2), the scores are all within the plus or minus 1.96 which indicate that there was no significant difference in the rating of the judges and

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199 ibid.

there was an inner consistency among the judges.

### Statistical Design and Methodology

Data for this particular study consisted of pre-practicum and post-practicum response of the counselor-trainees to the Jourard Self-Disclosure Questionnaire, the Taylor's Manifest Anxiety Scale, and pre and post practicum facilitative functioning ratings made by the 3 impartial judges. The data yielded change scores, as well as pre and post-row scores.

For the purposes of this study the total sample of 30 subjects was examined in the following ways:

1. Correlational analysis was employed to examine the relative ordering of scores on the same variables at two points in time (C). Partial correlation methods were employed to examine the relative ordering of scores between two variables with the third variable held constant (A, B, and D), these were done in the following conditions:

- A. Pre-practicum: self-disclosure to facilitative functioning, manifest anxiety held constant; self-disclosure to

manifest anxiety, facilitative functioning held constant; facilitative functioning to manifest anxiety with self-disclosure held constant.

B. Post-practicum: self-disclosure to facilitative functioning, manifest anxiety held constant; self-disclosure to manifest anxiety, facilitative functioning held constant; facilitative functioning to manifest anxiety with self-disclosure held constant.

C. Pretest to posttest: between pre self-disclosure to post self-disclosure, pre facilitative functioning to post facilitative functioning, and pre manifest anxiety to post manifest anxiety.

D. Pre self-disclosure to post facilitative functioning with pre manifest anxiety held constant.

A and B were done in order to assess relationships at the start and end. C was done to assess similarity in ordering of scores on the same variables between pre and post-testing. D was done to assess relationships between pre self-disclosure to post facilitative functioning and manifest anxiety.

2. The t tests were used to assess differences between mean scores in the following conditions:

A. Pre self-disclosure to post self-disclosure.

B. Pre facilitative functioning to post facilitative functioning.

C. Pre manifest anxiety to post manifest anxiety.

These results would indicate if the 6 weeks training has any effect.

The total sample of thirty subjects was divided on the basis of level of self-disclosure on the pre-practicum administration of the Jourard scale. Those 13 subjects scoring above median (60) were designated high disclosers, and those 14 subjects scoring below the median were designated low disclosers. The two subgroups were examined in the following ways:

1. Correlational analysis was employed to examine the relative ordering of scores either on the same variable at two points in time (C). Partial correlation methods were employed to examine the relative ordering of scores between two variables with the third variable held constant (A, B, and D). These were done in the following conditions:

A. Pre-practicum: self-disclosure to facilitative functioning, manifest anxiety held constant; self-disclosure to manifest anxiety, facilitative functioning held constant; facilitative functioning to manifest anxiety with self-disclosure held constant.

B. Post-practicum: self-disclosure to facilitative functioning, manifest anxiety held constant; self-disclosure to manifest anxiety, facilitative functioning held constant; facilitative to manifest anxiety with self-disclosure held constant.

C. Pretest to posttest: between pre self-disclosure to post self-disclosure, pre facilitative functioning to post facilitative functioning, and pre manifest anxiety to post manifest anxiety.

D. Pre self-disclosure to post-facilitative functioning with manifest anxiety held constant.

A and B were done in order to assess relationships at the start and end. C was done to assess similarity in ordering of scores on the same variable between pre and post-testing. D was done to assess relationships between pre self-disclosure to post facilitative functioning and manifest anxiety.

3. The t tests were used to assess differences between mean scores in the following conditions:

A. Pre to pre comparison between high group and low group on self-disclosure, facilitative functioning, and manifest anxiety.

B. Post to post comparison between high group and low group on self-disclosure, facilitative functioning and manifest anxiety.

C. Pre to post comparison for each group on each variable:

- (1) High group pre self-disclosure to high group post self-disclosure.
- (2) High group pre facilitative functioning to high group post facilitative functioning.
- (3) High group pre manifest anxiety to high group post manifest anxiety.
- (4) Low group pre self-disclosure to low group post



self-disclosure.

- (5) Low group pre facilitative functioning to low group post facilitative functioning.
- (6) Low group pre manifest anxiety to low group post manifest anxiety.

D. Pre to post comparison between groups on each variable (change scores):

- (1) High group change on self-disclosure versus low group change on self-disclosure.
- (2) High group change on facilitative functioning versus low group change on facilitative functioning.
- (3) High group change on manifest anxiety versus low group change on manifest anxiety.
- (4) Low group change on self-disclosure versus high group change on self-disclosure.
- (5) Low group change on facilitative functioning versus

high group change on facilitative functioning.

- (6) Low group change on manifest anxiety versus high group change on manifest anxiety.

## CHAPTER IV

### RESULTS

This Chapter presents the results for each hypothesis including a discussion of the findings. Results and discussion are organized under two major headings: results pertaining to the total group and results pertaining to the selected groups.

In order to test the hypotheses presented in Chapter I, the statistical procedures employed in this design included the Product-Moment Method (Pearson  $r$ ) and partial correlation analysis for assessing the correlations between readiness for self-disclosure, facilitative functioning, and manifest anxiety in pre-practicum, post-practicum and change situations;  $t$ -tests for uncorrelated samples in comparing the total sample and the selected groups on the same instruments at different points in time.

#### Results Pertaining to the Total Sample

Table 3 presents a descriptive summary of scores on readiness for self-disclosure, facilitative functioning, and

manifest anxiety for the 30 subjects of this research on pretest, posttest, and change situations.

TABLE 3

DESCRIPTIVE SUMMARY OF SCORES ON READINESS FOR SELF-DISCLOSURE, FACILITATIVE FUNCTIONING, AND MANIFEST ANXIETY FOR ALL THIRTY SUBJECTS

Ss	PRE POST CHANGE			PRE POST CHANGE			PRE POST CHANGE		
	SD	SD	SD	FF	FF	FF	MA	MA	MA
030	80	80	00	2.1	2.5	.4	6	6	0
003	80	74	-6	1.7	2.2	.5	7	3	-4
029	75	80	5	1.8	2.3	.5	7	9	2
022	73	75	2	1.5	1.6	.1	9	3	-6
006	73	72	-1	1.6	2.8	1.2	8	8	0
018	70	73	3	2.2	1.9	-.3	5	7	2
025	69	73	4	1.9	2.1	.2	11	7	-4
001	69	75	6	1.7	1.4	-.3	15	21	6
028	69	71	2	2.7	2.2	-.5	7	8	1
014	68	77	9	2.5	2.1	-.4	21	31	10
009	65	77	12	2.2	2.0	-.2	13	10	-3
002	65	57	-8	2.5	2.4	-.1	14	18	4
011	64	61	-3	2.4	1.9	-.5	11	12	1
023	60	76	16	1.8	2.1	.3	12	9	-3
021	60	63	3	1.9	1.5	-.4	5	9	4
008	60	62	2	1.5	2.7	1.2	9	14	5
005	59	73	14	2.5	2.5	0	4	6	2
012	59	68	9	1.8	2.3	.5	8	21	13
024	58	54	-4	2.1	2.1	0	22	20	-2
020	57	57	0	2.0	2.2	.2	21	2	-19
004	56	76	20	1.8	2.5	.7	15	15	0
026	56	55	-1	2.2	2.1	-.1	5	5	0
010	51	59	8	1.4	2.1	.7	22	27	5
027	50	53	3	1.6	2.3	.7	17	23	6
016	49	73	24	1.5	1.6	.1	8	11	3
017	46	45	-1	1.4	1.9	.5	15	9	-6
013	38	47	9	1.8	1.8	0	16	10	-6
007	32	43	11	1.9	2.7	.8	8	4	-4
019	32	38	6	1.2	2.2	1.0	16	17	1
015	19	16	-3	1.8	1.6	-.2	11	10	-1
Sum	1762	1903	141	57.0	63.6	6.6	348	355	7
Mean	58.7	63.4	4.7	1.9	2.1	.2	11.6	11.8	.2
S.D.	14	14.6	7.3	.37	.35	.48	5.3	7.2	5.7

Pre-Practicum Self-Disclosure Median = 60

As indicated in the section of Chapter 3 outlining the statistical design of the study, the first analysis consisted of correlational methods for the total sample.

Null Hypothesis 1: No significant relationships exist for the total sample between readiness for self-disclosure, facilitative functioning, and manifest anxiety at pretest situation.

Partial correlations relative to this hypothesis are presented in Table 4.

TABLE 4

PRETEST PARTIAL CORRELATIONS BETWEEN  
READINESS FOR SELF-DISCLOSURE, FACILI-  
TATIVE FUNCTIONING AND MANIFEST ANXIETY

(N = 30)

Variables	Pearson $\bar{r}$	Prob. Level
Pre SD to Pre FF	.299	.058
Pre SD to Pre MA	-.234	.111
Pre FF to Pre MA	-.084	.333

Analysis of Table 4 indicates that there were no significant correlations between readiness for self-disclosure and facilitative functioning, and manifest anxiety at pre-practicum situation. Nevertheless, pre-practicum self-disclosure readiness appears to be close to a significant and moderate correlation with facilitative functioning at pre-practicum point (probability level = .058).

Null Hypothesis 2: No significant relationships exist for the total sample between readiness for self-disclosure, facilitative functioning, and manifest anxiety at posttest situation.

Table 5 presents the post to post partial correlations.

TABLE 5

POSTTEST PARTIAL CORRELATIONS BETWEEN  
READINESS FOR SELF-DISCLOSURE, FACILITATIVE  
FUNCTIONING, AND MANIFEST ANXIETY

(N = 30)

Variables	Pearson <u>r</u>	Prob. Level
Post SD to Post FF	.117	.273
Post SD to Post MA	-.045	.409
Post FF to Post MA	-.028	.442

Examination of Table 5 indicates that no significant correlations exist between self-disclosure readiness, facilitative functioning, and manifest anxiety at post-practicum.

Null Hypothesis 3: No significant differences exist for the total sample from pretest to posttest situation on readiness for self-disclosure, facilitative functioning, and manifest anxiety.

Table 6 presents the pre to post correlations and t values on readiness for self-disclosure, facilitative functioning, and manifest anxiety.

TABLE 6

PRETEST TO POSTTEST CORRELATIONS AND  
t VALUES ON READINESS FOR SELF-DISCLOSURE,  
FACILITATIVE FUNCTIONING AND MANIFEST  
ANXIETY

(N = 30)

Variables	Pearson <u>r</u>	Prob. Level (two-tail)	<u>t</u> Value	Prob. Level (two-tail)
SD Pre to Post	.870	.000**	-3.44	.002**
FF Pre to Post	.112	.556	-2.45	.020*
MA Pre to Post	.624	.000*	-0.22	.828

\* Significant at the .05 level

\*\* Significant at the .01 level



Examination of Table 6 reveals that the ordering of individual scores is consistent from pre to post on readiness for self-disclosure, and manifest anxiety (Pearson  $r$ ). In other words, one who is high on readiness for self-disclosure or manifest anxiety on pre-practicum can be expected to be about the same (in relation to the total group) on post-practicum. This has not been demonstrated for facilitative functioning. The data showed in Table 6 (Pearson  $r$ ) indicates that facilitative functioning presents variations from pre to post. The  $t$ -Tests indicate that significant pre to post practicum growth occurred on readiness for self-disclosure and facilitative functioning but manifest anxiety showed no significant change from pre to post.

Null Hypothesis 4: No significant relationships exist for the total sample between pretest readiness for self-disclosure and posttest facilitative functioning. \*

The pre self-disclosure to post facilitative functioning partial correlation, manifest anxiety held constant, is showed in Table 7.

TABLE 7

PARTIAL CORRELATION FOR PRETEST SELF-DISCLOSURE READINESS TO POSTTEST FACILITATIVE FUNCTIONING, CONTROLLING FOR PRETEST MANIFEST ANXIETY

(N = 30)

Variables	Pearson <u>r</u>	Prob. Level
Pre SD to Post FF	.115	.276

Table 7 indicates that the correlation between pre-practicum readiness for self-disclosure to post-practicum facilitative functioning is not significant. Thus, the predictive value for pre-practicum self-disclosure readiness in assessing post-practicum facilitative functioning for the total group has not been demonstrated.

#### Results Pertaining to Selected Groups

Also indicated in the section of Chapter 3 outlining the statistical design of the research, the second analysis consisted of correlational methods for the selected groups defined as

those subjects whose scores fell above (high disclosure subjects) or below (low disclosure subjects) the median on pretest self-disclosure readiness.

### High Self-Disclosure Group.

Table 8 presents a descriptive summary of scores on self-disclosure readiness, facilitative functioning, and manifest anxiety for high self disclosure subjects.

TABLE 8

DESCRIPTIVE SUMMARY OF SCORES ON READINESS FOR SELF-DISCLOSURE, FACILITATIVE FUNCTIONING, AND MANIFEST ANXIETY FOR HIGH SELF-DISCLOSURE SUBJECTS

(N = 13)

Ss	PRE POST CHANGE			PRE POST CHANGE			PRE POST CHANGE		
	SD	SD	SD	FF	FF	FF	MA	MA	MA
030	80	80	0	2.1	2.5	.4	6	6	0
003	80	74	-6	1.7	2.2	.5	7	3	-4
029	75	80	5	1.8	2.3	.5	7	9	2
022	73	75	2	1.5	1.6	.1	9	3	-6
006	73	72	-1	1.6	2.8	1.2	8	8	0
018	70	73	3	2.2	1.9	-.3	5	7	2
025	69	73	4	1.9	2.1	.2	11	7	-4
001	69	75	6	1.7	1.4	-.3	15	21	6
028	69	71	2	2.7	2.2	-.5	7	8	1
014	68	77	9	2.5	2.1	-.4	21	31	10
009	65	77	12	2.2	2.0	-.2	13	10	-3
002	65	57	-8	2.5	2.4	-.1	14	18	4
011	64	61	-3	2.4	1.9	-.5	11	12	1
Sum	920	945	25	26.8	27.4	.6	134	143	9
Mean	70.8	72.7	1.9	2.1	2.1	.05	10.3	11	.7
s.d.	5.2	6.7	5.4	.4	.4	.48	4.5	7.9	4.2

Null Hypothesis 5: No significant relationships exist for the high group between readiness for self-disclosure, facilitative functioning, and manifest anxiety at pretest situation.

Partial correlations pertaining to this hypothesis are presented in Table 9.

TABLE 9

PRETEST PARTIAL CORRELATIONS BETWEEN  
SELF-DISCLOSURE READINESS, FACILITATIVE  
FUNCTIONING, AND MANIFEST ANXIETY FOR  
HIGH SELF-DISCLOSURE SUBJECTS

(N = 13)

Variables	Pearson $r$	Prob. Level
Pre SD to Pre FF	-.496	.050*
Pre SD to Pre MA	-.525	.040*
Pre FF to Pre MA	-.053	.436

\* Significant at the .05 level

Results shown in Table 9 indicate that at pre-practicum point facilitative functioning and manifest anxiety are both

closely related to readiness for self-disclosure. In other words, high disclosure subjects tend to be significantly related to their facilitative functioning level and to their level of manifest anxiety.

Null Hypothesis 6: No significant relationships exist for the high group between readiness for self-disclosure, facilitative functioning, and manifest anxiety at posttest situation.

Table 10 shows the post to post partial correlations rating to this hypothesis.

TABLE 10

POSTTEST PARTIAL CORRELATIONS BETWEEN  
SELF-DISCLOSURE READINESS, FACILITATIVE  
FUNCTIONING, AND MANIFEST ANXIETY FOR  
HIGH SELF-DISCLOSURE SUBJECTS

(N = 13)

Variables	Pearson $r$	Prob. Level
Post SD to Post FF	.085	.396
Post SD to Post MA	.158	.315
Post FF to Post MA	.176	.292

Observation of Table 10 indicates that no significant

correlations exist between self-disclosure readiness, facilitative functioning, and manifest anxiety for high self-disclosure subjects at post practicum point.

Null Hypothesis 7: No significant differences exist for the high group from pretest to posttest situation on readiness for self-disclosure, facilitative functioning, and manifest anxiety.

Table 11 shows the pre to post correlations and t values on self-disclosure readiness, facilitative functioning, and manifest anxiety.

TABLE 11

PRETEST TO POSTTEST CORRELATIONS  
AND t VALUES ON READINESS FOR SELF-  
DISCLOSURE FACILITATIVE FUNCTIONING,  
AND MANIFEST ANXIETY FOR HIGH SELF-  
DISCLOSURE SUBJECTS

(N = 13)

Variables	Pearson <u>r</u>	Prob. Level (two-tail)	<u>t</u> -Value	Prob. Level (two-tail)
SD Pre to Post	.581	.037*	-1.23	.242
FF Pre to Post	.130	.673	- .33	.746
MA Pre to Post	.894	.000**	- .57	.581

\* Significant at the .05 level

\*\* Significant at the .01 level

Examination of Table 11 indicates that the ordering of individual scores is consistent from pre to post on self-disclosure readiness and manifest anxiety (Pearson  $r$ ). In other terms, a subject who is high on readiness for self-disclosure or manifest anxiety at pre-practicum can be expected to be about the same, in relation to the high group, on the post-practicum. This has not been demonstrated for facilitative functioning. In other words, it appears that high disclosers did not improve significantly their facilitative functioning ability during the training, even though it was at pre-practicum point at a minimally facilitative level for beginners in training. Observation of  $t$  test results indicates that no significant differences, i.e. growth, were obtained from pre to post on self-disclosure readiness and facilitative functioning for high disclosers; the level of manifest anxiety remained the same for high disclosers from pre to post.

Null Hypothesis 8: No significant relationships exist for the high group between pretest readiness for self-disclosure and posttest facilitative functioning.

Partial correlation for pre-practicum self-disclosure

readiness to post-practicum facilitative functioning, manifest anxiety held constant, is shown in Table 12.

TABLE 12

PARTIAL CORRELATION FOR PRETEST  
SELF-DISCLOSURE READINESS TO POSTTEST  
FACILITATIVE FUNCTIONING, CONTROLLING  
FOR PRETEST MANIFEST ANXIETY, FOR  
HIGH SELF-DISCLOSURE SUBJECTS

( $N = 13$ )

Variables	Pearson $r$	Prob. Level
Pre SD to Post FF	.200	.266

Analysis of Table 12 indicates that the correlation between pre-practicum self-disclosure readiness to post-practicum facilitative functioning is not significant for high disclosers. Stated in other words, this means that there is no predictive value for pre-practicum self-disclosure readiness scores in assessing facilitative functioning for high disclosers at post-practicum situation.



Low Self-Disclosure Group

A descriptive summary of scores on self-disclosure, readiness facilitative functioning, and manifest anxiety for low self-disclosure subjects is presented in Table 13.

TABLE 13

DESCRIPTIVE SUMMARY OF SCORES ON  
READINESS FOR SELF-DISCLOSURE  
FACILITATIVE FUNCTIONING, AND  
MANIFEST ANXIETY FOR LOW SELF-  
DISCLOSURE SUBJECTS

(N = 14)

Ss	PRE POST CHANGE			PRE POST CHANGE			PRE POST CHANGE		
	SD	SD	SD	FF	FF	FF	MA	MA	MA
005	59	73	14	2.5	2.5	.0	4	6	2
012	59	68	9	1.8	2.3	.5	8	21	13
024	58	54	-4	2.1	2.1	.0	22	20	-2
020	57	57	0	2.0	2.2	.2	21	2	-19
004	56	76	20	1.8	2.5	.7	15	15	0
026	56	55	-1	2.2	2.1	-.1	5	5	0
010	51	59	8	1.4	2.1	.7	22	27	5
027	50	53	3	1.6	2.3	.7	17	23	6
016	49	73	24	1.5	1.6	.1	8	11	3
017	46	45	-1	1.4	1.9	.5	15	9	-6
013	38	47	9	1.8	2.8	.0	16	10	-6
007	32	43	11	1.9	2.7	.8	8	4	-4
019	32	38	6	1.2	2.2	1.0	16	17	1
015	19	16	-3	1.8	1.6	-.2	11	10	-1
Sum	662	757	95	25.0	29.9	4.9	188	180	-8
Mean	47.3	54.1	6.8	1.8	2.1	.35	13.4	12.9	-.6
s. d.	12.4	16.1	8.2	.3	.3	.38	5.9	7.5	7.0

Null Hypothesis 9: No significant relationships exist for the low group between readiness for self-disclosure, facilitative functioning, and manifest anxiety at pretest situation.

Pretest to pretest partial correlations on self-disclosure readiness, facilitative functioning, and manifest anxiety are presented in Table 14.

TABLE 14

PRETEST PARTIAL CORRELATIONS BETWEEN  
READINESS FOR SELF-DISCLOSURE, FACILI-  
TATIVE FUNCTIONING, AND MANIFEST  
ANXIETY FOR LOW SELF-DISCLOSURE SUBJECTS

(N = 14)

Variables	Pearson <u>r</u>	Prob. Level
Pre SD to Pre FF	.454	.060
Pre SD to Pre MA	.247	.208
Pre FF to Pre MA	.455	.059

Analysis of Table 14 indicates that at pre-practicum point there were no significant correlations between self-

disclosure readiness, facilitative functioning, and manifest anxiety for the low group. Nevertheless, pre self-disclosure readiness appears to be close to a significant and moderate correlation with facilitative functioning (Probability Level = .06); also pre facilitative functioning is closed to a significant and moderate correlation to pre manifest anxiety (.059) for low disclosers.

Null Hypothesis 10: No significant relationships exist for the low group between self-disclosure, facilitative functioning, and manifest anxiety at posttest situation.

Table 15 presents the posttest to posttest partial correlations between self-disclosure readiness, facilitative functioning, and manifest anxiety.

TABLE 15

POSTTEST PARTIAL CORRELATIONS BETWEEN  
SELF-DISCLOSURE READINESS, FACILITATIVE  
FUNCTIONING, AND MANIFEST ANXIETY FOR  
LOW SELF-DISCLOSURE SUBJECTS

(N = 14)

Variables	Pearson <u>r</u>	Prob. Level
Post SD to Post FF	.360	.113
Post SD to Post MA	.141	.323
Post FF to Post MA	-.057	.426

Examination of Table 15 shows no significant correlations between self-disclosure readiness, facilitative functioning, and manifest anxiety for low disclosers at post-practicum point.

Null Hypothesis 11: No significant differences exist for the low group from pretest to posttest situation on readiness for self-disclosure, facilitative functioning, and manifest anxiety.

Pre to post correlations and t values are shown in Table 16.

TABLE 16

PRETEST TO POSTTEST CORRELATIONS AND  
t VALUES ON SELF-DISCLOSURE READINESS,  
FACILITATIVE FUNCTIONING, AND MANIFEST  
ANXIETY FOR LOW SELF-DISCLOSURE SUBJECTS

(N = 14)

Variables	Pearson <u>r</u>	Prob. Level	<u>t</u> -Value	Prob. Level
SD Pre to Post	.853	.000**	-2.98	.011**
FF Pre to Post	.333	.244	-3.34	.005**
MA Pre to Post	.467	.092	.29	.774

\* Significant at the .05 level

\*\* Significant at the .01 level

Examination of Table 16 indicates that low disclosers present a significant ordering of scores on self-disclosure readiness from pre-practicum to post-practicum situations; in other words, low self-disclosure subjects tend to locate themselves in the same rank in relation to the low group from pre to post. Also, it is observed that no significant ordering of individual scores on facilitative functioning and manifest anxiety is maintained from pre to post (Pearson r). The t-Values

show that there is a significant change on self-disclosure readiness and facilitative functioning from pre to post which means that low disclosure subjects grew significantly in self-disclosure readiness and facilitative functioning during the Practicum; manifest anxiety showed no significant difference from pre-practicum to post-practicum, which indicates that a low disclosure subjects' level of anxiety tended to remain at the same point throughout the Practicum.

Null Hypothesis 12: No significant relationships exist for the low group between pretest readiness for self-disclosure and posttest facilitative functioning.

Partial correlation for pre-practicum self-disclosure readiness to post-practicum facilitative functioning, manifest anxiety held constant, for low disclosers is shown in Table 17.

TABLE 17

PARTIAL CORRELATION FOR PRETEST  
SELF-DISCLOSURE READINESS TO  
POSTTEST FACILITATIVE FUNCTIONING,  
CONTROLLING FOR PRETEST MANIFEST  
ANXIETY, FOR LOW SELF-DISCLOSURE  
SUBJECTS

(N = 14)

Variables	Pearson <u>r</u>	Prob. Level
Pre SD to Post FF	.342	.127

Analysis of Table 17 indicates no significant correlation between pre-practicum self-disclosure readiness and post-practicum facilitative functioning for low self-disclosure subjects. As a result, there is no predictive value for pre-practicum self-disclosure readiness scores in assessing post-practicum facilitative functioning for the low self-disclosure group.

Selected Groups: High versus Low

In order to compare and contrast the high versus low

self-disclosure group, the following hypotheses were tested.

Null Hypothesis 13: No significant differences exist for the high versus low group at pretest situation on readiness for self-disclosure, facilitative functioning, and manifest anxiety.

Table 18 presents pretest to pretest  $t$  values for high versus low disclosers on self-disclosure readiness, facilitative functioning and manifest anxiety at pretest point.

TABLE 18

PRETEST  $t$  VALUES FOR HIGH VERSUS LOW GROUP ON SELF-DISCLOSURE READINESS, FACILITATIVE FUNCTIONING, AND MANIFEST ANXIETY

Variables	<u>n</u>	Mean	Standard Deviation	<u>t</u> -Values
Self Disclosure				
High Group	13	70.8	5.2	6.298*
Low Group	14	47.3	12.4	
Facilitative Functioning				
High Group	13	2.1	.4	1.934
Low Group	14	1.8	.3	
Manifest Anxiety				
High Group	13	10.3	4.5	1.495
Low Group	14	13.4	5.9	

\* Significant at .05 level



Analysis of Table 18 shows that there is a significant difference on self-disclosure readiness scores for high versus low group at pretest point, but this is so because of the way selected groups were set up for the analysis. Examination of facilitative functioning scores for high versus low disclosers at pre-practicum indicates an almost significant difference between them in their level of facilitative functioning. In other words, it appears that high self-disclosure subjects when compared to low disclosers tend to have a somewhat different level of facilitative functioning at the beginning of practicum. It is also noted that there is no significant difference on manifest anxiety scores for high versus low disclosers at pre practicum point, although the low group was somewhat higher on manifest anxiety.

Null Hypothesis 14: No significant differences exist for the high versus low group at posttest situation on readiness for self-disclosure, facilitative functioning, and manifest anxiety.

Posttest  $t$  values for high versus low disclosers on self-disclosure readiness, facilitative functioning, and manifest

anxiety are shown in Table 19.

TABLE 19

POSTTEST  $t$  VALUES FOR HIGH VERSUS  
LOW GROUP ON SELF-DISCLOSURE  
READINESS, FACILITATIVE FUNCTION-  
ING AND MANIFEST ANXIETY

Variables	<u>n</u>	Mean	Standard Deviation	<u>t</u> -Values
Self-Disclosure				
High Group	13	72.7	6.7	3.855*
Low Group	14	54.1	16.1	
Facilitative Functioning				
High Group	13	2.1	.4	.120
Low Group	14	2.1	.3	
Manifest Anxiety				
High Group	13	11.0	7.9	.614
Low Group	14	12.9	7.5	

\* Significant at .05 level

Table 19 indicates that there is a significant difference on self-disclosure readiness for high disclosers versus low disclosers at posttest. In other words, high disclosers maintained a higher level of self-disclosure readiness than low

disclosers at posttest point.

No significant differences on facilitative functioning and manifest anxiety are found between high and low disclosers at post-practicum point.

Null Hypothesis 15: No significant differences exist for the high versus low group between readiness for self-disclosure, facilitative functioning, and manifest anxiety from pretest to posttest.

Table 20 contains pretest to posttest  $t$  values for high versus low disclosers on self-disclosure readiness, facilitative functioning, and manifest anxiety, based on change scores for each variable (see Table 8, page 112 and Table 13, page 118).

TABLE 20

PRETEST TO POSTTEST  $t$ -VALUES FOR  
HIGH GROUP VERSUS LOW GROUP ON  
SELF-DISCLOSURE READINESS, FACILI-  
TATIVE FUNCTIONING, AND MANIFEST  
ANXIETY

Variables	<u>n</u>	Mean Change	Standard Deviation	<u>t</u> -Values
Self-Disclosure				
High Group	13	1.9	5.4	-1.743*
Low Group	14	6.8	8.2	
Facilitative Functioning				
High Group	13	.05	.48	-9.987**
Low Group	14	.35	.38	
Manifest Anxiety				
High Group	13	.7	4.2	.279
Low Group	14	-.57	7.0	

\* Significant at the .05 level

\*\* Significant at the .01 level

Table 20 reveals that there are significant differences in self-disclosure readiness ( $t = -1.743$ ) and facilitative functioning ( $t = -9.987$ ) for high versus low disclosers from pre to post-practicum.

Low disclosers grew more in openness, became more transparent (change mean = 6.8), whereas high disclosers tended to maintain their high level of self-disclosure readiness (change mean = 1.9) from pre to post-practicum. From the data shown in Table 20 it appears that the Practicum helped significantly low disclosers to become more transparent and had no deterioration effects on self-disclosure readiness for high disclosers.

Low disclosers showed a higher level of growth in facilitation (change mean = .35) than high disclosers (change mean = .05). In fact, the low group reached the same facilitative functioning level of high disclosers (see Table 8, page 112 and Table 13, page 118). High disclosers did not improve significantly their functioning ability during training, even though it was at pre-practicum point at a minimally facilitative level for beginners in training. In other words, the Practicum fostered low disclosers' ability of facilitative functioning and had no deterrent effects on high disclosers' level of functioning.

Finally, Table 20 shows that both groups, high and low, did not differ significantly on manifest anxiety change ( $t = .279$ ) from pre to post-practicum. Both groups maintained almost their same level of anxiety during training. The level of manifest anxiety for high and low group was found within the normal range indicated by Taylor (mean for normal groups = 15; see Table 3, page 108, Table 8, page 112, and Table 13, page 118). From this analysis it is possible to infer that the Practicum was a sensitive supervision, which kept away counselor-trainees from a non-facilitative level of anxiety. Also, it seems that practicum supervisors were able to touch accurately on the meaning of trainee's anxiety and by the same token trainees were able to maintain a stable relationship with supervisors and clients.

### Summary of Results

The statistical analysis for the total sample and selected groups showed that:

1. At pre-practicum point no significant correlations

were found for the total sample of this research between readiness for self-disclosure and facilitative functioning ( $\underline{r} = .299$ ) and manifest anxiety ( $\underline{r} = .234$ ). Nevertheless, pre-practicum self-disclosure readiness appeared to be close to a significant and moderate correlation with facilitative functioning at pre-practicum situation ( $\underline{r} = .299$ , probability level = .058).

High group disclosers indicate a somewhat higher relationship between their facilitative functioning level ( $\underline{r} = .496$ , significant at the .05 level) and to their normal level of manifest anxiety ( $\underline{r} = .525$ , significant at the .05 level). Low group disclosers showed no significant correlations between self-disclosure readiness and facilitation ( $\underline{r} = .454$ ) and level of manifest anxiety ( $\underline{r} = .247$ ), but pre-practicum lows' self-disclosure readiness was close to a significant and moderate correlation\* with their facilitative functioning ( $\underline{r} = .454$ , probability level = .060).

2. At post-practicum point the total sample and the selected groups showed no significant relationships between

self-disclosure readiness and facilitative functioning and manifest anxiety.

3. From pre-practicum point to post-practicum point the ordering of individual scores, for the total sample, on self-disclosure readiness ( $r = .870$ , probability level  $.000$ ) and manifest anxiety ( $r = .624$ , probability level  $.000$ ) was consistent from pre to post, i.e., one who is high on readiness for self-disclosure or manifest anxiety on pre-practicum can be expected to be about the same, in relation to the total group, on post-practicum. This has not been demonstrated for facilitative functioning ( $r = .112$ ). In other words, facilitative functioning presented variations from pre to post. The  $t$  Tests indicated that significant pre to post practicum growth occurred on readiness for self-disclosure ( $t = -3.44$ , probability level  $= .002$ ) and facilitative functioning slightly improved ( $t = -2.45$ , probability level  $= .020$ ), but manifest anxiety showed no significant change from pre to post ( $t = -0.22$ ).

High group ordering of individual scores was consistent



from pre to post on self-disclosure readiness ( $\underline{r} = .581$ , probability level = .037) and manifest anxiety ( $\underline{r} = .894$ , probability level = .000). In other terms, a subject who is high on readiness for self-disclosure or manifest anxiety at pre-practicum can be expected to be about the same, in relation to the high group, on the post-practicum. This has not been demonstrated for facilitative functioning ( $\underline{r} = .130$ ); in other words, it appears that high disclosers did not improve significantly their facilitation during the training, eventhough it was at pre-practicum point at a minimally facilitative level for beginners in training. The  $\underline{t}$  Test results indicated that no significant growth for high disclosers was obtained from pre to post on self-disclosure readiness ( $\underline{t} = -1.23$ ) and facilitative functioning ( $\underline{t} = -.33$ ); the level of manifest anxiety remained the same for high disclosers from pre to post ( $\underline{t} = -.57$ ).

Low group disclosers presented a significant ordering of scores on self-disclosure readiness from pre to post-practicum; in other words, low disclosure subjects tend to locate themselves in the same rank in relation to the low

group from pre to post ( $r = .853$ , probability level = .000). Also it was observed that no significant ordering of individual scores on facilitation ( $r = .333$ , probability level = .244) and manifest anxiety ( $r = .467$ , probability level = .092) is maintained from pre to post. The  $t$  Values showed that there is a significant difference, growth, on self-disclosure ( $t = -2.98$ , probability level .011) and facilitation ( $t = -3.44$ , probability level = .005) from pre to post-practicum. Manifest anxiety showed no significant difference from pre to post, which indicates that low disclosers' level of anxiety tended to remain at the same point throughout the training.

4. Pretest self-disclosure readiness to posttest facilitative functioning relationship, manifest anxiety held constant, was not significant for the total sample ( $r = .115$ , probability level = .276) nor for the selected groups (high group  $r = .200$ , probability level .266; low group  $r = .342$ , probability level .127). As a consequence, it is possible to declare that the predictive value of pre-practicum self-disclosure readiness in assessing post-practicum facilitative

functioning was not demonstrated in this study.

5. Comparisons of high group versus low group from pre to post-practicum showed that there are significant differences on change, growth, in self-disclosure readiness ( $t = -1.743$ , significant at the .05 level) and facilitative functioning ( $t = -9.987$ , significant at the .05 level). Low disclosers grew more in openness ( $X = 6.8$ ) where as high disclosers tended to remain at their same high rank of self-disclosure ( $X = 1.9$ ). Low disclosers showed a higher level of growth in facilitation ( $X = .35$ ) than high disclosers ( $X = .05$ ). Both groups, high and low, did not differ significantly on manifest anxiety change ( $t = .279$ ). Both groups maintained their low normal level of manifest anxiety throughout the training.

## CHAPTER V

### SUMMARY, CONCLUSIONS, LIMITATIONS, AND RECOMMENDATIONS

#### Summary

##### Problem

The importance of counselor characteristics in relation to counseling outcome has long been recognized. The majority of writers on the field agree that counselor's personality is a crucial variable to facilitative functioning. However, there is less agreement when categorizing specific characteristics considered as "necessary and sufficient" for successful therapy.

There is some evidence which suggests that "high-order" personality traits drawn from a theoretical understanding of the demands posed by the helping relationship, and from the identification of the components of counseling effectiveness, e.g., cognitive flexibility, psychological openness, empathy, genuineness, congruency, positive regard, are necessary conditions for successful therapy. The evidence shown by several research studies have not only revealed the importance of counselor

personality traits, but also indicates the need for a continuing search for other counselor "high-order" traits of equally significant dimensions.

Fairly recent attention has shifted from counselee self-disclosure toward the value of counselor self-disclosure and its relationships to counseling effectiveness. Self-disclosure of the client has generally been recognized as an important factor in personality change, but until quite recently, little consideration had been given to counselor self-disclosure as a "high-order" trait. Counselor self-disclosure is defined as the ability to communicate, verbally or behaviorly, to clients feelings of anger, affection, fear, doubts or any emotions being experienced in the counseling relationship.

In general, all of the review of related counseling literature on self-disclosure points to evidence that counselor self-disclosure is a high-order personality trait as it relates to successful therapy outcome, to positive client change, and to personality characteristics of successful counselors. Moreover, the literature clearly points out that counselor readiness and

spontaneity for self-disclosure, does not mean that the counselor eliminates the use of techniques, diagnoses, judgments, but rather that he is free enough to think and feel aloud and truly express himself to his counselee.

Investigation of counseling literature related to this research leads to the conclusion that there is comparatively little research on counselor's readiness for self-disclosure, especially concerning its possible predictive value in relation to facilitative functioning. It is the light of this lack of research regarding counselor readiness for self-disclosure that this present study has been offered.

### Purpose

The purpose of this research was to assess the relationships between counselor-trainee's readiness to be disclosing his authentic life and his measured levels of facilitative functioning and manifest anxiety before and after practicum. It was hypothesized that the counselor-trainee's readiness for self-disclosure would be correlated with his level of facilitative

functioning, and also related to a normal level of manifest anxiety. Moreover, it was hoped that a determination of these relationships might prove useful in predicting facilitation and in the development of criteria for selecting and training of prospective professional counselors.

The following null hypotheses were tested for the total sample and/or the selected groups.

For the total sample:

1. No significant relationships exist for the total sample between readiness for self-disclosure, facilitative functioning, and manifest anxiety at pretest situation.
2. No significant relationships exist for the total sample between readiness for self-disclosure, facilitative functioning, and manifest anxiety at posttest situation.
3. No significant differences exist for the total sample from pretest to posttest situation on readiness for self-disclosure, facilitative functioning, and manifest anxiety.

4. No significant relationships exist for the total sample between pretest readiness for self-disclosure and posttest facilitative functioning.

For the selected groups:

5. No significant relationships exist for the high group between readiness for self-disclosure, facilitative functioning, and manifest anxiety at pretest situation.

6. No significant relationships exist for the high group between readiness for self-disclosure, facilitative functioning, and manifest anxiety at posttest situation.

7. No significant differences exist for the high group from pretest to posttest on readiness for self-disclosure, facilitative functioning, and manifest anxiety.

8. No significant relationships exist for the high group between pretest readiness for self-disclosure and posttest facilitative functioning.

9. No significant relationships exist for the low group



between readiness for self-disclosure, facilitative functioning, and manifest anxiety at pretest situation.

10. No significant relationships exist for the low group between readiness for self-disclosure, facilitative functioning, and manifest anxiety at posttest situation.

11. No significant differences exist for the low group from pretest to posttest on readiness for self-disclosure, facilitative functioning, and manifest anxiety.

12. No significant relationships exist for the low group between pretest readiness for self-disclosure and posttest facilitative functioning.

13. No significant differences exist for the high versus low group at pretest situation on readiness for self-disclosure, facilitative functioning, and manifest anxiety.

14. No significant differences exist for the high versus low group at posttest situation on readiness for self-disclosure, facilitative functioning, and manifest anxiety.

15. No significant differences exist for the high versus low group between readiness for self-disclosure, facilitative functioning, and manifest anxiety from pretest to posttest.

### Procedure

The subjects of this experimental research were thirty graduate students enrolled in the course Practicum in Guidance and Counseling, Guidance 495, Department of Guidance and Counseling, during the Summer session of 1972 at Loyola University of Chicago.

For purposes of this research the trainees interviewed coached clients. Clients were asked to sign up for two interviews and they were assigned to counselor-trainees on a random basis so that no one individual were interviewed twice by the same counselor-trainee.

Three instruments were used to obtain data deemed essential to the research: the Jourard Questionnaire for High versus Low Disclosers (JSDQ), the Carkhuff Scale of Gross Ratings of Facilitative Interpersonal Functioning (CSGR), and

the Taylor Manifest Anxiety Scale (TMAS).

On the first day of the six week Summer session 1972, the JSDQ for High versus Low Disclosers and the TMAS were administered by the researcher to the thirty subjects. Also, on the very same day, every counselor-trainee recorded a ten minute counseling analogue interview with a coached client.

During the last day of Summer session 1972 the subjects re-took the JSDQ and the TMAS. Also, the same day, each one of the subjects made another taped interview lasting ten minutes with another coached client. The very same instructions which were given to clients in the pretest interview existed for the posttest tape. The Carkhuff Scale of Gross Ratings of Facilitative Interpersonal Functioning was used by three independent judges to rate the pre and post-practicum ten minute interview with coached clients taped by the counselor-trainees.

All counselor-trainees (Ss) were exposed to the same range of experiences as far as group processes, group meetings, video-taping, listening exercises, role-playing, listening to tapes

of counseling by professionals or "learned others," and above all individual counseling experience.

Statistical procedures included Pearson  $r$ , partial correlation  $r$ , and  $t$ -test for both correlated and uncorrelated samples. For purposes of analysis subjects (Ss) were examined in two ways. One, as a total group of 30 subjects, to assess characteristics and make pre and post-practicum comparisons. Two, they were divided into two groups, those whose scores fell above the median (high disclosure group) or below the median (low disclosure group) on the self-disclosure pretest. The same statistical analysis was then applied to selected groups, and also, comparisons were made between these groups.

### Summary of Results

The statistical analysis for the total population and selected groups showed that:

1. At pretest point no significant correlations were found for the total group between readiness for self-disclosure

and facilitative functioning and manifest anxiety. Nevertheless, high disclosers indicated a somewhat higher relationship between their facilitative functioning level and to their normal level of manifest anxiety. Low disclosers showed no significant correlations between self-disclosure readiness and facilitation and normal level of manifest anxiety, but pretest lows' self-disclosure readiness was close to a significant and moderate correlation with their facilitative functioning.

2. At posttest point the total sample and the selected groups showed no significant relationships between self-disclosure readiness and facilitative functioning and manifest anxiety.

3. From pre-practicum point to post-practicum point levels of self-disclosure readiness for all subjects within the total sample did not change significantly. High disclosers did not improve significantly their level of self-disclosure readiness but low disclosers did, even though low disclosers' level of disclosure remained lower than highs'.

Facilitative functioning was found to be slightly

improved for the total sample from pre to post-practicum. High disclosers did not increase their functioning from pre to post, but low disclosers reached a significant growth in facilitation from pre to post-practicum; in fact, they attained the same functioning level high disclosers had at the end of training.

Manifest anxiety showed no significant change for the total sample and selected groups from pre to post-practicum; it remained within the normal low limits stated by Taylor.

4. Pretest self-disclosure readiness to posttest facilitative functioning relationships, manifest anxiety held constant, were not significant for the total sample nor for the selected groups. As a result, it is possible to state that pretest self-disclosure readiness showed no predictive value in assessing post-practicum facilitative functioning for the subjects of this research.

5. Comparisons for high group versus low group from pre-practicum to post-practicum showed that there were significant differences on change, growth, in openness and

facilitation. Low disclosers grew more in self-disclosure, high disclosers remained at their same high level of self-disclosure. Low disclosers showed a higher level of growth in facilitative functioning than high disclosers. Both groups, high and low, did not differ significantly on manifest anxiety change; in fact, both groups maintained their low normal level of manifest anxiety throughout the training.

#### Conclusions, Limitations, and Recommendations

The conclusions and recommendations which appear reasonable as a result of this investigation are presented in this section; however, further studies are required before generalization may be made beyond the limits set by this research.

#### Conclusions

It has been indicated in the introduction of this study that level of readiness for self-disclosure might prove to be a "high-order" personality variable closely related to counseling

effectiveness. The study has attempted to examine the relationships between readiness for self-disclosure, level of facilitative functioning, and level of manifest anxiety in a pre and post-practicum design. Within the limitations of this particular effort, the following conclusions seem justified:

1. Counselor-trainees, as represented by this particular total sample, tend to enter practicum with a relatively high level of readiness for self-disclosure ( $X = 58.7$  out of 80), a somewhat less than average level of facilitative functioning ( $X = 1.9$ ; average level = 3.0) and a rather low level of manifest anxiety ( $X = 11.6$ ; average level = 15). At the end of practicum self-disclosure and facilitative functioning had increased significantly, while manifest anxiety remained constant (see  $t$  values in Table 6, page 109). Pretest level of self-disclosure was not significantly related to posttest level of facilitative functioning. Therefore, it appears that, while self-disclosure and facilitative functioning are closely related, pretest measures of self-disclosure as gathered in this study (see Table 4, page 107), would not serve as an effective predictor of counseling effectiveness at the end of training (see Table 7, page 111). However, analysis of selected



groups allows for further tentative conclusions.

2. The high group's ordering of individual scores was consistent from pre-practicum to post-practicum on self-disclosure and manifest anxiety, but not for facilitative functioning (see Table 11, page 115). In other words, one's self-disclosure or manifest anxiety score could be expected to be about the same in relation to the group on both pre and posttest, while this could not be expected for facilitative functioning. The t Test analyses revealed no significant differences for high disclosers on self-disclosure, facilitative functioning, or manifest anxiety. The low group revealed significant ordering of scores only on self-disclosure and t test results indicated growth in both self-disclosure and facilitative functioning, with no change in manifest anxiety (see Table 16, page 122).

When compared low disclosers to high disclosers from pre to post-practicum, low disclosers showed a significant growth in openness whereas high disclosers tended to maintain their high level of openness (see Table 20, page 129). In fact, at post-practicum point low disclosers were significantly different to high disclosers on openness (see Table 19, page 127). An implication

drawn from these findings suggests that it would be valuable to have had subjects divided, at the beginning of practicum, into training groups according to their self-disclosure level and investigate if this group structure might bring forth significantly different results for the high disclosure group, which appeared to be the least benefited, and the low disclosure group, which showed to be the most benefited, on openness and facilitative functioning by the practicum. Also, this suggested group structure could shed more light on relationships between self-disclosure, facilitative functioning, and manifest anxiety for high and low disclosers when trained as separated groups.

The comparison of pre-practicum self-disclosure to post-practicum facilitative functioning indicated no significant differences for either "highs" or "lows", but the probability level for the "lows" was encouraging, .127, (see Table 17, page 124). The indication is that pretest level of self-disclosure might bear some significant relationship to posttest level of facilitative functioning for those subjects who had lower initial levels of self-disclosure on the Jourard scale, rather than for those who had higher initial levels of self-disclosure. A possible conclusion is

that the premises and hypotheses of this study are valid, but some of the instruments used did not accurately measure the criteria.

3. It appears to the writer that the paper and pencil Jourard scale isolates a certain type of readiness for self-disclosure which still may be shown to be related to level of facilitative functioning. However, this was not shown in this study. It seems, perhaps, that this self-disclosure test may be indicative of potential growth in facilitative functioning; in other words, a self-disclosure score might be used for prediction, but only in terms of low to moderate scores indicating potential for better functioning in future.

4. Finally, Subjects of this research were required to function in a self-disclosing group as part of their training. Thus, response to the Jourard Self-Disclosure Questionnaire at pre and post-practicum points may be spuriously high. As a consequence, it would have been valuable to have used other instruments and techniques in appraising counselor self-disclosure and have compared results, in order to measure more accurately

subjects' level of openness at the beginning and end of training.

### Limitations and Recommendations

1. Validity studies of self-rated personality tests, such as the ones used in this research, are generally inconclusive. Only single instruments were used for this investigation in assessing self-disclosure, facilitative functioning, and manifest anxiety, while it would have been helpful and even valuable to have used other instruments which measure the same variables.

2. While investigation of relationships between self-disclosure and facilitative functioning and manifest anxiety was done twice, at pre-practicum and post practicum, for the total group it would be helpful for comparative purposes to have had a "developmental" investigation of relationships of these variables throughout the Practicum. It may prove helpful in providing verification of the findings\* shown by this study. This would necessitate extending the time period of the study.

3. Since the "range" of manifest anxiety was found relatively small within the normal limits for the total population, possibly use of some more accurate measure of anxiety than a

paper-and-pencil test will prove to be a more useful device to discriminate counselor anxiety, e.g. video tape with some type of analysis of non-verbal behavior.

4. The population used in this study was a highly selective nature, having been selected for the Practicum in Guidance and Counseling, Guidance 495, after completion of academic course work, which provides a natural and normal screening of counselor-trainee candidates. The use of "beginners" in the program for comparative purposes may prove helpful by providing verification of both the test instruments and the predictions made by this research.

5. Even though the analysis of selected groups provided clearer results, it is suggested that selection of groups based on a larger sample will help to further isolate the relationships between high or low self-disclosure and facilitative functioning and manifest anxiety. Should the same relationships be obtained, the findings could then be generalized to larger populations of counselor-trainees.

6. Because of the small size of the sample and local

nature of the research it would be difficult to generalize the results obtained by this investigation to other populations of counselor-trainees. The study should be replicated with greater number of subjects at various other universities using the same and different instruments to measure relationships of functioning and manifest anxiety with self-disclosure readiness, and preferably over a longer training period. Should the same results be obtained, the findings could then be generalized to a greater population.

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## APPENDIX A

## APPENDIX A

### STUDY IN SELF-DISCLOSURE

(JSDQ)

Your name \_\_\_\_\_ Social Security No. \_\_\_\_\_

Classification \_\_\_\_\_ Age \_\_\_\_\_

Years of Teaching and/or Counseling experience \_\_\_\_\_

Telephone number where you may be reached \_\_\_\_\_  
-----

#### Instructions

People differ in the extent to which they let other people know them. We are seeking to investigate what people tell others about themselves.

1. Attached there is a list of 40 topics that pertain to you. Read the topics carefully and check those topics that you have disclosed fully to somebody in your life. If there is nobody to whom you have fully revealed that aspect of your life, leave that space blank.

2. After you have completed the above procedure, turn

the page where the same 40 topics are listed. Check the topics you would be willing to discuss fully with a partner, who would be an unknown person of your own age, sex, and peer group. If you would be reluctant for any reason to discuss a topic fully, leave that space blank.

Topics (listed on each of two separate pages)

In the space provided at the left, check those topics on which you have disclosed yourself fully to somebody (or would be willing to with a strange partner).

- \_\_\_ 1. The different kinds of play and recreation I enjoy.
- \_\_\_ 2. My smoking habits.
- \_\_\_ 3. The best friendship I ever had.
- \_\_\_ 4. The religious denomination to which I belong.
- \_\_\_ 5. The number of children I want to have after I am married.
- \_\_\_ 6. Bad habits my mother or father have.
- \_\_\_ 7. Times I have felt lonely.
- \_\_\_ 8. The things in my past or present life about which I am most ashamed.
- \_\_\_ 9. What I am most afraid of.
- \_\_\_ 10. What annoys me most in people.
- \_\_\_ 11. Time I have been in the hospital.
- \_\_\_ 12. How satisfied I am with different parts of my body - legs, waist, weight, chest, etc.
- \_\_\_ 13. How often I usually go on dates.
- \_\_\_ 14. The description of a person with whom I have been or am in love.

- \_\_\_ 15. How I would feel about marrying a person of a different religion.
  - \_\_\_ 16. Whether or not I want to travel and see the country.
  - \_\_\_ 17. Radio and television programs that interest me.
  - \_\_\_ 18. What I dislike about making new friends.
  - \_\_\_ 19. My feelings about people who try to impress me with their knowledge.
  - \_\_\_ 20. What I daydream about.
  - \_\_\_ 21. Good times I had in school.
  - \_\_\_ 22. My school grades.
  - \_\_\_ 23. How much I care about what others think of me.
  - \_\_\_ 24. How often I have had sexual relations in my life.
  - \_\_\_ 25. The kind of person with whom I would like to have sexual experiences.
  - \_\_\_ 26. Why some people dislike me.
  - \_\_\_ 27. Whether I like doing things alone or in group.
  - \_\_\_ 28. My opinions about how capable and smart I am compared to others around me.
  - \_\_\_ 29. Places where I have worked.
  - \_\_\_ 30. How I budget my money -the proportion that goes for necessities, luxuries, etc.
  - \_\_\_ 31. What would bother me, if anything, about making a speech or giving a talk.
  - \_\_\_ 32. How important I think sex will be in making my marriage a good one.
  - \_\_\_ 33. Things I liked about my home life.
  - \_\_\_ 34. Where my parents and grandparents came from.
  - \_\_\_ 35. Feelings about my adequacy in sexual behavior -my ability to perform adequately in sexual relationships.
  - \_\_\_ 36. My opinion on marrying for money.
  - \_\_\_ 37. Whether or not I think the federal government should support persons who cannot find work.
  - \_\_\_ 38. How I feel about girls' new fashions styles.
  - \_\_\_ 39. Whom I most admire.
  - \_\_\_ 40. The aspects of my personality that I dislike, worry about, or regard as a handicap to me.
- - - - -

## APPENDIX B



## APPENDIX B

### CARKHUFF'S SCALE OF GROSS RATING OF FACILITATIVE INTERPERSONAL FUNCTIONING

1.0    1.5	2.0    2.5	3.0    3.5	4.0    4.5	5.0
None of the core conditions are communicated to any noticeable degree in the person.	Some of the conditions are communicated and some are not.	All of the conditions are communicated at a minimally facilitative level.	All of the conditions are communicated and some are communicated fully.	All of the conditions are fully communicated simultaneously and continually.

N. B.    The core conditions or the dimensions of human nourishment are empathy, understanding, possitive regard, genuineness, concreteness or specificity in expression.

## APPENDIX C

## APPENDIX C

### BIOGRAPHICAL INVENTORY

(TMAS)

Your name \_\_\_\_\_  
Social Security Number \_\_\_\_\_ Age \_\_\_\_\_ Sex \_\_\_\_\_  
Years of teaching and/or counseling experience \_\_\_\_\_  
Telephone number where you may be reached \_\_\_\_\_  
-----

#### Instructions

You have been given a list of 50 statements for personal information about yourself. Read each statement carefully and draw a circle around T (TRUE) if the statement applies to you, or draw a circle around F (FALSE) if the statement does not apply to you.

- |   |   |      |  |
|---|---|------|--|
| T | F | ( 1) | I do not tire quickly.   |
| T | F | ( 2) | I am often sick to my stomach.                                 |
| T | F | ( 3) | I am about as nervous as other people.                         |
| T | F | ( 4) | I have very few headaches.                                     |
| T | F | ( 5) | I work under a great deal of strain.                           |
| T | F | ( 6) | I cannot keep my mind on one thing.                            |
| T | F | ( 7) | I worry over money and business.                               |
| T | F | ( 8) | I frequently notice my hand shakes when I try to do something. |
| T | F | ( 9) | I blush as often as others.                                    |
| T | F | (10) | I have diarrhea ("the runs") once a month or more.             |
| T | F | (11) | I worry quite a bit over possible troubles.                    |
| T | F | (12) | I practically never blush.                                     |
| T | F | (13) | I am often afraid that I am going to blush.                    |
| T | F | (14) | I have nightmares every few nights.                            |
| T | F | (15) | My hands and feet are usually warm enough.                     |

- T F (16) I sweat very easily even on cool days.
- T F (17) When embarrassed I often break out in a sweat which is very annoying.
- T F (18) I do not often notice my heart pounding and I am seldom short of breath.
- T F (19) I feel hungry almost all the time.
- T F (20) Often my bowels don't move for several days at a time.
- T F (21) I have a great deal of stomach trouble.
- T F (22) At times I lose sleep over worry.
- T F (23) My sleep is restless and disturbed.
- T F (24) I often dream about things I don't like to tell other people.
- T F (25) I am easily embarrassed.
- T F (26) My feelings are hurt easier than most people.
- T F (27) I often find myself worrying about something.
- T F (28) I wish I could be as happy as others.
- T F (29) I am usually calm and not easily upset.
- T F (30) I cry easily.
- T F (31) I feel anxious about something or someone, almost all the time.
- T F (32) I am happy most of the time.
- T F (33) It makes me nervous to have to wait.
- T F (34) At times I am so restless that I cannot sit in a chair for very long.
- T F (35) Sometimes I become so excited that I find it hard to get to sleep.
- T F (36) I have often felt that I faced so many difficulties I could not overcome them.
- T F (37) At times I have been worried beyond reason about something that really did not matter.
- T F (38) I do not have as many fears as my friends.
- T F (39) I have been afraid of things or people that I know could not hurt me.
- T F (40) I certainly feel useless at times.
- T F (41) I find it hard to keep my mind on a task or job.
- T F (42) I am more self-conscious than most people.
- T F (43) I am the kind of person who takes things hard.

- T F (44) I am a very nervous person.  
T F (45) Life is often a strain for me.  
T F (46) At times I think I am no good at all.  
T F (47) I am not at all confident of myself.  
T F (48) At times I feel that I am going to crack up.  
T F (49) I don't like to face a difficulty or make an  
important decision.  
T F (50) I am very confident of myself.
-

## APPENDIX D

## APPENDIX D

### INSTRUCTIONS

We are seeking to investigate counselor's facilitative functioning level. You have been selected for this research which will be conducted the first and last day of Summer Session 1972 at Loyola University of Chicago, School of Education.

You are given two questionnaires which you should answer when indicated. Please read instructions carefully. Also, you are asked to have a ten minute counseling interview with a client. The interview will be recorded. Time and place for this interview will be assigned to you by your instructor.

Thanks for your cooperation.

## APPROVAL SHEET

The dissertation submitted by Ezequiel Nieto-Cardoso has been read and approved by the following Committee:

Dr. Manuel S. Silverman, Chairman  
Associate Professor of Guidance and Counseling

Dr. John A. Wellington  
Professor and Chairman of Guidance and Counseling

Dr. Michael J. O'Brien  
Professor of Psychology

The final copies have been examined by the director of the dissertation and the signature which appears below verifies the fact that any necessary changes have been incorporated and that the dissertation is now given final approval by the Committee with reference to content and form.

The dissertation is therefore accepted in partial fulfillment of the requirements for the degree of Doctor of Philosophy.

12-19-74  
Date

Manuel S. Silverman  
Director's Signature