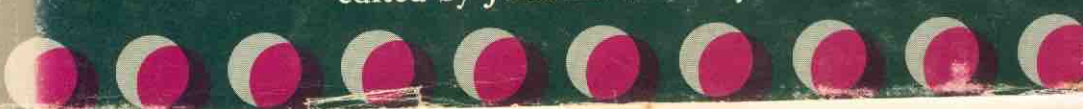




Research in Counseling

John M. Whiteley



A publication in the Merrill Explorations in Counseling Series,
edited by John M. Whiteley

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RESEARCH IN COUNSELING:

Evaluation and Refocus

Edited by

JOHN M. WHITELEY
WASHINGTON UNIVERSITY

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DEDICATION

To Shirley and Gregory Taylor

Preface

Leaders in counseling and education are continually searching for new methods of improving everyday counseling practices. The theoretical and empirical knowledge in counseling is often not pertinent to existing problems and situations, or becomes distorted in translation from research to practice. A greater emphasis must be placed on the types of research which will provide solutions for the kinds of problems counselors and educators must cope with daily. Theoretical and empirical data is valueless to the counselor if he cannot institute significant and meaningful changes in his approaches to counseling.

This book is the result of an awareness of these existing conditions in counseling. It is a concentrated effort by prominent counselors and researchers to alter these conditions. They clearly and concisely evaluate the research literature for the benefit of counselors and counseling students. Their major objective, however, is the delineation of three important areas of counseling: selection of counselors, selection of clients, and assessment of counseling outcomes. They concentrate on defining and improving these areas in an attempt to develop a structure within which counselors and educators may function more successfully in their roles with clients.

Research and theoretical frameworks for future studies are important. It is significant that this book suggests major dimensions for future research, and the refocusing of counseling efforts. It is the contention, however, that there is a flagrant proliferation of research literature which is irrelevant and distorted. This book stresses well founded research with meaningful relevance to counseling practices.

Part I considers the value of a careful assessment and appraisal of each client in advance of actual counseling. It is time to consider which method of treatment may be more appropriate in a particular case, or series of cases. The significance of focusing attention on improving client selection is apparent. The counselor with more information about his client is in a position of adapting his counseling techniques for the benefit of that client.

Presently, little in counselor selection research has related a specific rationale for particular traits to a theory of counseling, except in the most general terms. It is fruitless to continue such a vague line of inquiry. Certain human qualities

may well be relevant to counseling. However, the extent to which these qualities are really important and differentiating remains an open and an empirical question. Part II provides suggestions for the answers to these questions regarding improved counselor selection.

In assessing counseling outcome, research which demonstrates a positive effect for counseling remains the exception rather than the rule. Even theoretical structures from which outcomes of counseling may be accurately derived have not been sufficiently explicated. Nor has much progress been made in relating desired outcome criteria specifically to goals of counseling for any particular client. Additional information and suggestions for improving the measurement of counseling outcome is provided in Part III.

By approaching these three areas and undertaking a systematic evaluation of their salient features and existing fundamentals this book has been able to suggest amendments and improvements for much that is traditional in counseling. All dimensions of counseling and related fields should be augmented by such dynamic and progressive contributions.

In editing this book, I have had come to mind Gray's remark to Horace Walpole that "any fool may write a most valuable book by chance, if he will only tell us what he heard and saw with veracity." The same seems true for editors! This editor has felt that he would serve those who wrote major contributions, the discussants, and the drafters of specific recommendations (and, indeed, the reader) best by presenting the work with as little editing as possible, consistent with integration in the collection. What follows is their work.

J.M.W.

St. Louis, Missouri
1968

Acknowledgments

A collection of original contributions to any scientific endeavor is necessarily the product of the sustained effort of a number of individuals, without whose contribution final publication would not have been possible. This is particularly true when the contributions were developed for presentation at a conference of leading researchers in a field. The acknowledgments section provides a grateful conference director and proceedings editor with an opportunity of expressing his appreciation to those individuals.

The initial idea for the conference developed from discussions with several colleagues, most notably Norman Sprinthall and Ralph Mosher of Harvard University, Thomas W. Allen of Washington University, and Wade M. Robinson of the Central Midwest Regional Educational Laboratory.

As the conference began to take shape, an advisory committee was formed composed of: Thomas W. Allen and Martin J. Bohn, Jr. of Washington University; Robert Callis of the University of Missouri, Columbia; Lawrence Taliana of Southern Illinois University, Edwardsville; Frank Stallings of the University of Louisville; and Frank Noble of George Peabody College. They were of invaluable assistance in selecting participants, speakers, and discussants, and in planning the conference format.

The conference itself was held at the Washington University conference center, Bromwoods, located in Lonedell, Missouri. Several individuals were of major assistance in administrative details: Malcom Van Dursen and Marie Pryor of University College, and Barbara Schade of the Office of Student Services.

Throughout the conference, recorders were at work to provide tape recordings of the various sessions and task groups. For this service we are indebted to: Patricia Howell, Ann Godley, Carole Price, Hazel Sprandel, Rita Kragler, Phil Miller, and William Whitney.

When the conference itself was over, work was just beginning for those who drafted the task group reports and those providing clerical assistance in the preparation of the final report of proceedings. Task group reports were drafted by Thomas W. Allen, Martin J. Bohn, Jr., Patricia F. Howell, and T. Kenneth Allan of Washington University; Lawrence Taliana, Southern Illinois University, Ed-

wardsville; and Frank Noble of George Peabody College, Nashville.* Clerical assistance has been provided by: Barbara Schade, Carole Price, Cynthia Gilda, Judy Kennedy, Judy Cohen, and Janet Lombardo.

Our greatest debt is to Wade M. Robinson and the staff of the Central Midwest Regional Educational Laboratory, Inc. of St. Louis, Missouri. Dr. Robinson has been of major assistance from the inception of the project through to its completion with constructive ideas, financial support, and easy accessibility for help with problems as they arose. Fay Starr, Associate Director of CEMREL, was administratively responsible for the Invitational Conference. It was he who helped with establishing the Advisory Committee, coordinating business and financial matters, and selecting participants.

Finally, Miss Kay Garrett of Charles E. Merrill has shepherded the book through the editorial and production aspects of final preparation.

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*Research In Counseling:
Evaluation and Refocus*

PART I

THE SELECTION OF CLIENTS

Introduction

Donald H. Blocher, Associate Professor of Education at the University of Minnesota, presented the first major paper of the Invitational Conference entitled, "What Counseling Can Offer Clients: Implications for Research on Selection." Blocher proposes a reconceptualization of the counseling enterprise in which counselors concern themselves with a wide range of information about clients. Using this wide range of information, clients can be assigned to treatment geared to their unique individual and cultural characteristics.

Blocher offers a three dimensional framework for client diagnosis encompassing: (1) A life stage or time dimension, (2) A life space or psychosocial dimension, (3) A life style or effectiveness-of-coping dimension. The life stage dimension enables counselors to identify key developmental tasks and design counseling interventions accordingly. The life space dimension facilitates consideration of the interaction between the individual and his environment. Finally, the life style dimension, by assessing the clients' strategy of living, assists with the development of a set of behavioral goals for counseling.

Thomas W. Allen, Director of the Counseling Service at Washington University, raises the question of whether the presently utilized modes of counseling intervention offer the most effective approaches to the broader problem of helping a client modify his behavior.

Allen states that our theories of counseling, and more specifically our preoccupation with theorizing about counseling, tend to divert attention from those factors at our disposal which *are* the efficient agents of change, and to obscure the relevance of findings in other areas of behavioral science to the counselor's problem of helping the client modify his behavior.

William M. Gilbert, Director of the Counseling Service at the University of Illinois, notes that simply to point to the guidelines for selecting clients and assigning them to various types of counseling interventions such as individual or group counseling, milieu therapy, or behavior modification is a step forward, but insufficient by itself.

Gilbert calls for the further delineation of the client's problems causing the most trouble and, based on that assessment, the kind of intervention most efficiently and effectively providing him with better coping behavior.

Norman A. Sprinthall, Chairman of the Guidance Area in the Harvard Graduate School of Education, presented the second major paper of the conference

entitled "Selecting Clients for Counseling: Are Prior Conditions Limiting or Illusions?" Sprinthall reviews evidence supporting his position that much of the variation in outcomes of counseling can be attributed to the counseling process itself.

He suggests that research in counseling take a step back from the outcome problem and examine more carefully the homogeneity existing *within* the group designated as counselees, rather than confining consideration, to a comparison of experimentals and controls. The focus would shift to an analysis of prior client conditions and relevant pre-treatment variables.

Frank Noble, Chairman of the Psychology Department at George Peabody College and President of SPATE, criticizes the type of research which, in its concentration on outcomes, ignores the counseling process and the differences between clients and control subjects. He argues, as does Sprinthall, for an analysis of those who profit most and least from the counseling treatment. Homogeneity discovered in either group, on whichever prove to be relevant variables, may then be the basis for client selection.

Lyle D. Schmidt, Associate Professor of Educational Psychology at the University of Minnesota, further elaborates upon the Sprinthall paper by reviewing some of the existing literature on the characteristics of clients seeking counseling, the characteristics of clients counselors seem to prefer, and the client dimensions associated with counseling readiness.

What Can Counseling Offer Clients? Implications for Selection

Donald Blocher

One of the most interesting, if disturbing, facets of the development of counseling and psychotherapy as fields of professional endeavor, has been the element of apparent mysticism which has accompanied the movement. Much of the history of change in counseling and psychotherapeutic theory and practice contains elements which closely parallel those dominating the evolution of religious movements and political ideologies. In both cases a movement tends to be originated by a messianic figure, characterized by a kind of *elan vital*, who translates a deeply moving personal experience into universal terms. This leader quickly attracts a group of disciples who begin to generalize the precepts promulgated by the master into the most widely applicable terms.

In the case of counseling the process seems to be: counselor meets client; sparks of success flash; the cry of Eureka resounds throughout the land.

While the enthusiasms which are engendered by this kind of process may serve to facilitate the dissemination of new and original ideas, the conversions which take place are likely to occur without the benefit of any baptism in the waters of empirical evidence. Such a process is especially unfortunate in a field in which the occurrence of "placebo" effects for all kinds of fortuitous interventions from faith healing to aspirin is well known. Apparently almost any kind of intervention in which client and/or counselor place faith will produce some desirable effects. Unfortunately, the dogmas and folklore which grow up around many of these movements tend to be relatively impervious to new information. Apparently, gamblers are more aware than psychologists of the

enormous resistance to extinction which can be generated by a relatively few reinforcements delivered on an aperiodic schedule.

The result of this pattern of historical development for the field has been the establishment of a kind of grandiosity of outlook which is not without its comic opera elements. Graduate students learn to soliloquize endlessly about the "nature of man" before they are able to put together five intelligent sentences about the relationships between theories and observations of human behavior. Too often counselors and therapists sound like "true believers" who have been born without an organ for the perception of absurdity.

In terms of research these antecedents have led to a fixation with problems of process and technique. It seems reasonable that any investigation of behavior changing technologies should involve specification and investigation of input variables, process variables and outcome variables. Counseling has been fixated on questions of process to the detriment of badly needed research about input variables, particularly those involved in client selection.

A general assumption seems to exist which implies that counseling and therapy represent processes which are universally efficacious, and that the presumed outcomes of these processes will be equally desirable to all or virtually all troubled people, regardless of their individual or group membership characteristics.

The evidence which does exist, while not entirely satisfying in terms of either scope or consistency, suggests that in fact counseling and psychotherapy, as traditionally conceived, are processes which have restricted applicability for only selected subgroups of the population. The rather limited research on client variability can be reviewed under several headings.

Characteristics of Successful and/or Persisting Clients

A number of studies have investigated the characteristics of clients who persist in counseling or therapy. Studies tend to show that approximately 30 to 60 percent of people seeking help from outpatient facilities terminate in six visits or fewer (Feldman, 1958; Garfield and Kurz, 1952; Kurland, 1956). This tendency seems to operate rather consistently across all types of treatment or treatment facilities and represents a phenomenon which Stieper and Wiener (1965) term a "phase theory." It is as though an initial process of engagement between counselor and client must be explored before much productive interaction can occur. This writer chooses to call this phase of counseling the "negotiation period." Apparently only from one-half to two-thirds of the typical clientele of most counseling facilities survive this negotiation stage. In an intensive study of 500 veterans in vocational counseling (Bradley and Stern,

1963), it was found that successful outcomes were typically associated with nine or more counseling sessions. It would thus appear that success in vocational as well as personal counseling is associated with persistence beyond the negotiation period.

Several studies have compared clients who persist in treatment with those who do not. Generally speaking these studies suggest that clients who persist beyond the negotiation period are characterized by:

- (1) Greater anxiety and self dissatisfaction (Lorr, Katz, and Rubenstein, 1958).
- (2) Willingness to communicate problems and feelings to others (Hiller, 1958).
- (3) Greater needs for achievement (Hiller, 1958).
- (4) Higher social class background (Bailey, 1966).
- (5) More formal education (Hiller, 1958).
- (6) Higher measured intelligence (Stieper and Wiener, 1965).
- (7) Tendency to be first born or only children (Stieper and Wiener, 1965).
- (8) Less tendency to anti-social or delinquent behavior (Hiller, 1958).

If these characteristics seem as descriptive of counselors as of their clients, it is perhaps not purely coincidental. Not surprisingly, many of the same characteristics which have been associated with persistence in counseling have been associated with progress or "success" in counseling. Generally, the good prospect for counseling or therapy is described as not very disturbed, well motivated, well educated and having good personal resources (Stieper and Wiener, 1965). In short the good prospect for success in counseling or therapy has about the same pattern of characteristics as the good prospect for success in almost any other type of learning experience. In fact the data cited above very strongly suggest that counseling and therapy are in no way magical panaceas for a wide variety of human ills (Bergin, 1966).

Using these data as a guide, a counselor who wished to maximize successful outcomes for his counseling would select clients in much the same way that a college admissions officer would select applicants or a personnel officer would select candidates for white collar positions.

Since rather overwhelming evidence exists that the incidence of what we call mental illness, delinquency, promiscuity, alcoholism, and most other social problems increases rapidly as we move down the socioeconomic ladder, the data above are not very encouraging indicators to support the hope that counseling and psychotherapy as presently constituted are likely to be major factors in the alleviation of critical social problems.

Similarity Between Clients and Counselors

In fact, the data reported by Hollingshead and Redlich (1958) suggest that counseling and psychotherapy are primarily processes offered to middle-to-upper class individuals.

Data from work with children in a child guidance clinic (Hunt, 1962) supported the same conclusion. Research by Landfield and Nawas (1964) support the proposition that counseling is most likely to be successful when counselor and client have common meaning and value constructs. Additional research (Mendelsohn, 1966; Mendelsohn and Geller, 1963) similarly indicates that at least moderate similarity between counselor and client is associated with successful counseling.

These data give additional support to the proposition that, by and large, counselors using traditional "insight oriented" approaches to treatment do and probably should continue to select clients much like themselves; that is, clients who are middle class, achievement oriented, verbal and well socialized. Since these approaches by and large espouse global goals of increasing social adjustment, self satisfaction, reduction of anxiety, rather than defining goals which are idiosyncratic to the client, it is not surprising that they work best with quite homogeneous groups of clients.

Similarly, these approaches typically focus primarily on techniques of reflection, clarification, and interpretation and view the development of insight through self exploration as the primary source of behavior change. The actual change process is probably best approximated by what Pepinsky terms the "convergence" phenomenon (Pepinsky and Karst, 1964). Such a phenomenon begins with at least a moderate degree of similarity in counselor-client perceptions and moves from that to an increasing degree of similarity when treatment is successful.

If in fact the convergence phenomenon is central to change processes in traditional counseling and psychotherapeutic approaches, and convergence optimally must begin with at least moderate degrees of similarity between counselor and client, what reasoned basis is there to hope that counseling can bridge the chasms of social class, generations, racial and ethnic groupings which are basic to coping with the major social and behavioral problems confronting the society?

Reconceptualizing Counseling to Fit Clients

The alternative which seems most readily available for counselors who are genuinely eager to broaden the scope of their practice to include clients who are basically unlike themselves in terms of past learnings, present life style, and

future aspirations, involves a radical reconceptualization of the whole counseling enterprise.

In describing the inappropriateness of traditional conceptualizations of counseling process to work with the culturally deprived, four contemporary concepts of counseling which are inappropriate for work with culturally different clients are attacked (Calia, 1966).

These are: (1) passive, sedentary talk as the primary vehicle for counselor-client interaction; (2) facilitation of self-exploration as the primary goal of counseling; (3) unconditional positive regard as an essential therapeutic element; (4) self-referral as a necessary prerequisite for effective counseling.

Fortunately, the dogmatic grip which these concepts have held for so long over the counseling field has begun to give way before the mounting array of evidence.

The so-called existential psychologists have moved in their description of the therapist from an image of the passive, reflecting, neutral, mirror-like counselor to concern with the elements of confrontation and encounter in counseling (Moustakas, 1961). Frank (1961) and Ellis (1966), among others, are open in their acknowledgement of the direct persuasive aspects of counseling and therapy.

Reinforcement theorists of the "behavioral counseling" group (Kruboltz, 1966) have pointed out the desirability of specific, behaviorally defined goals which are idiosyncratic to the client.

Truax (1966) has shown that even in Rogerian counseling, unconditional positive regard is manipulated rather than radiated by the therapist in ways that smack strongly of reinforcement. It has been shown that therapy can be successful in groups of delinquents when commitment is direct, open, and public, regarding the goals and values of both client and counselor (Glasser, undated).

Directions for Reconceptualization

If a genuine reconceptualization of counseling is to occur to extend the capacity of counseling psychology in helping individuals and society, counselors will need to discover and organize a much wider range of information about clients. This information will then have to be used in much more sophisticated ways to assign clients to treatment processes geared to their unique combinations of individual and cultural characteristics.

Unfortunately, efforts at creating diagnostic systems useful in counseling in the past have been relatively unsuccessful for a variety of reasons. As Eysenck (1961) points out, diagnostic classification systems based upon a medical model of disease entities have proved less than useful. Particularly in a field like counseling psychology which is apparently more committed to the devel-

opment of human potentialities than to pathology removal, such models are inadequate.

Those diagnostic systems which have been developed for counseling purposes have tended to deal with very limited aspects of client concerns and with rather narrow concepts of intervention processes (Pepinsky, 1948). The tendency has been to narrow the focus of client variability to a few major categories of present concern, such as vocational, educational, or personal, which, while they may encompass a fairly high percentage of presenting concerns in a college counseling center, do not cover the range of problems encountered in the full scope of age, sex, cultural and socioeconomic differences seen in the population at large. In fact, the tendency of counselors to think of clients almost solely in such limited terms is perhaps one reason for their relative inability to help those who do not manage to fit convenient stereotypes.

Similarly, most diagnostic schemes have tended to focus on differential treatment only within the traditional context of the counseling interview. One of the basic reasons for the limited usefulness of diagnostic constructs in counseling has been the extremely narrow range of differential treatment patterns available. Alteration of treatment approaches in counseling to accommodate client differences has never gone much beyond a rather grudging willingness to vary the content of the interview. So long as this is the only factor in treatment which can be varied, the Client-Centered counselor is probably quite justified in his disdain for elaborate diagnostic procedures which are indeed seldom worth the time and effort invested in them.

It is possible, however, to conceive of much more inclusive dimensions of diagnosis than those typically used in counseling and at the same time attach these dimensions to patterns of intervention much broader and more flexible in scope.

One approach to such a process is derived from knowledge about human growth and development and from a value orientation which conceives the primary concern of counseling psychology as the facilitation of human effectiveness, or more succinctly the degree of control which an individual is able to exert over his environment. This approach has been discussed by this writer elsewhere (Blocher, 1966). Such an approach leads to the elaboration of two multi-dimensional frameworks for conceptualizing client variability and counseling interventions.

The three dimensional client diagnostic framework deals with (1) a life stage or time dimension; (2) a life space or psychosocial dimension; (3) a life style or effectiveness-of-copying dimension.

The Life Stage Dimension

A developmental or life stage approach assumes that one critical dimension in client variability is the client age factor and that behavior can be neither

understood fully nor modified appropriately without reference to the life stage context within which that behavior occurs. It is further assumed that each life stage involves characteristic *developmental tasks* which must be met and mastered if future development is to proceed optimally.

One life stage schema which the author has elaborated more fully elsewhere (Blocher, 1966), consists of five basic life stages, several of which are divided into sub-stages. One of the values of such a system is that it enables counselors to focus on the identification of key development tasks and to design interventions accordingly.

The Life Space Dimension

This dimension of client variability consists primarily of the interaction between the individual and his environment. It includes the physical, intellectual and emotional characteristics which he brings to this interaction, but is also heavily concerned with the client's social group memberships and the social roles in which he engages as a consequence of those memberships. This dimension is useful primarily in that it supplies information for determining the life area or areas around which intervention can take place. For example, the counselor can choose to intervene in the area of self structure, family relationships, school achievement, peer group relationships, or any of the constellation of, social role areas which define the client's life space.

The Life Style Dimension

The life style dimension as used here refers primarily to the various strategies, mechanisms and behavior patterns with which the individual copes with stress in, and seeks mastery over, his environment. These may range in molarity from very broad strategies such as being dependent on others, to simple mechanisms of repression or avoidance, to still more molecular units of behavior such as study techniques or simple social skills.

The purpose of this assessment of coping strategies is to help the counselor develop with the client a set of behavioral goals for counseling which are idiosyncratic to the client's own particular life situation. These goals primarily involve changes in coping behaviors appropriate to various social role situations and their achievement represents in essence the mastery of key developmental tasks.

The degree of human effectiveness represented in the life style of an individual can be assessed on a unitary dimension of degree of control over the environment which the client is able to exert. The extremes of such a dimension range from an almost total absence of even momentary control, which can be termed "panic," to a high degree of long term control which can be con-

ceptualized as a "mastery" state. The degree of effectiveness represented in life style may obviously vary somewhat from one area of life space to another. For example, one individual may function at a considerably higher level of effectiveness within a vocational role than within a marital role.

Assessment of these three dimensions can thus lead to a kind of diagnosis which permits the counselor to identify a set of age-appropriate learning or developmental tasks, select a focus for intervention in the client's life space, and formulate a set of specific coping behaviors which can be established as outcomes against which the success of the treatment can be measured.

Dimensions of Intervention

Obviously, a complex assessment of client characteristics becomes useful only as the range of possible treatment interventions available is broadened. A two dimensional model of intervention with two or more options within each dimension is conceptualized here. The two dimensions of intervention are termed "direct intervention" and "indirect intervention."

Direct Intervention

The direct intervention dimension has traditionally been associated with the counseling interview. It involves the establishment of a direct relationship between counselor and client which is presumed to be therapeutic and typically involves talk about the client's behavior with at least a partial focus upon some exploration of that behavior. Two obvious options within this treatment dimension involve the selection of individual versus group counseling. A number of models within those two options may be selected (Blocher, 1966).

Indirect Intervention

In the indirect dimension the counselor attempts to utilize elements in the client's environment which can facilitate growth instead of or in addition to his own direct involvement. One option in this dimension can be termed *milieu therapy*. In this approach the counselor would focus his primary efforts toward structuring an environment for the client which will be conducive to growth and positive behavior change. The counselor may consult intensively with teachers, parents, friends, spouse, and other significant persons in the client's environment, and may actively attempt to create a therapeutic environment.

A second option available in this approach can be termed *behavior modification*. Essentially this approach involves the design by the counselor of a pro-

gram or regimen of learning experiences directed toward the shaping and fixing of new patterns of coping behavior for the client. The client himself, the counselor or some third party may be involved in the administration of this program and in scheduling the reinforcements which govern its operation (Kanfer, 1966).

Matching Client Characteristics with Counseling Intervention

The most obvious and crucial element in the conceptual system outlined above concerns the way in which data about clients can be translated into decisions about the nature of the intervention process. Counselors need to be able to specify the types of treatment and share with the client decisions based upon realistic and accurate assessments of client needs. This is the heart of the "negotiation" period of counseling discussed earlier. When counselors are able to broaden both their understanding of client needs and the kinds of treatments which can be offered clients, the percentages of clients surviving the "negotiation" period can be expected to increase.

The rationale by which client characteristics and needs can be related to optimal patterns of intervention is presently best derived from principles of learning.

Learning Principles as Factors in Client Selection

By almost any definition the central elements of a technology of behavior change are principles of learning. It scarcely seems reasonable for counselors to elect to work with clients without some expectation that counseling can be a significant learning experience for them. Several principles or factors in learning can provide guidelines for selecting clients and assigning them to various types of counseling interventions.

Reinforcement

One principle of learning which has obviously established its relevance to counseling as well as other types of learning experience is *reinforcement*. If the counselor hopes to produce significant changes in client behavior, he needs in some fashion to obtain control over a set of stimuli which can change the probability of future client behavior.

When counselors select clients who are rather similar to themselves in value orientations and levels of aspiration they may have reasonable expectations that

the counseling relationship itself will produce opportunities for reinforcement to occur. In fact, one way to define a counseling relationship is that it is a form of interaction which gives both members of the dyad reinforcing power over the other's behavior. This is merely to say that they have become mutually significant people.

When a counselor selects a client who is quiet different from himself in age, social class or cultural background, it may not be reasonable to expect that that kind of relationship will readily occur.

Several studies support the position that verbal reinforcement is quite sensitive to individual difference factors. Zigler and Kanzer (1962), for example, found that both age and social class differences affected the operation of verbal reinforcers with children. Similarly, differential effects between personality types and verbal reinforcers with young adults were found (Noblin, Timmins, and Kael, 1966).

Counselors who select clients who differ widely in background may need to engage in a thorough reconnaissance of the client's life space to determine if sources of reinforcement exist over which the counselor may gain some degree of control. These may be in family, peer groups, or other relationships in the client's life.

Locating these sources of reinforcement may make effective indirect patterns of intervention, such as behavior modification, or milieu therapy, in situations where direct counseling relationships would prove difficult or impossible to establish.

Generalization

One basic assumption implicit in virtually all counseling is that new behavior learned in the counseling setting will generalize or transfer to the extra-clinical areas of the client's world. Again when clients are much like counselors and when patterns of social interaction reasonably similar to the counseling relationship are part of the client's extra-clinical experience, such transfer may tend to occur.

When counselors select clients for whom age and cultural differences lengthen psychological distance between the counseling setting and the rest of the client's life space, such transfer is less likely to occur.

In these situations, patterns of intervention which reduce the psychological distance over which transfer must occur have definite advantages. Group procedures often bear much greater resemblance to the client's real situation than does individual counseling. Specialized intervention, such as conjoint family therapy, or within-organization training groups, gives similar and even more striking advantages.

Counterconditioning

Counterconditioning plays an important part in most counseling. Clients are typically stimulated through the use of ambiguity or direct encouragement to bring out material which is anxiety-producing so that the stimuli which are represented can be paired with accepting and supporting responses provided by the counselor, rather than with the punitive or rejecting responses which had conditioned the anxiety reaction originally.

The effectiveness of this kind of procedure is maximized when all of the clinical conditions match the situation in which the behavior was originally learned, except, of course, for the punishing or rejecting response.

When counselors select clients who have great difficulty in communicating with the counselor on a direct verbal level, or for whom the counselor is literally different than any other significant person in the client's environment, counterconditioning may not be successful.

In these situations the counselor may be much more successful in training other people such as teachers or foster parents to work with the client. Much of the spectacular success reported by Carkhuff and associates (Carkhuff, 1966) in training lay therapists may be due to this factor.

Motivation

A final principle closely related to client selection and treatment is that of motivation. Traditionally, counseling and psychotherapy have treated motivation as a pre-existing, relatively, unalterable entity, which resides within the basic personality structure of the client. Muddled thinking about the nature of human motivation is very common in our society. Unfortunately, psychologists have not escaped their share of contamination in this regard. It is not uncommon to hear supposedly psychologically sophisticated individuals describe people as "unmotivated," or to use that most delightfully absurd paradox, "unselfish motivation," to describe the basis for an altruistic act.

The convenience of this type of thinking about motivation for counselors who regularly lose a third to a half of clients prematurely, is, of course, obvious. The one universally acceptable reason for failure in counseling is "lack of client motivation." It is interesting how often psychologists who cherish this little myth for themselves are unwilling to extend it as freely to others such as teachers, ministers or penologists who also need convenient rationalizations for their failures.

A number of terms such as ego-strength, counseling readiness, or working anxiety have been coined to describe supposed constructs of motivation necessary for success in treatment. So long as a high degree of ability to defer grati-

fications is viewed as necessary for counseling success, counselors will again do well to select clients on a very narrow basis. If clients must be willing to suffer through a prolonged regimen of frustrating, boring, or even punishing experiences in order to arrive at long last at the golden blessing of "insight," obviously a great many of the most disturbed and ineffective people in our society will never be helped. Of course this will hardly be the fault of counselors so long as they are able to dismiss such potential clients as "unmotivated."

An alternative view of motivation, of course, is available to counselors. It is quite possible to conceive of client motivation as a dynamic variable in the treatment process which can be shaped to meet the goals of intervention. This view conceives of motivation not as an entity residing within the client, but as an effect inevitably produced when counseling treatments are tuned in to client needs. It assumes that all clients are always motivated in the sense that they have a myriad of psychological and physiological needs which, when paired with stimuli controlled by the counselor, will result in appropriate response tendencies called motivation.

This view of motivation places the responsibility for actively developing and shaping client motivation squarely upon the counselor. When a counselor selects a client, he must immediately consider the process through which the client's motivations can be developed to build and sustain those behaviors which are goal-oriented in terms of the counseling process.

Implications for Research

When the mantle of mysticism is removed some very basic questions about the effectiveness of counseling, psychotherapy, and related procedures remain. The old questions of, "Is counseling effective?" or, "Which counseling theory is correct?" are seen as largely rhetorical. They give way to questions of, "Which treatments in the hands of which counselors can offer what benefits to particular clients?" These are the kinds of questions which literally cry out for answers. Unfortunately, pitifully little research has been directed to them.

Considerable evidence exists that client variables are extremely important. In a recent study, for example, it was found that with hospitalized psychoneurotic patients, therapist transparency facilitated client self-exploration which in turn was positively related to client improvement (Truax and Carkhuff, 1965). When similar procedures were used with a population of delinquent adolescents, exactly opposite results were obtained! With this different age group, self-exploration behavior was negatively related to positive personality change. Similarly, in another study it was found that age differences in child therapy dictated drastic changes in treatment procedures. (Lebo, 1958). Further research is badly needed to study the relationships between treatment variables and life stage factors.

Evidence also exists to support the proposition that life space factors, particularly socioeconomic and cultural factors affect treatment processes. Shore and his associates (Shore, Massimo, and Ricks, 1966) found that vocationally oriented counseling with an emphasis on concrete non-verbal experiences may be more effective in changing the behavior of lower class delinquent adolescents than are traditional methods emphasizing verbal communication. Further research is badly needed to compare the effectiveness of direct and indirect intervention procedures with culturally deprived groups.

Still more evidence exists around the importance of variation in client coping behavior and counseling process. In two studies, it was found that there were important individual differences in coping styles in clients in Client-Centered Therapy and these were significantly related to both length and success of treatment (Cartwright, 1955; Kirtner and Cartwright, 1958). It was suggested that procedures in treatment must be varied to avoid reinforcement of neurotic patterns of behavior. In another study, distinct types of coping reactions to adolescent identity crises were also found, and differential patterns of treatment may be indicated (Marcia, 1966).

Probably the most significant research in client coping strategies is that which has been done to investigate coping styles involving dependence vs. independence. Bohn (1965) found that variation in client dependence behavior tended to elicit differential treatment from counselors. Bordin (1965) reviewed much of this research to suggest that at least in initial phases of therapy, high therapist commitment facilitates work with overtly-dependent clients and interferes with work with counter-dependent clients. Much research is needed to unravel the effects of client dependence and other variations in client coping behavior.

Level of client functioning is another area which needs further research. Little evidence exists to support the proposition that counseling models developed for therapeutic purposes are optimal to move clients already functioning at relatively high levels to optimum actualization of potential. Research by Sanborn (1965) and by Rossman and Campbell (1965) suggests that people functioning at high levels may have problems unique to their combination of characteristics and circumstances.

Counseling research must deal with client variability and with the problem of matching client needs and counseling treatment. As pointed out in a recent review of counseling research (Carkhuff, 1966), the stigma which has long been attached to eclecticism is in the process of being removed. The one true way has not been found, and the field is ready to move toward a more sophisticated and less dogmatic approach to the real world and its complexities.

In Carkhuff's words:

In the past, eclectic practitioners and theorists have been rejected as escapists who do not stand for anything and whose stance is too unsystematic to research meaningfully. The verbal theories have not

delivered. It is time to develop a systematic eclectic stance, searching out the commonalities as well as the unique contributions of the various approaches to guidance, counseling, and therapeutic processes . . . We have in our grasp in 1966, the potential for a dynamic forward surge. We are not tradition bound (Carkhuff, 1966, pp. 474-476).

Summary

This paper has been an attempt to examine some problems related to selection of clients in terms of traditional concepts of counseling. It has also been addressed to the hypothesis that some of the apparently severe limitations which exist in terms of what counseling is presently able to offer potential clients can be removed through some reconceptualizations of the goals and processes of counseling.

Several directions for reconceptualizations have been suggested. These included a much broader view of diagnostic processes and an effort to wed such concepts to principles involved in client learning. These suggestions have been presented in very brief outline.

The intent of this paper is to stimulate a reconceptualization of counseling which is neither mystical nor mechanistic. Powerful technologies for changing human behavior exist and can be harnessed to alleviate the human condition. They can be utilized without doing violence to cherished values of human dignity, worth, and responsibility. Clients can be brought into active partnership with counselors in processes aimed at changing behavior directly and fundamentally. A wide variety of counseling interventions can be designed which will bring the contributions of counseling psychology to bear on the needs of a much wider range of clients as well as the fundamental problems of society.

Concepts of *human actualization teams*, *human resources groups*, and *contract psychology* (Blocher, 1966; Otto, 1962; Pratt and Tooley, 1966) can be utilized to develop a science of human effectiveness which can undergird the development of a new kind of counseling psychology.

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Discussion

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It is clear that the selection of clients is a matter of importance. There is, in the first place, no hope that the supply of professional counselors will ever be sufficient to provide service (as we presently understand it) to anything but a minority of those persons who require it (Schofield, 1964). What is more, there is some evidence that counseling may, for some clients, have deleterious effects. For instance, Truax and Carkhuff (1965) found this in working with delinquents where increased intrapersonal exploration appeared to be associated with deterioration in behavior. Finally, other avenues to behavior change, alternative to counseling and psychotherapy in the orthodox senses are being opened (Phillips and Wiener, 1966; Sarason *et al.*, 1966).

Given this state of affairs—that counseling is but one avenue of behavior change among many; that it is an avenue which is congenial to and appropriate for only a limited number of people requiring assistance with educational, vocational, or personal issues; and that, it will inevitably be available in very short supply—the need for distinguishing those persons who are most likely to profit from it substantially from those for whom benefit is appreciably less probable is obviously great.

Accordingly, considerable effort has been devoted to its fulfillment. The harvest has been extremely meager in practical terms. Not that the literature is lacking in *statistically significant* results, nor is it devoid of information in regard to the nature of the counseling enterprise (Whiteley and Allen, 1968). There is, nonetheless, a dearth of reliable data upon which counselors can base their actual selection procedures. Most of the findings at hand account for only very small portions of the outcome variance, typically 16% to 25% maximum with small samples, 10% to 16% with more moderate N's. Further, as Fulkerson and Barry (1961) indicate, the relationships found are difficult to

evaluate without some knowledge of base rates in the populations from which the experimental groups are drawn. This is rarely provided. Even more serious, Fulkerson and Barry note the alarming tendency of positive findings in this area to disappear in cross validation. The fact that these limitations are so uniformly applicable to this rather extensive literature suggests that further efforts of this variety are unlikely to contribute a great deal. Still, the problem cannot be ignored. What seems to be required is a careful reevaluation and perhaps readjustment of, the basic assumptions from which work in this area proceeds.

Professor Blocher's paper seems to me to be a thoughtful attempt to get a fresh approach to the problem by rethinking the fundamental postulates of the counseling enterprise.

My own thoughts begin with Raymond Cattell's (1966) thesis that psychology suffers from a serious case of premature closure. This point appears to be singularly opposed to counseling. It is obvious that many of us in the counseling business find our theories so engaging as to become from time to time a bit unmindful, if not totally oblivious, of our original purpose for constructing or learning them. So much reinforcement has accrued to those of us who practice counseling in its present state that it appears to have achieved the "functional autonomy" of which Astin (1961) writes. One need not, as Blocher does, appeal to the potency of aperiodic reinforcement schedules to explain this phenomenon. For it seems clear that the orthodox counselor is regularly reinforced. That is, his salary and his status, his convictions of the loftiness of his profession, are relatively consistent; similarly, negative reinforcement is, as Phillips (1956) and Blocher indicate, rather effectively screened out by the automatic attribution of untoward results to defects in clients and by the lack of meaningful feedback in regard to the "success" of his machinations. The latter condition is abetted by a number of factors. First, without clear, operationally defined objectives, it is difficult to determine whether or not anything has been achieved and, therefore, easy to cast a wide range of outcomes in a favorable light. Second, there is Eysenck's (1966) point that if the "spontaneous remission rate" in a given population is not taken into account—as it rarely is in day-to-day practice—it will appear that psychological treatment is a very efficacious procedure, producing favorable results in an overwhelming majority of the cases to which it is applied, even if it in fact has no positive effect whatsoever, or even a somewhat deleterious one.

Counseling may well have become a self-sustaining ritual independent of its original *raison d'être*. Certainly there has been no little discussion of what is or what is not "counseling." Indeed, until recently, such debates held the field to the extent that virtually no consideration was given to the question of whether the present modes of intervention were the most effective approaches

possible to the problem of behavior modification. That is, although counseling arose and, indeed, is maintained by the public and sought by clients as an effective, perhaps as *the* most effective, way to alter their lives, Blocher's intimation that we—as counselors and counselor educators—may have become so enamored with the process itself as to have become somewhat detached from this objective cannot be taken lightly. One cannot ignore the fact that a great volume of theoretical and polemical material and a growing body of research address themselves *not* to the essential question of how persons can best be assisted in their attempt to modify their behavior, but rather to problems arising perhaps uniquely from the quasi-medical, sedentary series of verbally-mediated transactions. Thus, it is more than possible that the set of techniques in whose dispensation we have been certified has become a Procrustean bed to which the needs of persons seeking psychological assistance have been indelicately fitted. As a result, it is likely that the main portion of our research efforts are being expended upon problems which may, in fact, be artifacts of our preferred and perhaps "precious" approach to the problems which justify our professional existence.¹

Consequently, Blocher's call for a critical appraisal of what counselors can offer clients is well founded. It is crucial that we take a close look at how well our present efforts realize our purported goals. The matter must be construed in its own terms, not those which we are wont to protect because we find sitting in an office talking to kids particularly congenial, or because the nuances of our constructs and the quasi-scientific, technical and esoteric character of our theories is so gratifying (Kell, 1966). It appears that each of the prevailing formulations tends to construe counseling in its own idiosyncratic terminology which becomes an object of reverence in itself isolating it from the tutelage of other behavioral sciences, as well as obscuring the actual sources of behavioral change.

For example, the psychoanalytically-oriented revere what Paul Meehl (Phillips, 1956) terms, an "historical-geographical-hydraulic model." More specifically, they seem to assume that insight is an essential agent of change. Indeed, it is maintained that the *accuracy* of the information which the client obtains from his transactions with the counselor is one of its principle therapeutic properties, if not *the* most important of them, and consequently, no little effort is expended in the attempt to divine historical truth (Singer, 1965). So closely has insight been identified with positive outcome that it seems, in many instances, to have become an ultimate objective.

¹ Sarason *et al.* (1966) employ this term to denote the tendency of the mental health professions to force problems into the existing molds, those molds with which *they* are most familiar. An example of "preciousness" is the extension of the psychiatric model to the community problems (delinquency) where it can have little impact and where, as a result, a much different approach is clearly required.

There is, in fact, a good deal of evidence to suggest that insight in the foregoing sense is far from being a *sine qua non* of significant behavior change. Freud (1937) himself seems to have clearly recognized, on at least one occasion, that it was not the "truth-value" of the therapist's communications which effects change—when indeed change is effected—so much as their *persuasive* character.² The penetrating analyses of the therapeutic enterprise in general and of the dynamic properties of insight in particular made by Frank (1961, 1962) and by Hobbs (1962) lend a good deal of credence to this view. In the same vein, Colby (1964) allows that the basic science from which therapy must draw its nutriment is not so much a study of the origin of various psychodynamics but rather "how persons influence the belief systems of other persons."

Further, research (Noblin, Timmons, and Reynard, 1963) suggests that the *content* of psychoanalytic-like interpretations has little influence even on the verbal behavior of persons. Frank (1961) and Sargant (1958) have shown that striking parallels exist between the conditions which are established in psychoanalytic treatment and those employed in reindoctrination of various types. Thus, there is much to suggest that despite the voluminous and vehement protestations to the contrary (Bernstein, 1965), a good part of whatever efficacy psychoanalytically-oriented treatment possesses is attributable more to persuasion, to the modification of certain maladaptive assumptions or convictions in any of a number of possible ways (Phillips, 1956; Ellis, 1961), than to the unraveling of suppressed biographical events.

But psychoanalytically-inspired counseling is not the *bête noire* of the piece. Its plight is merely illustrative of the plague that is upon all our houses. For instance, as Professor Blocher observes, similar reservations pertain in regard to client-centered counseling. These theorists stump for a quasi-mystical-atmospheric model. They attribute the change wrought by their efforts to the provision of a consistent, noncontingently warm and secure interpersonal relationship. This atmosphere allegedly releases the client's innate drive for self-actualization which, in turn, works his cure. In effect then, the counselor's presence removes the stopper, as it were, restoring the natural flow of anabolic forces within the individual.

However, there are, as Professor Blocher alludes, several salient pieces of evidence which suggest that this account of the process requires emendation.

² Freud states: "The path that starts from the analyst's construction ought to end in the patient's recollection; but it does not always lead so far. Quite often we do not succeed in bringing the patient to recollect what has been repressed. Instead of that, if the analysis is carried out correctly, we produce in him an *assured conviction of the truth of the construction which achieves the same therapeutic result as a recaptured memory*" (1937, p. 75). (Emphasis provided—TWA). Freud goes on to indicate clearly that the main therapeutic task is to undermine one mischievous idea or another. It seems, however, that Freud saw but one way to do this, by means of formulating a plausible natural history of it.

Far from simply providing a set of conditions congenial to growth, it appears that the successful client-centered counselor quite actively promotes change. He systematically varies his reinforcement of the client in order to persuade him to abandon certain dysfunctional attitudes—particularly attitudes concerning himself (Truax, 1966a; 1966b; Frank, 1961; Murray, 1956).

The point is that while we are reputedly in the business of behavior modification, our theorizing has tended first, to divert attention from those factors at our disposal which *are* the efficient agents of change to extraneous, though thoroughly euphonious ones, and two, to obscure the relevance of findings in other areas of behavioral sciences to our work.³ It appears then, as a result, that is important to construe our present means of counseling as interim solutions which are subject to extensive renovation by applying the burgeoning largesse of experimentally derived information concerning the parameters of interpersonal influence to research and practice in educational settings. In regard to the problem at hand, the selection of clients, a good deal might be learned from the Yale group's work on persuasion, (Hovland *et al.*, 1953; Janis *et al.*, 1959). This material suggests that in order to account for a useful portion of the outcome variance, clients cannot be considered in isolation. Pragmatic predictions must consider how the various characteristics of a given client *interact* with those of a particular counselor (Krasner, 1962). Conversely, the influence which a specific counselor can exert depends on the interaction of a host of variables, such as his standing on status, age, and sex

³ That is to say, client-centered and psychoanalytical counselors, for example, may well attenuate their therapeutic impact in so far as they tend to focus on such things as "response to feelings," "genuineness," "repressed traumata," and the "interpretation of resistance" at the expense of a systematic application of those social factors which are most likely to influence a particular client.

Consider the apparent state of affairs in client-centered therapy, for instance. These theorists carefully indoctrinate their students to "radiate" a certain atmosphere in an *unwavering* fashion. But, in fact, it appears that the therapeutic success of "the founding father" depends on the *systematic* variation of this atmosphere which has the effect of "rewarding" certain behaviors, those construed as healthful (talk about feelings, adoption of a subjective point of view) and "punishing" certain others seen as less desirable (those with an external point of reference) (Murray, 1956; Truax, 1966).

The result is probably that those of this school who become truly effective modifiers of behavior do more as Rogers does than as he says. That is, they become effective *in spite of* the solemn injunctions of the theory. Others, however, translate the theoretical prescriptions more faithfully into action and assiduously maintain the recommended conditions at an unvarying level. In effect, they randomly reinforce both adaptive and maladaptive client behavior with little or no positive consequence.

It would appear that much more might be accomplished if it were clearly acknowledged that the success of the client-centered counselor turns on the fact that most human beings are more likely to repeat behaviors that are rather regularly succeeded by sensitive expressions of warmth and understanding by another positively regarded person than those that are not. Consequently, the attention of trainees might wisely be directed explicitly to the task of utilizing this fact to cultivate in the client those behaviors which seem to be most closely related to the attainment of his goals.

dimensions relative to the standing of the client, the order and structure of his communications, the general persuadability of the client,⁴ his motivational and cognitive predispositions in regard to the particular matter at issue, and the group pressures to which he is subject. The "persuasion research" then, suggests that the meaning of a given value for any of these variables can be determined only in terms of the total constellation. The existing literature on interpersonal influence adumbrates the nature of some of these complex interrelationships. These suggestions should be applied to actual counseling problems. More important, the persuasion research provides a useful model and a number of promising techniques for "fact-finding" forays against the stubborn problems which confront us as aspiring modifiers of behavior.⁵

For similar reasons, Professor Blocher's reformulation of the counseling enterprise deserves careful attention during our deliberations concerning the most profitable courses for research in this area to pursue. His scheme appears to have freed itself from the "functionally autonomous" bent plaguing most of the theories fashionable in counseling circles, and to have made considerable progress toward quickening the dialogue with the basic behavioral sciences. Consequently, it might well be employed as an organizing framework within which a set of priorities for the expenditure of the available research resources can be established. For instance, systematic research programs might be developed to determine the parameters of the relationships among the three client dimensions Professor Blocher specified and the various counselor dimensions he indicated. Similarly, under "reinforcement" in Blocher's learning principle section, CEMREL could be provided with a blueprint for a comprehensive set of studies aimed at establishing a "catalogue" of the various reinforcers available to the teacher and the counselor.⁶ In addition, attention might be given

⁴ Imber and his colleagues (1956) hypothesized that "suggestibility" in clients would be an effective predictor of stay in therapy. Their findings supported their hypothesis. In this case, however, the focus remained on the patient. Consequently, the study fails to do justice to the reciprocal implications of the persuasion research.

⁵ The implications of the "persuasion" research extend beyond the nature of the general parameters of influence to the suggestion of particular strategies. Take, for instance, the study reported by Janis and Mann (1965). A role-playing technique was employed to excellent advantage in the modification of the behavior of subjects. Female subjects were induced to take the role of a smoker who comes for the treatment of a lung problem, receives a diagnosis of cancer, and prepares for hospitalization. This procedure appeared to have great impact on the attitudes of the subject toward smoking and, moreover, on their cigarette consumption. Clearly, it is a technique which might well be taken seriously by counselors.

Indeed, this single study provides more evidence for the efficacy of "emotional role-playing" than can be marshalled on behalf of most of the standard counseling techniques presently in use. There are a number of studies in the literature of social and experimental psychology which are as suggestive.

⁶ Such a "catalogue" might be begun by specifying a number of research designs in precise operational terms. Each design would stipulate the exact procedures by which

to an outline for a series of investigations designed to test the relative potency of each of these reinforcers in various situations with an eye to the development of an experimentally-grounded set of guidelines for their application.

Although "learning theory" falls far short of providing a totally satisfactory approach to our task, the structure of Professor Blocher's proposal can accommodate important findings by workers employing a number of diverse models. This is crucial to the fulfillment of its heuristic objectives. Furthermore, these cannot be parsimoniously fitted into the "conditioning" paradigm. Notable in this regard are the labors of more "cognitively-oriented" experimentalists such as Festinger, Janis, Rokeach, Sarbin, and Schachter. From their research have come ostensibly powerful strategies for behavior modification. However, these findings will be of service only in so far as they are integrated into the practitioner's philosophy of his task. Neither the historical-geographic-hydraulic model, nor the quasi-mystical atmospheric model seems capable of doing so. The S-R or S-O-R model takes us part of the way toward integration. However, it may well be that the position taken in part by Rosenzweig (1936; 1938) and Frank (1961), and more fully by Ellis (1961) which suggests that *persuasion* should be adopted as the central construct in counseling, approaches the mark more closely. Persuasion is a generic concept under which the findings of learning theory, of cognitive dissonance theory, of role theory, of general semantics, might clearly be subsumed and more systematically applied.⁷

Given the task of forging a relatively concrete set of guidelines for research from which to devise and implement more satisfactory approaches to the behavioral problems faced by schools, one cannot but heartily welcome Professor Blocher's contribution. It could prove to be the sturdy anvil upon which something of durable significance will be fashioned.

(a) the nature of the sample was to be described and (b) the outcome assessed. Practitioners would then be encouraged to undertake studies employing these designs in regard to whatever independent variables, for example treatment procedures, seem to be most promising to them. Replications of these studies would be given high priority for support. Hopefully, the result would be that a good many comparable studies would be generated. This would, at last, provide a sound basis for estimating the actual success of various tactics in achieving given objectives.

⁷ Arguments—such as Blocher's—for the conceptualization of counseling in terms of "learning theory" frequently rest as heavily upon a semantic base as upon a substantive one. The key is the ambiguity of "learning." On one hand, "learning" denotes the "acquisition of new behavior," on the other, it refers to a particular school of psychology, one specific theory of behavior acquisition. Difficulty arises when agreement with the truism that counseling is a "learning process" (in the former sense) is subtly transmuted into assent for the proposition that counseling is necessarily coextensive with the processes adumbrated by the classical conditioning or operant learning theories (learning in the latter sense). In fact, this latter usage has reference to but one of numerous general formulations of behavior acquisition; or perhaps more accurately, it is a conceptualization of several of the many processes by which behavior is modified.

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Discussion

William M. Gilbert

"Amen and hallelujah" most clearly and succinctly express my overall reaction to Dr. Blocher's paper. Dramatically he has underlined the absurdities involved in the various attempts to create panacean theories of counseling and psychotherapy. He has pointed to the folly of research which concentrates too heavily on process variables at the expense of input and outcome factors. He has recognized the serious limitations of insight oriented therapies and the regrettable findings that counseling and therapy as usually practiced are of most benefit to those persons who need it least, the reasonably well adjusted, the well motivated, the better educated and more intelligent clients. He has castigated unmercifully but correctly those therapists who hide their failures from themselves, their colleagues and, unfortunately and perhaps unethically, from their clients, by ascribing the failures to "lack of client motivation." Perhaps it is well that we will never know the possibly disastrous effects of such therapist rationalizations on the lives of clients who are rejected by therapists or who decide that there is no effective psychological help for them.

Many experienced counselors who are not converts to any special Messiah, but who are honest with themselves, open-minded and genuinely eager to discover more effective and more efficient procedures will join with me in saying Amen to most of these criticisms.

Fortunately Dr. Blocher has also attempted the much more formidable task of suggesting the broad outlines for a reconceptualization of counseling along developmental lines. He quite properly rejects the use of the concept of adjustment, and adopts instead a living effectiveness or coping effectiveness model. The need for considering client selection in relation to the variety of

treatment procedures which the counselor is capable of using on the one hand and in relation to the life-stage, life-space and life-style dimensions of the client on the other hand is emphasized. Blocher has stated:

Assessment on these three dimensions can thus lead to a kind of diagnosis which permits the counselor to identify a set of age-appropriate learning or developmental tasks, select a focus for intervention in the client's life space and formulate a set of specific coping behaviors which can be established as outcomes against which the success of treatment can be measured.

At this point most of us would be inclined to respond with "Hallelujah." But from here on the going gets a little tougher. We can only sympathize with the difficult task of attempting to specify how to select from a group of well-defined intervention procedures those which will most efficiently change coping behaviors in a way which, from Blocher's viewpoint, would give the client greater mastery over his environment. Simply to point to the fact that we can choose from individual or group counseling or milieu therapy, or behavior modification, and that principles or factors in learning such as reinforcement, generalization, counter-conditioning, or motivation, can provide guidelines for selecting clients and assigning them to various types of counseling interventions, is a step forward but does not help too much.

As Blocher implies, it is certainly desirable to recognize that these different types of intervention exist and that selections could be made from them. The real trick, it seems to me, is how to decide which of a client's problems are causing the most trouble and which kinds of interventions are likely to most efficiently provide him with better coping behavior. For example, what are the circumstances under which one decides to use a Wolpeian type of desensitization procedure to reduce examination-taking anxiety? Should one, as some writers assert, simply accede to the client's request that this procedure be employed? Or should the therapist first spend time with the client, attempting to discover something about the nature of this anxiety? If he does do this, should he proceed on an insight-oriented basis, or should he attempt to assess the environmental contingencies giving rise to the anxiety or should he rationally investigate other client characteristics such as the client's study procedures, his ability level, and the nature of his aspirations? A real client of this kind presented himself some time ago. Instead of being desensitized he wanted to be hypnotized to rid himself of his anxiety. He had had about a dozen insight oriented interviews with a psychiatric social worker. The therapist felt that she had run into resistance which she could not handle even though she felt that they were about to uncover some unconscious material of great significance. The client felt he was not making any progress and thus his request to

be hypnotized. He had a good B+ average. His scholastic aptitude tests and other information suggested that he should be earning about C+ grades. In an active and rationally oriented interview it was quickly learned that he aspired to a straight A average. This was connected with certain reactions to his family background. A frank and open discussion of the probable relationship between his unrealistic aspirations and his anxiety reactions and of the need to develop more reasonable goals made sense to him and he appeared to be greatly relieved. A decision was made for him to see one of our interns who would further help him to modify his excessively high level of aspiration.

This common-sense approach to the selection of a particular type of intervention is one which is commonly used by counselors and therapists. It depends not so much upon such variables as life stage or style, but upon the discovery and identification of the immediate causes of a crucial problem; in this case what could be called an attitude towards self. The reasons for the decision to utilize a rational approach at this point instead of hypnosis are obvious. Another even more obvious situation arose in the Danville V.A. hospital a few years ago. A patient was antagonizing physicians, nurses, and attendants by sticking his tongue out at them at times which were *too* appropriate. The responses he was eliciting from them appeared to one of our students to be greatly hindering the patient's recovery. The student decided to institute an aversive conditioning procedure. Everytime the patient stuck out his tongue during an interview the aversive stimulus was applied. After five or six applications the patient stated, "Say Doc, if you're trying to get me to stop sticking my tongue out, just tell me and I'll be glad to." Fortunately the student had enough wit and flexibility to explain to the patient that such was the case and that the behavior was making the other hospital personnel react antagonistically. I am sure there are many, many more equally obvious sets of circumstances which almost dictate the general nature of the intervention which should be employed. Perhaps the day is not too far off when some creative counselor or therapist will be able to categorize various circumstances and indicate what procedures would appear to be most efficient at which points in a therapy program.

It is also possible, however, that we are not yet at a point where this *should* be done. If we begin to specify too clearly the particular types of interventions which someone says very persuasively should be applied under defined circumstances without adequate empirical evidence, it seems certain that our students and other beginning counselors and therapists will, because of their own insecurities, too readily adopt the cook-book and become the rigid disciples of this Messiah just as in the past students became Freudians, Rogerians, or as is now happening in some quarters, Skinnerians. While this temporarily might improve the present counseling and therapy situation, its long-time effect could be that of hindering the development of new techniques.

For example, evidence is just beginning to accumulate that *activeness* on the part of the therapist is desirable. O'Leary (unpublished master's thesis, 1967) on the basis of prior work by Grigg and Goodstein (1957), by Heller, Davis, and Meyers (in review, 1966) and by Rice, Wagstaff, and Butler (1961) postulated that activeness on the part of a counselor would be associated with improvement in the grade-point average of a group of high ability students. She found that such things as the counselor's expressing his opinion, suggesting a plan, being expressive and emphatic, and being concrete, as well as the amount of therapist talk and the amount of total talk in a standard time period, all differentiated significantly between groups who improved and did not improve their grades.

Personally, I know of therapists who after no more than two interviews have been so open and direct that they have told the husband in a serious marital problem situation that he should stop considering divorce and that both he and his wife should instead consider the behavior changes they should make in order to improve their own marriage. Successful outcomes reportedly ensued.

In quite a different setting, Paul (1966) was able to demonstrate the clear-cut superiority of desensitization over insight-oriented therapy, and over a placebo, as well as a no-contact control group, in treating anxiety associated with public speaking.

O'Leary and Becker (1966), in dealing with disruptive fourth grade children who were described as "emotionally disturbed," were able to demonstrate that a token reinforcement program led to an abrupt and persistent reduction in deviant behavior.

These examples are mentioned in order to emphasize that at long last counselors and therapists are being freed from the fetters of analytic and other dogmas and are freely trying out radically different approaches to counseling and therapy.

There is one extremely powerful procedure we already possess. It can produce drastic and crucial behavior changes in the space of a few interviews. A student who is poorly disciplined can be induced to study forty hours a week in a highly concentrated manner. Or one who has been an acute stutterer can be helped to stop stuttering in a similarly short time. It can be used effectively with the disturbed normal, the neurotic, and the psychotic. I am of course referring to hypnotism. It is by far the most potent attitude and behavior changer we possess. I should like to suggest that its abandonment by Freud and the subsequent development of psychoanalysis was the greatest psychological and social error of the past century. Perhaps George Kelly (1958) was too magnanimous when he stated that Freud did more to hinder the development of psychology in the last half century than he did to further such development in the preceding half century.

There are many more sophisticated ways of using hypnosis than by using it in a direct symptom removal way or as a weak adjunct to an essentially analytic procedure.

Why is it that we have been so reluctant to develop and use an obviously powerful technique? Partly, of course, it was Freud's influence. He was possibly one of the most persuasive writers who ever lived. He substituted the more socially acceptable voodoo of the unconscious for the less acceptable voodooistic aspects of hypnotism. There is today probably too much public fear and concern about hypnotism for it to be used widely and for it to be used in the more sophisticated ways which are now open to us.

Perhaps the time has come for us to remove the voodoo elements from hypnosis. I am convinced that all of the known facts about hypnosis can be conceptualized under an Attention-Focusing model.

The public could not very rationally object to psychologists engaging in Attention-Focusing Therapy. It does not seem to object to relaxation therapy, behavior therapy, or even existential therapy with all of its combined morbidly mystical and hedonistic aspects.

It is clear that using a powerful technique such as Attention-Focusing Therapy carries a tremendous amount of responsibility. The counselor or therapist will need to know which attitudes and behaviors need changing and to what they should be changed. He will, of course, be able to enlist the client's help and acceptance in deciding on the nature of the changes just as a good surgeon does before he operates. But once the decision is made, the therapist would have to accept the responsibility of producing the changes. However, I feel that most counselors and therapists are ready, or nearly ready, to stop ducking their professional responsibilities by falsely thinking or saying that using effective techniques will rob the client of his independence, initiative, or even his democratic freedoms.

Perhaps, then, it would be wisest to proceed in such a way that we do continue to encourage the investigation and development of more sophisticated and more powerful techniques. Selecting clients and attempting to match them or the kinds of problems they have to particular types of interventions could take place too, as long as we are careful not to "freeze" the kinds of interventions we use.

There is the major problem of training our students to use competently a wide variety of therapies. At our present level of knowledge, it is probably still possible for an individual student to learn most of these. In the near future, however, we may have to begin training specialists as well as broadly trained evaluators who will perform a service similar to that of the medical internist.

Hopefully, before the next two decades have passed, we will have abandoned our blood-letting and witch doctor worshipping and will have pro-

gressed to a point where empirically based and potent psychological principles can be applied effectively in the modification of significant human attitudes and behaviors to the end that people of all classes, ages, and cultures may live more creatively, more productively, and more happily.

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Selecting Clients for Counseling: Are Prior Conditions Limiting or Illusions?

Norman A. Sprinthall

Introduction

Research in counseling and psychotherapy has been gradually moving in a psychologically healthy direction—backwards. The recent past has witnessed less concern with the criterion problem—that is, how to measure the effectiveness of “treatment X” on an experimental group of clients. Instead we have come to realize that many of the outcome measures in research designs have unfortunately already contained the seeds of their own destruction. My attention was called to this position particularly by the recent work of Cartwright and Vogel (1960), Truax (1963), and Volsky *et al.* (1965). These researchers in particular have illustrated the amount of variation in outcome within groups of counselees. They have provided us with evidence which clearly indicates that much of the variation in outcomes of counseling can be attributed to the counseling process itself. For example, Cartwright and Vogel (1960), after making the usual comparisons between a counseled group and a control group, examined the differences within the counseled group. The reported differences were indeed noteworthy, e.g. success in counseling was associated with the amounts of experience of the therapists. Similarly, in what has now become almost a classic study, Truax (1963) reported differences in counseling outcomes within the experimental groups associated with the therapists’ ability to provide certain necessary therapeutic conditions. These studies indicate that

clients improve or get worse as a result of a process ostensibly designed to provide “help.” Equally important to the ethical issue, however, is the empirical evidence. The evidence indicates substantial variation within a group of experimental subjects supposedly exposed to the same independent variables. More recently, Volsky *et al.* (1965) illustrated the same point. He reported that on such measures of outcome as “problem-solving,” “defensiveness,” and “anxiety,” counselees who improved on these dimensions were about equally balanced by counselees who got worse. This state of affairs quite understandably, causes many of us to pause in our research studies and to re-examine some of the assumptions that have been guiding our efforts. It was just such a pause that led me to examine the implications of such findings. On a logical basis it seemed clear that variation in counseling outcome could be associated with variations in the process. Would not another important source of variation in outcome reside in differences in client conditions prior to counseling? If so much variance was showing up within groups of counselees during and after counseling, might we not consider that our assumptions of within group homogeneity prior to counseling might also be problematic?¹

In a sense I am suggesting that research in counseling now take one further step backward from the outcome problem, to examine much more carefully what homogeneity, if any, exists in research groups designated as counselees. Instead of continuing to use our most recent dichotomy of process versus outcome as categories for research, we need to add a third dimension, that of prior conditions and relevant pre-treatment variables. I see this third dimension, which has been conveniently overlooked, as requisite to our research efforts if we are to more fully comprehend such a complex set of inter-relationships as exist in counseling research.

Individual Differences

Psychology as a science, we might recall, had some of its earliest roots and most important discoveries as a psychology of individual differences. While other disciplines were expending themselves on efforts to prove the similarities in man and human behavior, some of our most far-reaching understandings emerged from studies of the dissimilarities in man, his individuality and his uniqueness from every other man. Admittedly the psychology of individual differences may have at times gone too far in creating, as it did, the idiographic vs. nomothetic controversies which are still with us. Yet it would be foolhardy for us to overlook the logic behind the concept of individual differences es-

¹ Logically, at least, within group variance after counseling, and within group variance during counseling, could imply within group variance prior to counseling.

pecially as it applies to a process such as counseling. Perhaps, if we took the position that the separation of the nomothetic and idiographic was artificial as it implies a non-existent continuum, then we could view the similarities among people and group trends as quantitative and individual differences as qualitative—implying separate noncontinuous, perhaps intersecting domains of personality. The main point in this regard, however, is to underscore the importance in counseling research of refocusing on client differences rather than similarities as prior determining conditions of the possible effectiveness or ineffectiveness of "treatment X."

Further logical support for a needed focus on individual differences comes by analogy. Learning theorists, particularly cognitive psychologists, are now investigating the importance of variation in cognitive styles to types of instruction. Cognitive styles such as deductive versus inductive thinking, ambiguity versus structure, field dependence versus independence are a few of the variables that are suggested as important prior pupil differences regulating their ability to use curriculum materials. In fact, I would suggest that intensive research in almost any area of psychology would underscore the amount of individual variation rather than the reverse, if we deliberately looked for such qualitative differences. I would suggest that people "condition," gain "insight" and "identify" with wide variation—to choose terms from the three most popular learning theories as examples. In counseling, I would suggest important individual differences may exist in processes such as exploration of feelings, verbalization of affect, introspection, cognitive awareness of self—or on whatever concepts may be used to describe the essentials of a particular counseling focus. It is obvious that client variables such as these, as well as others existing prior to counseling, would determine differences in outcome no matter how outcome was measured. At a more superficial level, it would also be logically consistent to assume that clients would differ in their ability to respond to various so-called counseling styles such as directive, non-directive, behavioral shaping, existential, again an ability in part regulated by what Robinson has called "client proclivities" (1955). Our friends in classical psychoanalytic schools, at least based on clinical "lore" perhaps more than systematic evidence, have concluded that the three to five year analysis may be the treatment of choice only for certain kinds of patients. In a similar vein, I think we can at least question the universality of some of our counseling procedures if we begin to acknowledge the array of differences within any group of people. Incidentally, further support for the importance of individual differences can be gleaned, indirectly at least, just from the existence of multiple theories of both personality and treatment. We might recall that each of these theories has evolved in the hands of "objective" scientists examining the same basic data—human behavior. The array of theories perhaps stands as mute testimony to my point of existing individual variation.

Review of the Current Literature

In an attempt to find empirical support for an *a priori* view, I examined the research literature. There is some evidence by way of justification, yet as a whole the literature hardly provides systematic support. Thus, I attempted to find examples in research that at least might indicate appropriate areas for investigation and for a focus on specific variables. In general, there seems to be a growing consensus for the view that there may be a set of important differences within any group of counselees, differences ignored in the commonly used research designs. Evidently we have too often followed a rather naive assumption in our research designs. Stated simply, the assumption seems to be that by equating the control group to the experimental group on a series of variables usually found relevant to the dependent variable, it is then possible to attribute differences in outcomes, if any, to the treatment. In fact, pursuing this assumption has been, as researchers all know, a very difficult task. We spend great amounts of time and energy in statistical analysis using techniques such as randomization, co-variance for original differences in scores, latin square designs, and that most tortuous of all procedures, matched groups, in order to insure that the experimental group equals the control group in all ways save for exposure to "treatment X." I think there may be reason to question the validity of all of these commonly used procedures, but particularly, of course, the procedures of matching groups. As Underwood noted, this is an outrageous procedure in itself. He used as an example a study of rigidity in schizophrenia. "First we must match on chronological age and then perhaps we should match on sex, mental age, socio-economic background, racial background, education, length of stay in the hospital, white blood count, weight, learning ability, number of siblings and on and on" (Underwood, 1957, p. 117). The main point is that in attempting or expending so much energy on balancing the experimental group with the control group we almost automatically avoid the question of variables within the experimental group that indeed may be crucial to the effect or so-called effect of "treatment X."

Kiesler (1966) has recently noted and underscored some of these questions. He has suggested that the assumptions of homogeneity within an experimental group of patients or clients is totally unwarranted. On almost any measure that one could devise, the patients or clients would show a remarkable range of differences (p. 110). He added that the initial differences in patients mean that no matter what the effect of psychotherapy or counseling might be in any particular study, one could conclude almost nothing. We cannot say that "treatment X" has a positive or a negative effect on an experimental group since we have not accounted for the diversity within the experimental group. Our fetish with control and experimental groups may blind us to the realities of some rather obvious prior conditions. For example, Herron (1962) found that an

extremely crucial prior dimension for patients diagnosed as schizophrenic was simply the abruptness of the onset of the disorder. This finding was similar to an earlier study by Zubin and Windle (1954), which focused on the effect of an unconsidered and uncontrolled variable in counseling treatment, the variable of chronicity. The results do point to a rather logical conclusion, "treatment X" will have a differential effect on subjects in an experimental group depending on the initial difference within that group.

Establishing the principle of prior conditions effecting response to treatment by no means solves our problem. Design problems abound. For example, Kiesler suggested a design with at least two experimental groups dichotomizing by variables shown to relate to outcome one by one or through the technique of co-variance adjustment. However, the difficulties that accrue to this procedure are evident when Kiesler then lists some thirteen variables which may indeed be relevant as prior conditions effecting the course of counseling or psychotherapy.

If we hold out for a moment the design problems, there does seem to be a fairly strong theme now running through much of the literature calling our attention to this problem. Unfortunately many have exhorted, but few have researched. In the *Annual Review of Psychology* (1964), Milholland noted that the prognosis is a central concern in the assessment of outcome of therapy. Yet he concluded, "The studies examined for this review were generally methodologically weak and contributed little of help" (p. 331). Garfield and Affleck (1961) have also exhorted—the time to begin the study of outcome is prior to intake. Fulkerson and Barry (1961) reflected the same concern when they suggested that prognosis was of sufficient importance to be considered a major element in research. They noted at least three aspects of prognosis, to duration, course and outcome of treatment. Without information in these areas, the differential effect of treatment would be impossible to isolate. Colby (1964) has suggested that this apparent omission in research focus may be caused quite simply by a greater interest in studying the therapist and treatment techniques rather than clients/patients (p. 353). Yet nowhere can we find such necessary systematic information. One thought-provoking study was reported by Luborsky (1961) illustrating the prognosis-diagnosis difficulty. Using one set of assessment procedures, he found only one of five prior groups of personality variables related to outcome (initial anxiety). When he used a "Health-Sickness Ratio" which purports to measure areas such as ability to function autonomously, quality of interpersonal relations, breadth and depth of interests, he reported a correlation of $+0.71$ pre-to-post treatment. If we take his HSR as a picture of how clients are actually functioning prior to treatment, rather than the usual diagnostic categories used in psychological assessments, then his findings may have particular relevance to the problem of denoting what variables might be most important to assess prior-to treatment.

It still does not answer the more specific problem of interactive differences—that is, the relation of other prior conditions to the process of treatment itself. Certainly the traditional use of clinical diagnostic categories in relation to process and outcome has been of limited value. As Levinson (1962) noted, "The research evidence to date indicates that the relevance of diagnostic categories has been over-rated in this, as in many other types of prediction" (p. 15). Establishing an accurate prognosis, as Levinson suggests, is as important as classifying a patient's psychopathology and considerably more difficult. Once again the question arises, what characteristics and proclivities of the patients/clients are most influential in the course of treatment?

Levinson has estimated that not more than 20% to 30% of clinic applicants embark on a psychotherapy career of more than a few interviews. This rather sizable attribution is certainly caused by a number of factors not excluding the client conditions prior to treatment. Unfortunately there is very little that we know about the classes of conditions prior to and during the initial stages of treatment which would account for the number of "drop-outs." Levinson concludes somberly, "The paucity of even the most simple descriptive data bearing on this question is truly remarkable" (Levinson, 1962, p. 20). Perhaps our devotion to the traditional diagnostic categories derived from the clinic has created a kind of no-man's land between the client and the treatment, thus preventing us from developing more appropriate assessment models.

When we turn to the extant research from counseling psychology the picture is somewhat more encouraging. It may be that these researchers are less bound to previous approaches and are more able to explore the possible relationships of prior conditions to the counseling process. For example, Fuller (1964) investigated the problem of sex preferences by clients in selecting a counselor. Patterson (1966) commented on the study, "A male non-client preferred male counselors more frequently than female counselors, and more frequently than female non-clients for both personal and vocational counseling; male clients more frequently preferred male counselors than female clients preferred female counselors" (p. 88)—which is to say that young college men may be much more uncomfortable in seeking counseling assistance from a female counselor than young ladies seeking assistance from a male counselor! Grater (1964) also investigated prior conditions by examining the pattern of client preferences in regard to counseling styles. He found that clients with personal or private concerns preferred affective "warm" counselors, while clients with educational and vocational planning problems preferred the more cognitively oriented counseling styles.²

² However, one must exercise caution in interpreting Grater's findings since only 16 of 86 clients chose to focus on "personal issues" and only ten of those 16 had indicated a preference for a "warm, kind, accepting and friendly" counselor.

Heilbrun (1962) reported the development of a "Counseling Readiness Scale" as an attempt to assess possible dimensions predictive of motivation for counseling. He used the Gough Adjective Check List as his measuring instrument which, of course, substantially limits the dimensionality of his concept "Readiness." However, with this aside, he did report differences between clients who remained in counseling versus those who terminated on the basis of the Adjective Check List scores. He noted that the clients, in this case both males and females, who were less self-accepting, less capable of making a good impression, less able to take responsibility for their actions, and less psychologically minded tended to remain in counseling. Probably the more important question would be what kind of treatment these clients could use most effectively. For example, I think it important to examine how variables such as these might relate as prior conditions affecting the counseling process, since clients remaining in counseling the longest were relatively low on the dimensions such as acceptance of "self" prior to treatment. What effect did this prior condition have on the client's ability to focus on intra-personal exploration? Are clients like these inhibited to such an extent that the counseling process, so defined, would be relatively ineffective? I know that we tend to resist such questions because of the realization that a particular kind of counseling may not really assist some clients, a realization that we may not be "ready" to face.

There have been a few earlier studies that have also examined the "readiness for counseling" issue. For example, Grant and Grant (1950) experimented with a therapy readiness scale and concluded that the ability to express feelings and the amount of responsibility a client would assume were important conditions prior to a client's entry into counseling or therapy. Likewise, Francis Robinson (1950) pointed out that the client's ability to take responsibility in the counseling process differentiated between the clients considered successful versus those considered unsuccessful in counseling. Finally, Barron (1953) examined ego strength (a concept perhaps analogous to the ability to take responsibility) as a possible predictor of positive or negative response to psychotherapy. His results, unfortunately, were equivocal. It is perhaps more unfortunate that the questions raised by some of these early studies on prior client conditions were not adequately followed up to provide more systematic information on the most salient dimensions of the client conditions. We are still at a rather primitive stage in this regard. For example, Truax, in reporting his recent research investigation noted, "Recent research has also lead us to focus upon the personality and pathological characteristics of the patients. While this research is only now being completed, it is clear that certain measures of the degree of initial pre-therapy disturbance of the patient, are indeed significantly predictive of outcome. Thus the general linear

equation model will certainly include as a basic element, the patient's pre-therapy level of personality functioning" (Truax and Carkhoff, 1963).

I think it would be safe to conclude from all of this that on logical and empirical grounds it may be inescapable that we must focus our research on differences within groups of counselees prior to the onset of counseling. The logical basis can be derived from the psychology of individual differences. The empirical evidence, although something less than complete, does support the position. Research, as usual, indicates both how much we do not know and how much we need to know about this problem. As Colby remarked, in another context, at least . . . "such events are beginning to be acknowledged, before they are acknowledged they can't be investigated" (1964, p. 354).

There is a third reason why I think it incumbent upon us to research this area of prior conditions and within-group differences in counseling research. On ethical grounds, I think there are valid reasons to seriously question our control group vs. experimental group procedures. The recent Volsky *et al.* study (1965), used the classical comparison between an experimental group of counselees and a "wait" control group of students who had also applied for counseling assistance. When the control group was called into the counseling center after the post tests were completed, and offered the counseling they had requested earlier . . . "the combination of circumstances—led all of the controls without exception to refuse counseling . . . continuing followups of these controls revealed that none sought formal counseling during the remainder of the time they spent at the university" (p. 160). This rather indelibly underscores the needed research focus I have suggested. Perhaps we can become less concerned over the purity of our research designs and control group comparisons and devote the necessary energy both in theory and research for studies of counselees.

A Research Example

Because two assumptions of our previous research models in counseling no longer hold, we have to face the necessity for creating a more general and therefore more comprehensive research model including the importance of prior differences. The assumption that clients either improved or remained at least unscathed from counseling is no longer valid. Similarly, the assumption that a "wait" control group is a relatively benign research device is now quite problematic. At this point however, instead of issuing the usual call for new research, I would suggest that we might re-investigate some of our previous counseling research and re-analyze some of the data already available from prior studies. This might provide indicators of particularly profitable research

areas. Certainly there are hazards in such ad hoc, after the fact, procedures, especially since we are denied the careful definition of hypothesis testing which proceeds from delineated directing constructs. While acknowledging these deficiencies, I would like to present an example of such an ad hoc investigation, particularly since it illustrates my argument of prior differences and, underscores the general research problem.

Recently we took the opportunity to re-analyze data from a previous counseling study and came to some rather interesting questions concerning the differences within an experimental group of counselees. The original study attempted to measure the effect of counseling between the experimental group and the control group using a set of outcome criteria. (A complete description of the research design can be found in Hummel and Sprinthall, 1965).

The controls and the counseled groups had been randomly assigned from a pool of students after variables usually found associated with academic achievement in school were taken into account: (1) the sample was limited to boys, (2) a screening process eliminated from the sample those who might have moderate to severe emotional problems, (3) both individual and group measurement procedures were used to assess intellectual capacity (the subjects had to score equally high on both the SCAT and the WAIS), (4) a series of formulae were developed to determine the most efficient weighted grade point average as the measure of achievement, (5) a discrepancy score was derived between predicted and actual achievement—pupils in the sample had to fall at least one standard deviation below the mean "D" score of the population. After assignment to the experimental group and the control group, the groups were compared on socio-economic status, religious background, age, extent of family dislocation (death of a parent, divorce, family origin), and educational aspiration. There were no significant differences between the two groups on these variables. After counseling there were also no differences between the two groups! I should say, no differences on the usual criteria used, such as grades, Q-sorts, TAT's scored for N achievement, or measures of value and/or personality dispositions. Incidentally, grades in high school showed a remarkable stability over time. Comparing grades for all the high school boys in the population ($N = 1500$) the 6 month reliability (test-retest) was between $+.95$ and $+.97$. This should give us pause when we desire to use a criterion such as grades in any kind of a "change" study (Sprinthall, 1963). One finding, however, was intriguing. Whiteley (1964), after reviewing the counseling model and the process, decided that a more appropriate criterion for the effect of counseling would be possible through the TAT stories. He devised a system for scoring TAT stories pre and post on the basis of adaptive versus maladaptive change. Judges made ratings on the basis of such questions as:

Does the hero anticipate the consequences of his action?

Does he mediate conflicting dispositions?

Does he employ rational considerations in solving his problem?

Does he see a relation between his present and his future?

The "heroes" of the counseled group were more adaptive than their counterparts in the control group. The post-tests stories for the counseled group presented heroes who were more apt to consider alternatives, options and to examine possible consequences of their behavior ($X^2=4.95$, $< .05$ NDF=1, Whiteley, 1964). Using a coefficient of concordance among three rates, Whiteley reported interjudge reliabilities ranging from $+.55$ to $+.67$, all significant beyond the .01 level.

At this point we decided to apply this scoring system to the balance of the counseled group (since he had used a sub-sample for his work) for possible within-group differences in the counseled group on this dimension. Whiteley had shown that counseled students were different from their controls after counseling. Now the question came to mind—were there any distinguishable differences within the larger sample of the counseled students on the same dimension? In other words, could we assume homogeneity within the counseled group on this variable? In viewing the TAT stories for all 49 counselees, three distinct subgroups emerged: (1) a "change" group—TAT heroes more "adaptive" on post-test, (2) a "no change" group, and (3) a "decline" group. There were twenty pupils in each of the first two groups and nine in the third group. On the criterion measure, then, there were differences within the counseled groups. Using a raw score basis for comparison (a 7 point scale with 4 as no change) the "no change" group ($N=20$) was not significantly different from the control group ($N=20$). The "change" group, of course, was statistically significant from both the "no change" group and the original control group ($t=5.02 < .01$ for the smallest mean difference, Whiteley, Sprinthall and Totton, 1965). To examine whether these differences had any real meaning, we compared the "change" group and the "no change" group with respect to all of the tests administered prior to counseling (we excluded the "decline" group because of the size of the subgroup). The results of such an ad hoc comparison, were quite startling. On intellectual variables the "change" group had higher SCAT scores (the group measure of ability) and higher WAIS scores than the "no change" group. On measured interests the "change" group was higher than the "no change" group on the (SVIB) group V scales (YMCA Secretary, Social Studies Teacher, Minister) and the psychologist scale.³ On the G-Z Temperament Survey, the "change" group was higher on Restraint and lower on General Activity than the "no change" group.

³ The difference in social service orientation was borne out by a similar significant difference on the Allport Vernon Lindsay Social Value Scale between the "change" and "no change" group.

A similar pattern of differences emerged when we examined the assessment interview conducted prior to counseling. In response to a series of questions about perceptions toward family and school, the "no change" group tended to view fathers as extremely strong or the obverse, and the mothers as bad.⁴ Similarly the "change" group tended to view school and education in a mixture of intrinsic/extrinsic terms, while the "no change" group perceived school almost exclusively in extrinsic terms.

The reported differences from this ad hoc study highlight two propositions; one reasonably definite, the other more tentative and hence more interesting. First, there was considerable variation within the counseled group prior to counseling. This, of course, supports the contention that significant variation may exist within almost any group of counselees in advance of the "treatment," and that these differences are usually ignored because of the priority we follow in setting up equivalent groups as counseled and controls. The two sub-groups within the counseled group were quite disparate in three general domains of ability, interest and disposition and perceptions. Probably the more interesting proposition is the second one. In a speculative mode, we could propose that the within group differences in some way prior to counseling predetermined what "use" the clients could make of the counseling. The counseling process itself was didactic and Socratic in nature, asking pupils to actively explore their present circumstances in light of their future goals—"the counselor reflects, questions and interprets in such a way that examination by the counselee of the meaning of certain events and the consequences of certain decisions seems to him to be a natural course of action" (Hummel, 1965, p. 91). Within this framework it is certainly plausible that not all pupils would respond in the same way to this process.⁵ Some reasons for what appeared to be a differential response might be derived from a closer examination of the prior differences. For example, the "change" group was higher on ability and achievement, had interests more similar to occupations connoting "sensitivity," was more thoughtful, and indicated less extremes in perception of parents than the "no change" group. On an a priori basis, it is logical to conclude that these factors might regulate the client's ability to respond to the counseling process.

⁴ A rudimentary scoring procedure was devised to score the interview data responses according to Osgood dimensions of potency, evaluation and activity. For example, a scorer read the pupil's response to an open-ended question about "father" and then scored the response on a 1-5 scale for the three dimensions. A very simple check on judge reliability was made by comparing two judges on a small number of interviews (5). The percent of agreement between the two judges was sufficient to conclude the scores weren't random. The judges agreed approximately 60% to 80% on the interviews checked. Since the study was ad hoc, we did not seek a more adequate check of reliability.

⁵ We did examine the possible influence of different counselors since four were involved. However, the same number of change and no change counselors were represented equally across the caseloads of the counselors.

Summary

The implication from this study could be that similar prior differences might well have existed in other previous research studies designed to measure the outcome of counseling. On a logical basis, as set forth in the first part of this paper, on the basis of speculation found in a review of the literature, and on the basis of our own "ad hoc" investigation, there seems to be legitimate support for the contention that prior differences in clients are indeed significant and limiting conditions. That these conditions have been too often ignored is evident. Equally evident, perhaps, is the set of reasons why we have not solved these difficulties. Certainly the assessment problems are enormous. Accurate assessment is necessary for the client's present and potential functioning and his idiosyncratic personality style in relation to an array of possible types of counseling intervention. Notable is our paucity of language as well as the impoverishment of our assessment procedures in this regard. Harrower has very recently noted the problem in clinical psychology, "However, we were rarely asked or encouraged to demonstrate mental health potential co-existing with the more attention-getting psychopathology" (Harrower, 1966, p. 11). I would suggest that it is the "mental health potential" in her terms, that may be the most important element for prognosis. Similarly, Tyler has recently described the importance of assessment in relation to counseling. She noted the need to develop more effective methods of assessing the client's personality structure, his way of organizing and ordering the world around him. For example, in discussing projective techniques, "It seems to me that they might contribute much more to our work, however, if we could develop ways of scoring or evaluating an individual's performance without reference to psychopathology" (Tyler, 1964, p. 82). Certainly in order to make more accurate prognosis rather than diagnosis this would be essential. In counseling models that purport to enhance individual strengths, to focus on the positive and preventive aspects of personality, to educate rather than re-educate, to promote competence in self that is pro-active, in short, counseling processes that are derived from a developmental model, it is more than just essential, it may indeed be critical for us to elaborate elements that represent salient prognosticators within groups of clients to be counseled. Without such information we can only guess at the most appropriate corrective measures in our practice, a guess perhaps based more on hunch than on evidence. In regard to the second area of what I've called personality style we are also in a rudimentary state, and yet variables such as verbalization, introspection, exploration of feelings, etc., represent nuances crucial to a process such as counseling.⁶

⁶ An example came to mind as I reviewed my own counseling cases over a two-year period in a college counseling center. I found that four clients had requested not to have

When we add to these difficulties the problems involved in deducing the interactive relationships between these prior conditions, and the counseling process itself, we begin to see in outline form at least, the scope of the problem. For example, what styles of intervention are appropriate to what kinds of clients? Here we confront issues such as short to long term counseling, individual to group work, and cognitive to affective orientations. For example, with junior high aged pupils would individual counseling on personal problems really be the "treatment of choice." Likewise it may be problematic to use short-term reality—focused counseling for so-called bright but under achieving high school boys with histories of continued low achievement. And these examples are inadequate in themselves since individual variation has been glossed over. Yet it seems inescapable that we will only understand the process and the outcome of counseling if we understand the differential nature created by such prior conditions within clients. If we can achieve a greater understanding of the variables, however, then we can begin a more systematic and rigorous use of our counseling procedures. Tiedeman (1960) has noted the importance of specifying for each client what a counselor can and cannot accomplish. Such a prognosis, as opposed to traditional diagnosis, will be possible if we search out the relevant variables—if we are willing to lift the lid to an uncharted area—hopefully not to find it to be a Pandora's Box. It is clear that prior conditions are real and not illusions to process and outcome. It is also possible that these conditions may not be limiting in this regard, but challenges to us—challenges seeking solutions.

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the sessions tape recorded—they were all males, had relatively low SAT scores, came from small towns with family backgrounds in the so-called "working-class." When I checked with the other counselors, they had almost the same data!

Another dimension attracted attention almost simultaneously—that of sex differences. Subjectively, at least, female clients seem to be more able to verbalize affect, examine motions, and engage in (what Truax calls) intrapersonal exploration. Checking through one time period, for example, I found four of six female clients had so focused the counseling as compared to four of 13 of the male clients.

If differences such as these, as well as others hold up in adequately designed experiments, we simply must revise some of our "universally" held principles in the counseling process.

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Discussion

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I have no fundamental objections to the thesis of Dr. Sprinthall's paper that conditions or characteristics of clients prior to counseling may influence their response to counseling or its effect on them. I have, therefore, decided to further elaborate upon the thesis of his paper by reviewing some of the existing literature on the characteristics of clients who avail themselves of counseling, who are preferred as clients by counselors, who are considered to be more "ready" for counseling, or who are rated as prognostically more promising.

I would like to begin my presentation with a brief consideration of why we are interested in client selection. There seem to be at least three reasons why some research effort should be devoted to the selection of clients for counseling. There apparently are more clients requesting counseling services than there are counselors available to provide them. If so, a decision must be made in each instance whether to accept the person for counseling or to refer him to some other service. Oftentimes, this is a haphazard process. Many counseling agencies attempt to counsel everyone who applies, generally on a first come first served basis. In these situations, client selection can be largely a matter of counseling the clients who still are in need of, or still desire, counseling after being on a waiting list for a few days up to six months or more. Some improvement in this situation could conceivably be achieved by research knowledge on client selection.

A second reason for our concern with client selection is related to the hypothesis that certain types or methods of treatment may have differential effects on specific types of clients or different categories of problems. It appears that various types of counselors may influence certain clients in a different manner or to a different extent, than they do others. Furthermore, an interaction of

counselor characteristics with treatment methods may also produce varied effects upon clients with particular problems or personal characteristics.

A third reason for interest in client selection is the suggestion that present, or at least traditional, methods of psychological counseling may be ineffective for many clients having particular socio-economic backgrounds, or personal traits resulting therefrom. This has been suggested by the current concern among counselors over the failure of our best known counseling methods to be successful with indigent clients or those from culturally deprived backgrounds (Gordon, 1965; Calia, 1966).

With these as a partial justification for our being interested in client selection, I have attempted a review of existing knowledge and opinion on the topic. This is not intended to be an exhaustive review of the literature on client selection, but only an indication of some information which may facilitate our consideration of the problem and direct us toward potentially productive avenues of further investigation.

Characteristics of Persons Who Seek Counseling

Collier and Nugent (1965) studied characteristics of self-referred, staff-referred and non-counseled college students. Among other things, they found that non-counseled students and self-referred clients resembled each other more than they resembled clients who were referred by faculty or staff members of the college. They also concluded that the non-counseled students had a higher academic point hour than did either of the groups of counseled students, and that non-counseled and self-referred clients had maintained higher high school point hour ratios. They also achieved higher linguistic and total scores on the American Council on Education Psychological Examination than did those clients referred by staff members.

Mendelsohn and Kirk (1962) investigated personality differences, as measured by the Myers Briggs Type Indicator, between university students who did and did not use the counseling center. They report that those students using the counseling center tended to be more introverted and intuitive and less judgmental and feeling oriented than students who did not use it.

A study by Esper (1964) on junior high school students utilized responses on the Mooney Problem Checklist, scores on an intelligence test, and grade point average, to determine characteristics of students who seek counseling. He also discovered that self-referred clients and non-counseled students were generally brighter than clients referred by faculty members. The highest grades were earned by students not seeking counseling and the poorest by those in the faculty-referred group. For whatever it is worth, more adolescent girls were found to be self-referred for counseling than boys of the same age.

Finally, Gray, Kesler, and Newman (1964), considered social factors influencing severely disabled older persons to participate in a rehabilitation program. Their findings were not surprising but are of interest since research is not frequently reported on rehabilitation clients. Among their findings more men than women participated, those with financial problems used the service more frequently, better educated persons participated more than less educated ones, and health and age had little effect on amount of participation.

These studies, then, are examples of research that has been reported and give an indication of the apparent characteristics of persons who elect to use some types of existing counseling services.

Client Factors Associated with Selection, Readiness, Favorable Prognostic Rating, Continuation and Success in Counseling

In the 1959 *Annual Review of Psychology*, Luborsky said, "Those patients who stay in treatment improve; those who improve are better off to begin with than those who do not; and one can predict response to treatment by how well they are to begin with" (1959, p. 324). This suggestion that the people who benefit the most from counseling are those who may be least in need of it is given some support by research on the characteristics of clients selected for counseling or preferred as clients by counselors. Wallach (1962) reported that therapists in a rating situation preferred to counsel with the least disturbed and younger subjects, as well as subjects more aware of their feelings and capable of verbalizing them. Garfield and Affleck (1961) analyzed therapist ratings of outpatients being considered for therapy by the staff of that agency. It was found that certain patients had a high attraction valence for therapists and that there was agreement among the therapists as to whom these patients were. In general, the therapists in the study preferred clients who were intelligent, anxious, motivated, younger, and with some insight into their problems. The researchers concluded that a positive reaction is expressed by therapists toward clients least difficult to work with and possibly least in need of professional help.

An early study of client readiness for counseling, cited by Dr. Sprinthall in his paper, was reported by Grant and Grant (1950). One person rated nine first counseling interview typescripts taken from the files of the University of Chicago Counseling Center on several dimensions thought to be indicative of counseling of readiness (ease of verbalizing, ability to express and deal with real problems, client aim in counseling). A second researcher, without access to these ratings, ranked the nine cases on the basis of a general criterion of readiness for counseling. A correlation of .92 was obtained between the ratings and rankings.

Readiness for counseling was defined in research by Heilbrun (1961a, 1961b, 1962) in terms of client continuation in counseling as opposed to premature termination. Continuation was measured by the number of interviews. Heilbrun reported that, in general, the continuing client comes from a higher socio-economic class, is better educated, more intelligent, more tolerant of anxiety, expresses more self-dissatisfaction, shows greater dependency, and conforms more closely to the cultural personality stereotype appropriate to his or her sex, than the client who terminates counseling prematurely.

Whether frequency of interviews is the most satisfactory measure of continuation in counseling is a question raised in a paper by Lorr (1962) on the relation of treatment frequency and duration to psychotherapeutic outcome. He reviewed studies available up to that time, and from them concluded that duration of treatment (length of time elapsed from beginning to end of treatment) was a more influential parameter than sheer number of treatments. He quotes Thompson (1950), who said about psychoanalysis that, "In actual duration of treatment, in terms of months and years, the patient going five times a week takes about as long to be cured as the patient going three times." Lorr concludes that "change would appear to require the passage of time. Insights are put into practice in daily living. New ways of reacting interpersonally must be tested again and again in natural settings before what has been learned becomes consolidated" (1962, p. 140). With respect to Heilbrun's study, however, it seems reasonable that in the special case of a university counseling center, frequency of interviews may equal number of weeks elapsed since in so many cases counselors see their clients on a once a week basis.

Using the elapse of time as a measure of continuation, McNair, Lorr, and Callahan (1963) compared early "terminators" (those who continued six weeks or less) and "remainers" (those who continued for six months or longer) on ten patient characteristics. Those in the remainder group had a history of less impulsive and less antisocial behavior; they admitted more anxious behavior; they were more self-critical; they were less likely to endorse rigid, irrational beliefs; they were more retiring in inter-personal relations; they were better educated; they demonstrated better vocabulary; and they were considered by therapists to be more highly motivated for therapy.

The prediction of improvement in counseling or the identification of characteristics differentiating clients rated as being good prognostic risks from those rated as poor risks, has also received some attention in the literature. Barron (1953) compared 17 clients judged to be improved as a result of counseling with 16 clients judged to be unimproved, on an early form of his MMPI ego strength scale which they had taken before beginning counseling. The reliability of the improvement ratings was .91. Highly significant differences were found between the mean scores of the two groups on the ego strength scale. Pre-counseling characteristics of the improvers as indicated by

the scale were as follows: good physical functioning; spontaneity; permissive morality; good contact with reality; feelings of adequacy and vitality; physical courage and lack of fear. Characteristics of the unimproved group included many and chronic physical ailments; need for seclusion; intense religious experiences; repressive and punitive morality; and chronic fatigue. Barron concluded that a significant determinant of success in therapy was the strength of the client's ego before therapy began.

Strupp (1962) has made the following statement based on his review of literature on psychotherapy in the *Annual Review of Psychology*:

It is becoming increasingly clear that therapists have fairly specific (and valid) notions about the kinds of attributes a "good" patient should possess as well as about those attributes which make a patient unsuitable for the more usual forms of investigative, insight producing psychotherapy. Patients considered good prognostic risks are described as young, attractive, well-educated, members of the upper middle class, possessing a high degree of ego-strength, some anxiety which impels them to seek help, no seriously disabling neurotic symptoms, relative absence of deep characterological distortions and strong secondary gains, a willingness to talk about their difficulties, an ability to communicate well, some skill in the social-vocational area, and a value system relatively congruent with that of the therapist's. Such patients also tend to remain in therapy, profit from it, and evoke the therapist's best efforts (1962, p. 470-471).

One general conclusion that seems obvious from the above research is that clients who are more ready for counseling, who are preferred as clients by counselors, who continue longer in counseling, and who may have a more successful counseling experience, have characteristics which tend to make them initially less in need of professional counseling or psychotherapy than those persons at the opposite poles of these dimensions. This gives cause to wonder if an inverse relationship exists between need for counseling and likelihood of receiving it or benefiting from it. If such an obvious contradiction could be conclusively demonstrated, it would be a rather damaging indictment. On the other hand, the same peculiar relationship might conceivably be found within other professions as well. In fact, it is possible that the clients in greatest need of most professional services may be least likely to profit from them. In medicine, patients with the greatest need for treatment are those with the most severe and moribund conditions. But don't these patients, because of their proximity to death, have the poorest prognosis for recovery? Or in the case of the legal profession the client in greatest need of legal aid is the one against whom the most complete and convincing case has been compiled. Doesn't he also have the poorest prospects for benefiting from his attorney's legal treatment?

The Interaction of Client and Counselor Characteristics

Although certain client characteristics have been found to be associated with continuation or success in counseling, the interaction of client characteristics with counselor characteristics and/or methods of treatment may have even greater significance. A series of studies relating similarity of clients and counselors as measured by the Myers Briggs Type Indicator have been reported by Mendelsohn and Geller (1963). Their most recent report (Mendelsohn, 1966) suggests that similarity between client and counselor leads to a greater number of counseling interviews and a greater variability in the number of of counseling interviews. Counseling is almost always brief when similarity is low, but it is of variable length when similarity is high. He concludes that these findings represent a replication of their previous findings and suggests that while client personality characteristics affect their decision to seek counseling, client-counselor matching is a more important determinant of counseling outcome.

Cook (1966) placed clients in high, medium and low groups according to degree of similarity in values between the clients and their counselors. Similarity was based on a semantic differential ratings of the meanings of four concepts. After counseling, the groups were compared for change in the evaluative meaning of each of the concepts previously rated. Although significant differences were not found for all concepts, a curvilinear relationship was determined to exist on two, with the medium similarity group showing a more positive change in the meaning of the concepts than either the high or low similarity groups.

Sapolsky (1960) reports the results of two experiments on the effect of interpersonal relationships on verbal conditioning. In one experiment he utilized instructions to create a condition of high or low attraction between subjects and experimenters. In the second experiment, he used a measure of needs in interpersonal relationships to establish compatible and incompatible groups of subjects and experimenters. In both experiments, the experimenter used mm-hm to reinforce sentences which the subject began with the pronouns I or we. In both experiments, the experimenter was present during the acquisition phase and absent during the extinction phase. A typical learning curve was achieved by the subjects in the attractive and the compatible groups and this curve was generally maintained during the extinction period. The incompatible and the non-attractive subjects suppressed the effects of the reinforcement until the experimenter left. Sapolsky drew implications from his research for the counseling situation. He suggested that the subtle cues of the counselor are likely to be reinforcing when the relationship with his client is positive or compatible. For negative-type clients, the influence experienced during counseling might be expressed only after the counseling is terminated.

Research Implications

In a paper on individual differences in behavior and their genetic basis, Hirsch (1962) suggests that . . . "different 'laws' may be found for different subjects, and all subjects must be screened and classified prior to experimentation just as is now done in the study of color vision" (1962, p. 14). In a review of literature directly pertaining to research in counseling and psychotherapy, Kiesler (1966, p. 113) recommends that research designs should incorporate relevant client variables and crucial counselor dimensions so that one can assess which counselor behaviors are more effective with which type of client. Counseling research should come to grips with the need for factorial designs . . . wherein different types of clients are assigned to different types of counselors and/or counseling, so that one can begin to discover the parameters needed to fill a meaningful paradigm for counseling.

A major difficulty in following Kiesler's recommendation is acquiring sufficient numbers of actual counseling clients needed to supply the various cells that occur in such research designs. One solution to this problem might be to establish a center for counseling research design and data storage in an agency similar to CEMREL. Segments of a large factorial study could be conducted in a variety of counseling settings by counselors in those settings who have interest in conducting research but insufficient training or experience to design appropriate studies and analyze their data. Over a period of time with planning and coordination, data could be accumulated on subjects in most cells of an elaborate factorial design encompassing a large number of variables. Furthermore, the subjects would not be of just one age level or problem type, but could be a representative sampling of clients in a variety of counseling settings.

Two other possible solutions to the problem of acquiring sufficient numbers of actual clients for research purposes involve the utilization of counseling analogues. One would be for some ingenious person to attempt to conduct counseling research by means of computer simulated counseling interviews in which counselor *and* client verbal behavior would be programmed. A second and presently more feasible suggestion, would be to simulate counseling relationships by means of actors carefully trained to present specific client roles to actual counselors in believable but well controlled counseling interviews. Heller, Myers, Cline (1963) and Russell and Snyder (1963) are examples of such research successfully employing confederate clients and legitimate counselors.

It seems to me that some very exciting possibilities now exist with respect to research on client selection. We are in greatest need of researchers with creative and innovative ideas having the initiative, motivation, financial means and encouragement to carry them out.

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Discussion

Frank Noble

While I have some quibble with minor points in Dr. Sprinthall's paper, I find myself in strong agreement with the major import of it. That is, we must attend to all three aspects of counseling research—outcomes, process, and the individual differences of subjects—if we are ever to arrive at an understanding of "what styles of intervention are appropriate for what kinds of clients."

It is difficult to believe that counselors should need to be reminded of the importance of individual differences, but unfortunately, it seems to be necessary. As Dr. Sprinthall has pointed out, research in counseling has often ignored individual differences or treated this factor in a simplistic way as an unfortunate or annoying problem to be partialled out by the research design.

Campbell (1965) perhaps epitomizes the type of research which, in its concentration on outcomes, ignores the counseling process and the differences among clients and the control subjects. The study is a twenty-five year follow-up of students at the University of Minnesota. Over 350 who received counseling during their college years were matched with students who did not seek counseling. The matching was done on the basis of college entrance test scores, English proficiency test scores, high school rank, age, sex, type of high school, and year in college. Following the matching, experimental and control group means on a variety of other measures were compared and it was concluded that, "There is little support here for the contention that students who seek counseling are much different from those who do not . . ." (p. 40). Following this conclusion of no significant differences before counseling, it was deemed appropriate to conclude that any subsequent differences between the groups were the result of the counseling treatment. The small, but significant differences in the birth order, emotional stability and comfort of the two groups and the fact that one group volunteered for counseling while the other did not were ignored as not relevant to the study or as providing a more severe test of the hypothesis of counseling effectiveness.

If the assumption of no original differences can be accepted, then the results of counseling—at least during the college years—are truly significant. Counselored students had a one-fourth higher graduation rate, received more advanced degrees, made better grades, achieved more honors, participated more in campus activities, and were more often elected to office. What is most impressive is that these results were achieved by one to three counseling interviews. In fact, these results are too impressive and lead me to suspect that despite the "matching," the relevant variables were not controlled. I would hypothesize that students who seek counseling *are* different from those who do not—they tend to be brighter, more achievement-oriented, have greater affiliative needs, are more anxious, and have an internal locus of control.

Some of the data from the Campbell study tend to confirm these hypotheses. (1) Although in his study academic aptitude was one of the matching variables, he does cite other research that indicates higher academic aptitude in students seeking counseling than in the general University population. Sprinthall indicates that his "change" group was also brighter than the "no change" group. (2) With regard to need-achievement, Campbell found that the counseled students—while still in high school—more frequently indicated an interest in post-graduate and professional training than did their partners from the control group, and they more frequently went ahead to take advanced degrees. (3) The evidence for greater affiliative need comes in part from the significant difference between the groups regarding birth order. Counselored students were more frequently first-borne or only children who, as Schachter (1959) has demonstrated, show greater affiliative needs, particularly as a means of coping with anxiety. These same students joined more campus groups, sought counseling in college, and more frequently sought further help in their adult lives. They also expressed less satisfaction with their adult social life, indicating a desire for more social contacts. (4) The greater anxiety or psychological discomfort of the counseled group is acknowledged by Campbell, but was not considered important because it would presumably result in a more rigorous test of the counseling effectiveness. Anxiety also activates the affiliative drive, however, and may be a significant factor in achievement. (5) The last hypothesized difference between counseled and control students is locus of control. Campbell in interpreting his twenty-five year follow-up data states, "The counseled students were more introspective, more apt to locate the source of inadequacies in themselves, while the non-counseled group cited outside influences" (p. 66).

Thus in striving to match his groups on easily accessible data such as entrance test scores, Campbell failed to consider more important variables which are at least as likely to be of importance in determining the future success and happiness of his subjects as would be a brief exposure to a college counselor. He also falls into the trap of presuming homogeneity in his groups and does

not examine them to see what differences exist within the counseled groups. Campbell was, however, handicapped in that the pre-counseling data was collected by someone else twenty-five years prior to his study and should, perhaps, not be too severely faulted for the limitations in this aspect of the study.

If one were to begin collecting data today that might be of greater utility to some professional grandson twenty-five years from now, how might he proceed? The following might constitute a research strategy that would more adequately show concern for outcome, process, and subject differences:

(1) Identify through review of the literature and post-hoc analysis of existing data those variables that are most likely to prove of differential prediction value. Sprinthall has suggested verbalization, introspection, exploration of feelings, intelligence, attitudes toward parents, ability to take responsibility; I would recommend in addition, achievement-orientation, affiliative need, anxiety and locus of control, and other variables may be equally relevant. Of course, any particular score—high or low—might be an indicator or contra-indicator for any particular "counseling approach" or other intervention.

(2) Find instruments that measure these qualities reliably and validly (now that's quite an order) and administer them to a total institutional population (college, secondary school).

(3) Make counseling available on a voluntary basis.

(4) Compare those who volunteer with those who do not on all variables. How do they differ as groups? How much homogeneity is there within groups?

(5) The program should branch at this point—provide a replicable counseling treatment (or several if the volunteer sample is large enough) to those who volunteer for counseling. Provide other types of replicable intervention—faculty advisement, how to study courses, behavior shaping procedures, to those who do not.

(6) See who profits most (there's that old criterion problem again) from each counseling style and each intervention. Notice the focus here is not on comparing the relative effectiveness of different treatments, but rather seeing what kinds of people profit most from what kinds of treatment. Are those who profit most from Treatment A relatively homogeneous? Different from those most profited by Treatment B? Are least-profited in some counseling treatment like most-profited in another? Are those who are least-profited by counseling more like those profited by some other intervention technique?

(7) In a subsequent year, utilizing diagnostic or prognostic indicators discovered in the first phase of the study, assign some students to recommended treatments; assign controls on random basis to the same treatments.

(8) See if more students fall into improved or profited groups when so assigned, than when randomly assigned. (I would also include a no-treatment group here.)

(9) The results should be fairly clear diagnostic and prognostic indicators, matching students with appropriate treatments.

We are engaged at Peabody in the first phase of this study. First we tested all Freshmen using the ETS College Student Questionnaire (family independence, peer independence, liberalism, social conscience, cultural sophistication, motivation for grades, and family social status); Wrightsman's *Philosophies of Human Nature* (view of others as being trustworthy, having free will, altruism, independence, and being variable or complex); Yunker and Block's *Attitudes Toward Intellectualism-Pragmatism*; Komorita's *Attitudes Toward Segregation*; Taylor's *Manifest Anxiety Scale*; Alpert and Haber's *Achievement Anxiety* (facilitating and debilitating); Rotter's *Locus of Control*; Gough's *Adjective Check List* (n-affiliation, n-achievement, counseling readiness); and the *American College Test*.

During the fall testing we asked all students to indicate interests in group or individual counseling for personal or educational/vocational problems; the majority indicated an interest. Analysis of differences between volunteer and non-volunteer groups are being run using all measures, but especially n-affiliation, n-achievement, locus of control, anxiety, ability, and eventually achievement (GPA).

A second questionnaire regarding interest in counseling will be administered at the end of the first semester. It is more specific and indicates actual plans to begin counseling second semester. We presume fewer students will volunteer. A second comparison of new volunteer and non-volunteer groups will be made; we hope if no significant differences are obtained in these comparisons, at least trends may be indicated as we move closer to actual counseling contacts.

Counseling will begin second semester. The counseling treatments will consist of structured, time-limited group counseling which we hope will be replicable. A new analysis will be made comparing those who actually begin counseling with those who do not. A careful check will be made regarding persistence in counseling to see if the same variables are operant that separate volunteers from non-volunteers.

The second phase of the study will attempt to ascertain who profits most from the counseling treatment. The criterion measures include GPA; persistence in college; scores on satisfaction with faculty, administration, and other students; study habits; extra-curricular involvement; and motivation for grades obtained from the spring administration of the CSQ. All freshmen students will again be tested in a setting divorced from the counseling treatment.

Analysis of those who profit most and least from the counseling treatment will be made. If we discover a degree of homogeneity in the most-profited group or least-profited group on whichever prove to be the relevant variables, we will then select students with similar scores from the non-treated group to see if they have similar criterion scores.

The next phase of the study, beginning fall 1967, will be to select students for the group-counseling treatment whom our predictors indicate would be most likely to profit, and compare these students' changes on criterion scores with a random group of students who receive the same treatment, and a group of students with similar predictor scores who receive no treatment.

We hope this will give us sufficient data to indicate what kinds of students are likely to profit from this particular treatment (structured group counseling) and be able to go on to either other types of counseling treatments for volunteers (presuming they are different from non-volunteers), or perhaps to try some non-counseling interventions with non-volunteers.

This approach is slow work, requiring considerable time, but seems to us the most expeditious approach to attempt to arrive at an understanding of the kind of intervention most likely to prove helpful to a particular type of client.

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PART II

THE SELECTION OF COUNSELORS

Introduction

The first major paper on this topic is by C. H. Patterson, Professor of Educational Psychology at the University of Illinois. As he states in the introduction, the focus of his work is threefold: (1) evaluation of the research literature on counselor characteristics; (2) evaluation of the research literature on counselor selection; (3) consideration of recent developments in counseling theory and practice which have implications for research on counselor characteristics and selection.

Giving major attention to the third focus, Patterson calls for longitudinal studies of predictive relationships between scores *or* ratings prior to entrance and outcomes of training. After an evaluation of the major problems in instrumentation, he raises the possibility of non-linear relationships between predictive measures and the criterion.

Martin J. Bohn, Jr., Coordinator of Counseling Internships and Assistant Professor of Education at Washington University, noted that the studies cited by Patterson providing differences between counselors and other groups were frequently of statistical significance but not actually useful in selection.

Bohn further comments upon three questions he feels Patterson raises: What is the process of "counseling?" What are the effects of counselor training? What are the personality variables relevant to counselor selection? Bohn concludes by stressing the importance, as did Patterson, of the counseling relationship as a dimension in the study of counselor selection.

Francis P. Robinson, Professor of Psychology at the Ohio State University and Editor of the *Journal of Counseling Psychology*, gives particular attention to the matter of the changing purposes of counseling and the discovery of new approaches to counseling work. Noting that the future counselor may be quite different from present experienced counselors, he suggests that any future counselor should be able to play many roles to fit the needs of a variety of clients.

While Robinson calls for the development of counselors who are broadly competent, he suggests the profession may need to develop a series of specialists in areas such as psychotherapy, vocational development, and modeling behavior. Selection research will then need to have specific definitions of the type of counseling being predicted.

Ralph Mosher, Assistant Professor of Education at Harvard University, presented the second major paper on the selection of counselors entitled "Teacher Effectiveness Research: Implications for Research on Counselor Selection and Training." For Mosher, the issue of who to select and how to train are inseparable from the conceptual issue of what effects the counselor is to produce.

Mosher approaches the problem of counselor selection from an examination of the analogous questions of how to select, train for and evaluate teacher effectiveness. He suggests a close analogy between teaching and counseling as educational processes and in their actual practice. He concludes with the results of recent research on cognitive flexibility as a dimension of counselor effectiveness.

Lawrence E. Taliana, Associate Professor of Psychology and Guidance at Southern Illinois University at Edwardsville, stated that the concept of cognitive flexibility described by Mosher as referring to dimensions of open mindedness, adaptability, and a resistance of premature closure has an interesting parallel in research on teaching and counseling effectiveness. The implications are seen as especially provocative if cognitive flexibility-rigidity is not affected by counselor education programs.

Taliana concludes by raising the question of whether researchers aren't looking at the wrong end of the system; if their attention shouldn't be focused on the counselor educator and the interaction of student and professor.

William C. Cottle, Professor of Education at Boston College and President of Division 17 (Counseling Psychology) of the American Psychological Association, provided the second discussion of Mosher's paper. For him, theory and practice have to be highly interrelated if they are going to be productive and effective. Regrettably, much research is piecemeal, unrelated, and contradictory.

While counselors talk of individual differences and even emphasize it in their counseling, research is done by combining results on a group basis and thereby masking changes which happen within individuals. Lack of longitudinal research is another handicap. Cottle closes by raising a number of questions about the nature of flexibility and its relation to questions of adaptability and functioning in a variety of roles.

The Selection of Counselors*

C. H. Patterson

This paper will attempt to do three things: (1) Evaluate research on the characteristics of counselors; (2) Evaluate the research on the selection of counselors; and (3) Consider the implications for research on counselor characteristics and selection of recent developments in counseling theory and practice. Major consideration will be given to the third topic.

Research on Counselor Characteristics

There have been a number of studies which have simply attempted to describe counselors, or more usually, students preparing to be counselors. DiMichael (1949), in an early study of the interests of counselors, found that rehabilitation counselors produced a profile on the Kuder with Social Service at the 98th percentile, Persuasive at the 82nd, Literary at the 65th percentile and all other scales below the 42nd percentile. At the same time, Kriedt (1949) found that guidance psychologists showed social service interests on the Strong Vocational Interest Blank (SVIB). Patterson (1962a) found a national sample of rehabilitation counselor students manifesting social service interests on the SVIB, and Foley and Proff (1965) reported a similar finding for a national sample of NDEA institute students. The rehabilitation counselors scored higher on the psychology keys than did the NDEA students.

On the Minnesota Multiphasic Personality Inventory (MMPI), counseling students have been found by Wrenn (1952) to score above the mean on the K

* In this paper counselor and psychotherapist, and counseling and psychotherapy, are considered to be equivalents and are used interchangeably.

scale (T score of 70 for women, 65 for men), Ma, and Mf and below on Si. Cottle and Lewis (1954) found male counselors in college counseling bureaus to score above the mean on the F and Mf scales, and below the mean on the Ma and Si. Patterson's (1962) rehabilitation counseling students were high on K, Mf, and Ma and low on Si, and Foley and Proff's 1965 findings were similar.

Wrenn (1952) reported counseling students to score high on the Restraint, Emotional Stability, Friendliness, Objectivity, and Personal Relations scales of the Guilford-Zimmerman Temperament Survey (GZTS), and Cottle and Lewis (1954) corroborated these findings for all but the Restraint scale. Wrenn's students scored highest on the Theoretical and Religion scales of the Allport-Vernon-Lindzey Study of Values. Patterson (1962), and Foley and Proff (1965) obtained Edwards Personal Preference Schedule (EPPS) scores on their samples. Both found male counseling students to score above the mean on Intraception, Deference, Nurturance, and Affiliation; female counseling students were high on Intraception. The rehabilitation counseling students were low on Abasement also, as were the female (but not the male) NDEA students.

Kemp's (1962) 45 school counselors scored high on Deference, Intraception, Affiliation (Nurturance scores were not reported), and Order, and low on Aggression and Achievement.

Moredock and Patterson (1965) studied groups of counseling students at four different levels of preparation, using six scales of the California Personality Inventory (CPI): Sociability (Sy), Social Presence (Sp), Self-acceptance (Sa), Tolerance (To), Intellectual Efficiency (Ie) and Flexibility (Fx), and the Rokeach Dogmatism (Form D) and Opinionation (Form C) scales. Mean scores for students at the first two levels were close to the means for college students given in the manual for the CPI. Scores tended to increase with level of training, with the mean scores of students at the highest level (practicum) being approximately at the standard score level of 60 on the norms. On the Dogmatism Scale, students at the practicum level scored lower than students at the other levels. There were no significant differences on the Opinionation Scale. On the Dogmatism Scale, the means of the students at the first three levels were above the mean of 137 English College students, which is the only norm group reported for this form. On the Opinionation Scale, the means of students at all levels were below the mean of 186 Michigan State University students. Since the levels were represented by different students, it is not possible to conclude that changes were the result of increased preparation. It could be, and perhaps is likely, that there is some self-selection of students applying for and entering the practicum at the University of Illinois. No changes were found between scores at the beginning of the term (an eight week summer session) and at the end.

In another study, Patterson (unpublished study) tested NDEA institute students, regular counseling students, and noncounseling students at the beginning and end of an academic year of full time study, using scores on the CPI Sa, Wb (Well-being), To, and Py (Psychological-Mindedness) scales, the Barron Ego Strength Scale and the F scale. There were no significant differences between the NDEA and regular students either at the beginning or at the end of the year. Scores of the total counseling group were at about the 60 standard score level on Sa, To and Py, and about 55 on Wb. Scores did not change significantly from beginning to the end of the year. The noncounseling students scored significantly lower than the counseling students in the fall on Wb and Py; in the spring they were significantly lower than the counseling students on Sa and Py. On the Barron Ego Strength Scale, the counseling students scored slightly above the mean of Barron's 40 graduate students, while the noncounseling students scored slightly below both in the fall and spring, the differences being statistically significant in both cases. The counseling group score increased between the fall and the spring, but though just reaching statistical significance, the increase was small (1.59 points). The noncounseling group increase of 1.27 was not significant. On the F scale, the counseling group means (2.89, fall; 2.57, spring) were below the authors' norm (3.81). But the noncounseling students were also below the norm (3.25 and 2.87), although significantly higher than the counseling means in the fall. Both the counseling and noncounseling means decreased significantly from the fall to the spring, however.

Strupp (1962) reports an interesting study by W. S. Jones which, though using college students unfamiliar with psychotherapy, has some relevance. The reactions of students to patients presented to them by a sound film were related to their scores on the F Scale. High authoritarians tended to be more rejecting of a hostile, demanding patient, and more directive and moralizing with him, than students with low scores.

Mahan and Wicas (1964) administered the Ways of Life (consisting of 13 scales related to philosophies of life), Self-Description (a forced choice adjective checklist measuring dominance, inducement, submission and compliance), and the Structured Objective Rorschach Test to 25 students in an advanced NDEA institute. The results were interpreted to characterize the students as "highly controlled, as sensitive to the expectations of society and authority, as 'doers' rather than 'thinkers', as defenders of the established order, and as rather repressed individuals not much given to introspection or self-analysis." The authors are critical of the ability of such counselors to deal with the emotional behavior of clients.

The results of studies of the personality of counseling students, though yielding results which indicate that these students differ in expected directions from the norm groups on the measures used, are of little practical value, for

the following reasons: (1) the differences, though statistically significant, are so small as to be of little practical significance or use; (2) when compared to scores of other college graduate students on some of the instruments, such as the MMPI, the scores of counseling students are little different; (3) although it is suggested that scores of students at the advanced practicum level of training are higher than the scores of beginning students, probably through a process of selection, it cannot be assumed that these students are better counselors, or better potential counselors, than the beginning counselors; (4) there is some evidence (in the Mahan and Wicas (1964) study) that some counseling students do not appear to possess characteristics usually considered desirable in counselors. This suggests that there are differences in the concept of the nature and function of counseling and of the related characteristics of the counselor. Thus, while (5) it would appear to be desirable to study the characteristics of those functioning as counselors rather than counseling students, the differences in functions among those called counselors enter in. As is well known, there are many individuals carrying the title of counselor who are counselors in name only, functioning mainly as dispensers of information and services, administrators or managers of services, record keepers, test administrators and scorers, etc. This has implications for the criterion problem to which we will return later.

A number of studies have met one of the objections to the general studies reviewed above. These studies have compared groups of counselors, or counseling students, differentiated in some way in terms of "goodness" or effectiveness as counselors.

Dispenzieri and Balinsky (1963) utilized a rather specific criterion: change in interviewing skills during a semester as measured by increase in reflection of feeling responses on a modification of Porter's test (1950). Some of the students received instruction including role-playing practice, and others only lectures. But there was no relationship between increases in interviewing skill and the F scale or the Taylor Manifest Anxiety Scale in either group.

Brams (1961) studied the relationship between MMPI scores, Manifest Anxiety Scale (MAS) scores, the Bills Index of Adjustment and Values (IVA) scores and the Berkeley Public Opinion Questionnaire (a measure of tolerance for ambiguity), and supervisor ratings on the Communication Rating Scale applied to interviews of 27 students in a counseling practicum. None of the correlations were significant, except with the Berkeley Public Opinion Questionnaire ($r = .36$), which was significant at the .06 level, suggesting that tolerance for ambiguity is associated with successful communicative relationships. The means of the students were above norms on the MMPI K and Mf (males), and on the IVA, and lower on the MAS and Berkeley POQ.

Steffle, King and Leafgren (1962) had 40 NDEA institute students rate each other at the end of the semester in terms of the "extent to which you

would be apt to go to the various members of the Institute for counseling, if you were a student in a school where they were working as counselors." High agreement among raters was found. The top and bottom students were compared on measures of academic aptitude, interest and values, personality and self concept. The most "effective counselors" were not significantly better in academic aptitude (Miller Analogies Test), but achieved higher grades in prior graduate work in the institute. They scored higher on five of the SVIB social welfare scales, and on the Interest Maturity scale. They were lower on the Dogmatism Scale. On the EPPS, they were significantly higher on Deference and Order, and lower on Abasement and Aggression. There were no differences in self concept, as measured by the Bills Index of Adjustment Values. The authors suggest that perhaps academic performance influenced evaluations of each other as a counselor.

Demos and Zuwaylif (1966) had three practicum supervisors rate thirty students in an NDEA summer institute for counseling effectiveness. Those in the upper half were compared with those in the lower half of the distribution. There were no differences in scores on the Allport-Vernon-Lindzey Study of Values or the Kuder Preference Record (Personal). On the EPPS, the counselors rated more effective scored higher on Nurturance and Affiliation, and lower on Autonomy, Abasement, and Aggression. Sattler (1964) found that supervisors' ratings and staff ratings of NDEA counseling students were not related to Kuder Form D High School Counselor scores.

Wicas and Mahan (1966) obtained ratings by an instructor and by peers for the 25 NDEA institute students reported on earlier (Mahan and Wicas, 1964) to whom *The Ways of Life, Self-Description*, and the *Structured Objective Rorschach* had been administered. The peer ratings and the instructor ratings selected the same eight best and eight lowest students except for one instance, so the instructor ratings were used. The high rated counselors indicated more sympathetic concern for others, and were more concerned with improving society and the maintenance of appropriate controls over self and others; the low rated counselors indicated greater desire for activity with the environment. The high rated counselors described themselves as less dominant, more submissive and more compliant. On the SORT the high rated students were more conforming and less persistent. Lister (1966), commenting on this study, notes that "One is tempted to conclude that these good counselors resemble organization men more than agents of social change."

Russo, Kelz and Hudson (1964) supported the findings of Steffle, Leafgren and King that students rated as better counselors scored lower on the Dogmatism scale. Cahoon (1962) reports similar findings. The results of a study by Milliken and Paterson (1967) tended to support the findings of less dogmatism in the more effective counselors. Kemp (1962), in a comparison of counseling students scoring high and low on the Dogmatism scale, found that

the high scorers were more evaluative, interpretative, and probing, while the low scoring students chose more understanding and supportive responses on the Porter test (Porter 1950). McDaniel (1967) reports a correlation of .48 between the Budner Scale of Tolerance-Intolerance of Ambiguity and supervisors' practicum ratings of 90 students, suggesting that better counselors are more tolerant of ambiguity.

Kazienko and Neidt (1962) compared students rated by their instructors in the upper quarter in counseling ability or potential with those rated in the lower quarter, in a national sample of NDEA institute students. The good counselor trainees seemed to perceive themselves as more empathic, more democratic, more understanding, and more patient on the Bennett Polydiagnostic Index, a self-rating instrument.

Demos (1964) found that the ten best and the ten poorest students in an NDEA institute differed significantly in their performance in short-term vocational counseling interviews, on the basis of ratings by ten secondary school counselors with varying orientations to counseling. The best students were more empathic, evidenced more unconditional positive regard, and showed more respect for the client.

Arbuckle (1956) compared students selected as those to whom other students would go for counseling and the students to whom they were least likely to go, with the remaining students in a class of 70 in a counseling course. It is not clear how many students were in each group; the six "highly selected" and "six rejected" are referred to in some comparisons, but the statistical comparison apparently involved more than these. On the Heston Personality Inventory, the selected students scored significantly higher on Confidence than the other students, and the rejected students scored significantly lower on Home Satisfaction. On the MMPI, the selected students were lower on Hs, D, Pa, Hy, Pd, Pa, Sc and Ma. On the Kuder Vocational Preference Record, the selected students scored higher than the other students on the Social Service, Literacy, Persuasive, and Scientific Scales, while the rejected students did not differ on any scales from the remaining students.

An interesting study by Whitehorn and Betz (1960) found that therapists who were more successful with schizophrenic patients (in terms of number discharged as "improved") scored higher on the SVIB Lawyer and CPA scales, and lower on the Printer and Math-Physical Scientist Teacher scale. These differences are not immediately meaningful. But it was hypothesized that the successful psychiatrists were characterized by a problem-solving rather than a regulative or coercive approach, valuing responsible self-determination rather than obedience and conformity. The interests of the less successful psychiatrists would suggest a black or white, right or wrong approach, viewing the patient as needing correction, valuing deference and conformity. Study of the case records of the two groups of psychiatrists revealed differences in styles of

therapy consistent with these interpretations of the SVIB differences. These differences apparently relate only to success with schizophrenic patients, since the two groups of therapists were equally successful with depressive and neurotic patients. Moreover, a later study (Betz, 1963) found that while the successful psychiatrists were more effective with "process" schizophrenics there was no difference with "non-process" schizophrenics. A further study of the two types of therapists by Carson, Harden and Shaws (1964) found that the successful therapists were able to derive more information from interviews with role-played "patients" who were distrustful, hostile, and expecting harm, while the other type of therapist got more from "patients" who were trusting, friendly and expecting help. There are thus no differences which appear with all classifications of patients. It may be, however, that the differences relate to the severity of the disturbance, or the difficulty of patients to work within the therapy relationship.

A study by Combs and Super (1963) of the perceptual organization of effective counselors offers a promising approach. Twenty-nine NDEA institute counseling students were ranked by 14 instructors in terms of preference in hiring them as counselors, the final rank order of being determined in conference. These rankings were correlated with the ranks of ratings of 12 perceptual inferences based upon descriptions of four human relations incidents by the students. Four graduate research assistants, trained in making such inferences, made the ratings; the sum of the four ratings, demonstrated to be highly reliable in terms of interrater agreement, constituted the scores which were rank ordered. All but two of the correlations were significant beyond the .01 level, and these two were significant at the .02 and .05 levels; they ranged from .394 to .641. The effective counselor more frequently utilizes the internal rather than the external form of reference; is oriented toward people rather than things; sees people as able rather than unable, as dependable rather than undependable, as friendly rather than unfriendly, as worthy rather than unworthy; sees himself as identified rather than unidentified, as revealing rather than not revealing; sees his purpose as freeing rather than controlling, as altruistic rather than narcissistic, and in larger rather than smaller meanings.

As was the case with the studies of counselors in general, these studies comparing more effective with less effective counselors suffer from some deficiencies. They deal with students rather than with trained counselors. The criteria of effectiveness are not clear or sometimes not even stated, and probably vary among raters. To quote Sprinthall, Whiteley and Mosher (1966): "No specification is given as to what kind of behavior distinguished those subjects adjudged most competent from those considered least competent." Different raters perhaps have different concepts of what good counseling is. This could lead to conflicting results, as suggested by the Wicas and Mahan study. There is a question as to whether the differences existed prior to the beginning of

the counselor education program. Finally, differences tend to be small, even though statistically significant, and thus of little practical use in selection. In studies where counselors are rated as best and poorest, or most and least effective, it might be objected that the characteristics "discovered" in the best counselors were involved in their selection, even though the ratings of effectiveness were made by different evaluators or judges than were the ratings of characteristics, as in the Demos study. That is, the characteristics are criteria which are shared by both sets of raters, and such sharing or agreement is not necessarily evidence of their validity.

The matter of whether differences exist prior to training is a crucial one for selection. Selection studies are concerned with the relationship of characteristics prior to entrance upon training or practice to later performance in training or practice. Let us turn then to studies of counselor selection.

Research on Counselor Selection

The research on the selection of counseling students is surprisingly sparse. The review articles by Hill (1961) and Patterson (1963) are essentially reviews of practice rather than of research. Hill and Green (1960), in their review of research on the selection and preparation of guidance and personnel workers, noted that their search had revealed no major longitudinal study of counselor selection, training, placement and evaluation. Most counselor education programs require some tests of prospective counseling students (Patterson, 1963). However, there is little or no evidence that these test results are used in selection, or if so, how they are used, what cutting scores are used, what criteria are employed, and what the basis is for their use.

Callis and Prediger (1964) evaluated the Ohio State Psychological Examination (OSPE), the Miller Analogies Test (MAT) and the Cooperative English Test: Reading Comprehension, as predictors of academic achievement of students in three year-long advanced NDEA institutes. Part Three of the OSPE (Reading Comprehension) was the most consistent predictor (R 's of .59, .48, .61); the MAT correlations were lower (.36, .24, .42).

Blocher (1963) studied the relationship of measures obtained on 30 NDEA enrollees on admission and at the end of the first quarter with the pooled rankings of "level of predicted performance as a school counselor" of four staff members, made at the end of the year. Undergraduate grades, recommendations, interviews and the MAT were used in selection for the institute. Scores on the NDEA Comprehensive Examination in Counseling and Guidance and the High School Counselor score on the Kuder Preference Record, Form D, were obtained at entrance. Pooled peer rankings of predicted effectiveness as a high school counselor and grades were obtained at the end of the first quarter.

The multiple R of the latter two measures with the criterion was .71; that for the first two was .37. The Comprehensive Examination correlated .67 with the first quarter grades, but only .29 with the criterion rankings, and $-.01$ with the peer rankings. Peer rankings at the end of the first quarter correlated .62 with criterion rankings. The addition of grades did not add significantly to the multiple R (.77) of the other three variables. The Kuder score showed low negative correlations with peer rankings and the Comprehensive examination, but a low (.20) positive correlation with the criterion ranking. The measures available prior to entrance would apparently not be particularly effective selectors. Blocher suggests the use of measures obtained after admission for selective retention when selection is needed because of limitations of practicum admissions.

Rank (1966) has developed a Film Test of Counselor Perception, consisting of excerpts from ten counseling interviews, each with from 15 to 20 statements about the client, counselor, and their interaction, to be rated on a Likert-type scale. Using a scoring key developed on 60 NDEA student responses at the beginning of the practicum, scores of 30 other students at the beginning of the practicum correlated .41 with staff rankings following the practicum. These are apparently the same subjects studied by Blocher (1963).

Wasson (1965) reports a study of 30 students in a year long NDEA institute, in which criteria were peer ratings, staff ratings, and ratings of taped segments of practicum counseling interviews. All students took the MMPI, EPPS, MAT, OSPE, SVIB, and the NDEA Comprehensive Examination in Counseling and Guidance. In addition, each was rated on the Wisconsin Relationship Orientation Scale, on the basis of responses made to eight hypothetical counseling situations taped prior to their selection for the institute. Of over 350 correlations of test scores with the criteria, only six were significant: MMPI Sc with staff ratings ($-.51$), EPPS Nurturance with counseling segments (.47), EPPS Heterosexuality with peer ratings (.39), NDEA Comprehensive Examination Occupational and Educational Information with counseling segments (.42), SVIB artist with counseling segments and staff ratings (.36 and .38). These correlations present no pattern, and could well be due to chance. On the other hand, the Wisconsin Relationship Orientation Scale correlated .61 with counseling segments, .54 with staff ratings, and .61 with peer ratings. The scale did not correlate significantly with any of the tests.

Ohlsen (unpublished study) studied the relation of 80 scores from a selection battery to three criteria in a group of 29 NDEA students in a beginning year-long institute for the preparation of elementary school counselors. The measures included the MAT, the OSPE, the MMPI, the SVIB, the EPPS, and the NDEA Comprehensive Examination. Criteria were the combined ratings of staff, and the combined ratings of peers, of each student as (1) a counselor of

children, (2) as a counselor of parents, and (3) as a consultant to teachers. The three ratings were highly interrelated, and the staff and peer ratings correlated from .48 to .74. The NDEA Comprehensive Examination, the OSPE and the MMPI failed to produce any significant correlations. The MAT correlated negatively ($-.18$ to $-.48$) with ratings. On the EPPS, Intracception showed correlations from .15 to .48 with the criteria ratings, and Dominance and Aggression produced negative correlations ($-.07$ to $-.35$ and $-.36$ to $-.60$). Several of the SVIB social welfare scales yielded significant correlations (YMCA Physical Director, Social Science Teacher, City School Superintendent, Social Worker, Minister); in addition, other scales showed significant correlations with one or more of the criterion ratings (Engineer, Production Manager, Musician-Performer, Pharmacist, Advertising Man, President-Manufacturing Company).

A study by Dole (1963, 1964) related a large number of variables to ratings of NDEA staff supervisors, the supervising principals, and state supervisors. The subjects were graduates of a school counseling workshop and two NDEA summer institutes who were employed in Hawaii. The criterion measure consisted of eight five-point scales (personal characteristics, teacher and staff relationships, counselor-student relationships, general school services, guidance organization and administrative skills in guidance, professional growth, and counselor community relations). Instruments included the MAT, the Minnesota Teacher Attitude Inventory (MTAI), the Rokeach Dogmatism Scale, the Dole Vocational Sentence Completion Blank, the SVIB, the Gordon Personal Profile and the Cottle Scale of Attitudes, in addition to self-appraisals (rated by judges), ratings of counselor potential by principals (six items from the criterion scale used with the workshop students prior to the workshop), peer ratings, and other measures. The study is difficult to summarize since there were three groups with differing sets of instruments and other measures. The three sets of criterion ratings were not significantly correlated with each other. It is thus not surprising that there were no consistent relationships between the selection battery and the criterion ratings. Furthermore, there were no consistent significant relationships between selection variables and any set of ratings across the three groups. A number of significant correlations did occur, but little confidence can be placed in them considering the lack of consistency and the small samples (11-32). Dole suggests that the self-appraisal, ratings of Counselor Potential, and undergraduate grade point ratio may be promising predictors.

The results of these prediction studies do not appear to be particularly promising. The studies reviewed here offer little in the way of validated selection procedures. The results are similar to those of the extensive study by Kelly and Fiske (1951) of the selection of VA clinical psychologists. It must be remembered, however, that counseling students are selected, or self-selected,

on academic achievement and ability, interest, and probably to some extent on personality variables. Thus, restricted ranges on tests of academic ability, such as the MAT, or on SVIB scales, as well as perhaps scores on other tests would limit or reduce the size of correlation coefficients with criterion variables. However, studies reported in earlier sections indicate that the ranges of scores are not highly restricted, approaching if not equaling those of college students in general or the norm groups, as indicated by standard deviations. There is no doubt a relationship between academic ability as measured by undergraduate grades and tests such as the MAT with academic achievement at the graduate level, but perhaps beyond a necessary minimum, high academic ability is not related to counseling potential. In fact, it has been suggested by some that the MAT may select in reverse in terms of counseling potential, and the negative correlations obtained by Ohlsen would support this contention. This concept of a minimum score may apply also to certain interest and personality variables. This suggests that perhaps some research should be directed to determining if this is the case, and what such minimum scores might be.

A major problem with selection studies, however, is the criterion. Academic grades are generally deemed unacceptable. Thus, ratings are usually resorted to. As Dole's study demonstrates, ratings of the same variables vary, depending on who is doing the rating. While peer ratings and supervisor or staff ratings are sometimes highly related, as in the Ohlsen study, this may be due to the sharing of common biases, and may thus represent reliability rather than validity. Where others, such as principals, do the rating, and where the criterion ratings, as in Dole's study, are complex, including many noncounseling functions with no control of weightings, lack of agreement occurs. Some raters, or groups of raters, may be rating on factors irrelevant to or unrelated to counseling, such as cooperativeness, conformity to the school or agency program, public relations ability, administrative or coordinating ability, and case management or clerical efficiency.

Even when counseling is presumably being rated, it may be defined differently by different raters. Skill in imparting information, or interpreting test scores, or in placement in a job, or in gaining admission to a college, or in establishing a therapeutic relationship (Knupfer, Jackson, and Krieger, 1959), for instance may be defined as counseling.

It cannot be assumed that practicum supervisors' grades or ratings are any more valid than ratings of principals, superintendents or others. Johnston (1966) reports a study in which practicum ratings were correlated with ratings by principals and superintendents related to the nature of the counselor's interpersonal relations with others (teachers, administrators, parents and students), the counselors' practical judgment, the raters' trust in the counselor's ability to perform their jobs, and evidence of professional commitments and competencies. Practicum ratings correlated .09 with the ratings of both principals

and superintendents, who correlated .71 with each other. Practicum ratings correlated .43 with scores on a revised form of the NDEA comprehensive examination, suggesting (Bergin and Solomon, 1963, referred to later) that these ratings are based in part, if not primarily, on academic ability and performance. The ratings of the principals and superintendents did not correlate with scores on the examination. This does not necessarily mean, however, that these ratings were valid measures of counseling competence.

It is apparent that before we can get very far in selection studies, it is necessary to define the criterion. It will be assumed in the remainder of this paper that we are concerned with the selection of those with the capabilities for engaging in a counseling relationship. It is recognized that counselors engage in other activities besides counseling, but it is assumed that these activities are secondary to counseling, and counseling is the major function of a counselor. In addition, it must be assumed that other activities of a counselor are not inconsistent with counseling; that is, that they do not require quite different aptitudes, abilities, or personality characteristics.

This is a restriction that might not be accepted by many who employ, or who wish to employ, persons with the title "counselor." It appeared that we had made considerable progress, and had even reached agreement, that the major function of a counselor was counseling. The policy statements of APGA (1964), ASCA (1963a, 1963b), and ACES (1963) are concerned with counseling as the major function of the counselor. But recently we have witnessed a number of suggestions, even demands, that counselors should engage in other activities to a major extent, even to the point of abandoning counseling. Shoben (1962) proposes that the major concern of the school counselor should be the "continuous reconstruction of the school culture," and that in interviews with individual pupils, he should be concerned not with helping the pupil but with obtaining information about the school environment as a basis for its reconstruction. Stewart and Warnath (1965) also define the counselor as a social engineer, less concerned with individual pupils than with modifying the school and society. Washington (1966), discussing the counselor's functions in the job corps, demands that counselors do everything but counseling. My response to this approach (Patterson, 1966a) is that while we certainly need to be concerned about the environment of the school and of society, and that while prevention is desirable, we still need counselors to work with individuals with problems, to work remedially with those who have lived in and will continue to live in a less than perfect school and society. Someone will be needed to provide counseling, and if counselors become engrossed in other duties, others will engage in counseling. Perhaps we need not be too concerned about the introduction of the concept of the counselor as a change agent. It has been suggested (Everett Rogers, communications expert, in a discussion at a conference) that a major requirement of a change agent is empathy, since in

order to influence people he must understand those whom he is trying to influence. Empathy, as we will indicate later, is the prime requirement of a counselor.

What is Counseling, or What Are We Selecting For?

Assuming that we are to select individuals to engage in counseling, what is counseling? It is the failure to define and delimit counseling which perhaps has contributed to the problem of determining what those who are called counselors should be expected to do. Counseling has become increasingly loosely defined, until it seems we have reached the point where anything that any counselor does, or can be induced to do, becomes counseling. And anyone who gives information is called a counselor. Thus, we have the incongruous claim that computers can do counseling (Loughary, Friesen, and Hurst, 1966).

Counseling has become an all inclusive term to include all efforts to change or influence people, including environmental change. It appears that we need some clarification here. Counseling is becoming equated with behavior modification. The behavior theorists—neo-behaviorists is a better term, since not all of them are concerned with theory—appear to accept this usage (Michael and Meyerson, 1962; Bijou, 1966). Bijou (1966) talks about counseling as involving the modification of behavior directly and in its natural setting. There appears to be no distinction between counseling and other methods of behavior modification. He suggests that "instead of conceiving of the counselor as a reflector of feelings, or an explorer of resources, or a habit changer, or a remediator of self-concepts and values, or a releaser of repressions, we might come to think of him as a behavioral engineer—one whose function it is to arrange and rearrange the environment in order to bring about desired changes in behavior" (Bijou, 1966, p. 44). The counselor not only works with or interacts with a client, but with teachers, parents and others, instructing them in handling children to modify their behavior.

Counseling, or psychotherapy, is thus being seen by some as direct influence on the behavior of others without verbal mediation. Phillips (quoted in Patterson, 1966b, p. 271) says, "I consider now that therapy can be done as well, perhaps better, without oral contacts, where the emphasis on behavior change is put on the actual behavior and on the instrumental acts needed to effect the proposed change."

Most of us concerned with counseling or psychotherapy, including the behavior counselors or therapists, such as Krumboltz and Wolpe, think of counseling as involving verbal interaction in an interview setting. Thus, counseling is differentiated from other methods of behavior change. It does not consist of the direct modification of nonverbal behavior. It is not the instruction of par-

ents, teachers or others in methods of behavior modification—the observation and recording of behavior, selection and administration of rewards, and the measurement of resulting behavior changes. It is not teaching. Nor is it propaganda, persuasion, advice giving, information giving, or brain-washing. All of these may be classified under behavior modification, but they are not counseling. Counseling is a form of behavior modification, but not all behavior modification is counseling.

Although there appear to be as many definitions of counseling as there are writers on counseling, it is necessary to reach some agreement on a definition before we can attempt to predict success in counseling. A definition which probably would be acceptable to most counselors is the following: Counseling (or psychotherapy) is a relationship, involving verbal interaction, between a professionally trained person and an individual or group of individuals voluntarily seeking help with a problem which is psychological in nature, for the purpose of effecting a change in the individuals seeking help. Although behavior therapists might limit what would be considered a psychological problem, nevertheless the kinds of problems with which they are concerned are psychological in nature.

It might be questioned whether a definition of counseling should not specify the changes which should constitute the outcomes. An attempt to do so might be difficult, in terms of obtaining agreement on desired or desirable outcomes. Goals of counseling have been variously defined, including such things as self-acceptance, self-understanding, insight, self-actualization, self-enhancement, adjustment, maturity, independence, responsibility, the solving of a specific problem or making a specific decision, learning how to solve problems or to make decisions and the elimination or the development of specific behaviors. There are those who feel that the goal or goals of counseling should be identical for all clients, while others, such as the behaviorists (Kumboltz, 1966 a,b,c), believe that goals should be specific for each client. The behaviorists see general goals as vague, indefinable, and unmeasurable. Some would see many of the specific goals of the behaviorists as trivial, partial, or limited in significance or meaning. The behaviorists seem to be unconcerned about the meanings of their goals, or with any general criterion for determining the desirability of specific goals.

It would appear that some agreement between these two points of view could be achieved. The behaviorists do seem to be concerned with broader, more general goals or outcomes—greater freedom, more expressiveness, more effective use of potentials, or self-actualization. Their more specific goals could be seen as objective evidence of the more general goals. Those who advocate the more general goals might accept the more specific goals of the behaviorists as aspects of more general goals. It is suggested that the concept of self-actualization might be useful as a criterion for the acceptance or desirability of the

more specific goals, and that the concept can and should be defined in terms of specific behaviors. Specific behaviors have meaning only in a context, as a part of the individual's total life, and when seen in relationship to a goal. Self-actualization may be considered as the goal or purpose of life, or from another point of view, as the unitary motivation of all behavior (Patterson, 1964). Different individuals actualize themselves in different ways; that is, the means of self-actualization vary among individuals, and at different times, allow for different immediate goals, all of which are in effect subgoals. Maslow's study (1956) of self-actualizing persons is relevant here. Rogers' specifications (1959, 1961) of the fully-functioning person are also pertinent. This is not the place, however, to go into the matter of counseling outcomes, which is the topic of Kumboltz's paper.

Nor is it essential to define the nature of the changes desired as outcomes of counseling. It is sufficient that these be changes in the person, in his overt behavior, or in his thoughts, attitudes and feelings. More important is to consider the nature of the counseling interaction or relationship, since it is this which determines our criterion measures. What does a counselor do, what kind of person must he be, what aptitudes, abilities and skills must he possess?

When one reviews (Patterson, 1966b) the various theories or approaches to counseling or psychotherapy, it appears that there are wide differences, even contradictions regarding the nature of counseling, and thus the requirements of counselors. These differences are supported by research.

Recent research provides evidence of differences among psychotherapists. Sundland and Barker (1962) studied differences in orientation in a group of 139 psychotherapists who were members of the American Psychological Association, using a Therapist Orientation Questionnaire containing 16 subscales. These scales included, among others, Frequency of Activity, Type of Activity, Emotional Tenor of the Relationship, Spontaneity, Planning, Conceptualization of the Relationship, Goals of Therapy, Theory of Personal Growth, Theory of Neurosis, Theory of Motivation, and Criteria for Success. The therapists distributed themselves over the range of scores from strongly agree to strongly disagree on most of the scales. When the therapists were classified into three groups—Freudians, Sullivanians, and Rogerians—the three groups differed significantly on nine of the 16 scales, with the Sullivanians being in the middle position in eight of these comparisons. The Freudian group, compared to the Rogerian group, believed that the therapist should be more impersonal, plan his therapy, have definite goals, inhibit his spontaneity, use interpretation, conceptualize the case, and recognize the importance of unconscious motivation. Only one difference was found between therapists grouped by levels of experience.

A factor analysis of the 16 scales yielded six factors. A general factor cut across most of the scales, providing a major single continuum upon which

therapists vary. One end is labeled "analytic" (not simply "psychoanalytic") and the other is designated as "experiential" by Sundland and Barker. The "analytic" therapist emphasizes conceptualizing, planning therapy, unconscious processes, and restriction of spontaneity. The "experiential" therapist emphasizes nonverbal, nonrational experiencing, the personality of the therapist, and therapist spontaneity. More therapists tended toward the "analytic" approach than toward the "experiencing" approach.

Wallach and Strupp (1964) obtained similar results from a factor analysis of ratings of two groups of therapists on a scale of Usual Therapeutic Practices. The major factor was called the maintenance of personal distance. Four groups of therapists—Orthodox Freudians, Psychoanalytic General, Sullivanian and Client-centered—were compared, with the first group being highest in the personal distance factor, the second group next highest, and the remaining two about the same but lower than the other two.

McNair and Lorr (1964) studied the reported techniques of 192 male and 73 female psychotherapists (67 psychiatrists, 103 psychologists, and 95 social workers) in 44 Veterans Administration Mental Hygiene Clinics, using an instrument developed on the basis of the Sundland and Barker Therapist Orientation Scale. They hypothesized three dimensions, to be measured by the AID scales: (A) psychoanalytically oriented techniques, (I) impersonal versus personal approaches to the patient, and (D) directive, active therapeutic methods. All three dimensions emerged in the factor analysis of the 49 scales included in the analysis. High scores on the A factor represent traditional psychoanalytic techniques. High scores on the I factor represent a detached, objective impersonal approach, while low scores represent emphasis on therapist personally and the therapist-patient relationship. High scores on the D factor indicate therapist setting of goals and planning of treatment, leading of the interview, and acceptance of social adjustment as a major goal. Low scores indicate therapist lack of direction of the interview and belief in patient determination of therapy goals. While the three factors are intercorrelated, McNair and Lorr consider them independent.

None of these studies included behavior therapists. No doubt even greater differences would have been found if they had.

There are obviously differences among therapists of different schools. Are there no similarities or commonalities running through all or most approaches? Or must we determine what kind of counselor we want, and use different criteria depending upon our choice? Fortunately, I don't believe this is necessary. There is evidence of some commonality among most counselors or therapists. I refer here to Fiedler's studies (1950a, 1950b, 1951). Sundland and Barker, McNair and Lorr, and Wallach and Strupp, were attempting to find differences, and found them. The Therapist Orientation Questionnaire of Sundland and Barker was developed by eliminating items upon which therapists agreed. Fiedler assembled a group of items upon which therapists agreed.

Sundland and Barker point out that items which they discarded because they did not result in a distribution (or differences) in responses were similar to items in Fiedler's studies. These items were concerned with understanding or empathy. There appears to be evidence, therefore, that therapists agree upon the importance of empathic understanding.

But again, behavior therapists were not included in Fiedler's study. And many behavior therapists minimize the importance of empathy, or of the therapist-client relationship. Wolpe (1958) considers the interview relationship nonspecific, and although a common element, it is not sufficient for change in most cases. He does recognize its effect, however, when he notes, "I have a strong clinical impression that patients who display strong positive emotions towards me during the early interviews are particularly likely to show improvement *before* special methods for obtaining reciprocal inhibition of anxiety are applied" (Wolpe, 1958, p. 194).

That the relationship is important in behavior therapy is demonstrated by laboratory research in conditioning, as well as other laboratory research in psychology. It is not possible to review this research here. There is considerable evidence that the existence of conditioning and its rate and extent are influenced by the personality and attitudes of the experimenter and his relationship to the subject. To cite only one study involving conditioning, Sapolsky (1960) found that the effectiveness of verbal reinforcement depended upon the relationship between the experimenter and the subject. Subjects who were given instructions which pictured the experimenter as attractive conditioned well. Those who were led to perceive the experimenter as unattractive did not condition during the experimental period, although there was evidence of delayed conditioning. Similarly, subjects who were matched with experimenters on the basis of personality similarity or compatibility conditioned better than those who were not matched.

Rosenthal (1964, 1966) summarizes the research on the effect of the experimenter on the result of psychological research. Sex, race, religion, status, likability, warmth, adjustment, hostility, anxiety, authoritarianism, acquiescence, intelligence and expectations of particular results have been found to influence obtained results. Responses are also related to the subject's perceptions of the experimenter, including his perception of the expectations of the experimenter. Orne (1962), discussing what he calls the demand characteristics of experiments, notes that the subject at some level sees it as his task to ascertain the true purpose of the experiment and to respond in the manner in which he is expected to, or which will support the hypothesis being tested. As Ullman and Krasner (1965, p. 43) note, "both the subject's and the examiner's expectations, sets, and so forth, have a major effect on the individual's response to the situation."

It would appear that the relationship is an important factor in any interpersonal interaction, and therefore is basic to counseling or psychotherapy. It

is not only present in behavior therapy, but is necessary for its effectiveness, and is not inconsistent with a behavior therapy approach (Murray, 1963; Krumboltz, 1966c). Parenthetically, it might be suggested that if the behavior therapists wish to demonstrate the effectiveness of their so-called specific techniques, they should eliminate the relationship. Goldstein (1962, p. 105), reviewing the literature on therapist-patient expectancies in psychotherapy, concludes, "There can no longer be any doubt as to the primary status which must be accorded the therapeutic relationship in the overall therapeutic transaction." Ullman and Krasner (1964, p. 43) similarly agree that "the best results are obtained when the therapist and patient form a good interpersonal relationship."

If the relationship were not important, then our problem would be relatively simple, or even nonexistent. That is, if we could modify behavior of the kind which is our concern in counseling without the necessity of a relationship between the client and the counselor, we would not need counseling or counselors. We would simply need technicians, able to diagnose the desired behaviors, prescribe the effective reinforcements, and apply them in a mechanical manner. There is, however, good reason to doubt whether such a mechanical approach would be successful, or even possible for the kinds of behavior in which we are interested in counseling. The evidence on conditioning indicates that behavior which is subjected to mechanical reinforcement ceases, or extinguishes eventually when the reinforcement is withdrawn. In addition, socially significant behaviors are most responsive to reinforcement which consists of the behavior of other individuals. It appears that the most potent influencer of human behavior, or the most powerful reinforcer, is a relationship with another individual. It appears that the kind of relationship which is most effective is not a mechanized, controlled, mechanical administration of rewards, such as the expression of interest, concern, understanding, warmth, but a sincere, spontaneous, genuine expression of these characteristics. Thus the problem of selection of counselors is not the selection of technicians, of individuals who can learn the procedures involved in the conditioning process, but of individuals who can offer a therapeutic relationship. Even if we agreed with Wolpe and Krumboltz (1966c, pp. 7-8) that the relationship was necessary but not sufficient, our problem would be one of selecting individuals capable of offering a therapeutic relationship, since the additional requirements are essentially technical in nature and relatively easily acquired by almost anyone at least capable of graduate level work.

The Nature of the Counseling Relationship

If we are to select people in terms of their capacity for offering a good counseling relationship, it is necessary that we specify the nature of this rela-

tionship. This is a difficult problem, and perhaps the reason why some would prefer to concentrate on the technical aspect, the specific conditioning factors.

One aspect of the problem is that, as Fiedler (1950a) noted, "a good therapeutic relationship is very much like any good interpersonal relationship." Thus, there is nothing unique or qualitatively different about the therapeutic relationship. This is what might be expected, since many if not most people thrive without counseling, and if they don't need it, it is because they have experienced good (therapeutic) relationships throughout their lives. But, if it is not unique, why should it be necessary to exercise much selection for counselors? That this is a problem which needs to be considered is evidenced by a number of studies of the use of lay counselors.

The NIMH program (Magoon and Golann, 1966) for training mature women as therapists no doubt comes first to mind. However, these women cannot be considered as lay counselors, since all were college graduates (three had advanced degrees), and went through two years of preparation (one half to two-thirds time), which, with the exception of work in vocational counseling (tests and measurements and occupational), was better preparation than students in most two year programs in counseling obtain. On the basis of blind ratings of their interviews by four experienced psychotherapists, and on the ratings of their clients (Rioch, *et al.*, 1963), they were considered to be effective. They scored above the average of candidates on the psychiatry subtest of the National Board of Medical Examiners (Rioch, 1963). Nevertheless, Rioch does not claim that they were highly skillful.

A study by Zunker and Brown (1966) purports to compare professional and nonprofessional (student) counselors, reporting that student counselors "achieved significantly better results than did the professional counselors on the majority of variables used to evaluate counseling outcome," and "received greater acceptance from counselees than did the professional counselors." Consideration of the study, however, indicates that no counseling was involved, but simply the imparting of information to freshman students, and the criteria measured simply the retention of information.

Poser (1966) compared eleven untrained undergraduate women with seven psychiatrists, six psychiatric social workers, and two occupational therapists, each of whom conducted group therapy with chronic schizophrenic patients, one hour a day five days a week, for five months. The lay therapists were superior to the professional therapists, and to no therapy, as measured by changes in performance on tests of reaction time, tapping and verbal fluency. This study has been criticized, with the suggestion that the patients could differentiate between the professionals, on the basis of age and perhaps other factors, and "cooperated more readily with people who were felt to be closer to them in the social hierarchy" (Rioch, 1966). Rosenbaum (1966) also makes some telling criticisms, including the nature of the criterion. Nevertheless, the patients were helped in some way by the nonprofessionals.

Carkhuff and Truax (1965) gave brief training to five lay hospital personnel, who then engaged in supervised group counseling with hospital patients for 24 sessions over three months. The treated patients were rated significantly higher than a control group in improvement on the Gross Rating of Patient Behavior.

Carkhuff (1966), following a review of programs of lay counseling training in which an assessment of the effectiveness of trainees with clients was made, concludes that "the lay trainees demonstrate counseling outcomes as least as constructive as their training supervisors or professional practitioners in general." It is important to recognize, however, that in all but the Poser study, the lay counselors had some training. A study by Martin, Carkhuff and Berenson (1966) of interviews and interviewee ratings of college students by friends who had no training, and of interviews with professional counselors, found that the professional counselors were evaluated by the interviewees, and their interviews were rated higher in empathy, positive regard, genuineness, concreteness, and client self-exploration.

The significance of these studies of lay counselors relates more to training than to selection. While there are no sharp lines between levels of helpfulness—or therapeutic effect—from untrained volunteers to professional therapists, there are differences. These differences, however, are related to the nature of training rather than to the amount of training. Graduate academic training has not focused on what Carkhuff (1966) calls the "core of facilitative interpersonal conditions." He also notes that "the overwhelming preponderance of systematic evidence available today indicates that the primary conditions of effective treatment are conditions which minimally trained non-professional persons can provide." Thus, it does not require a doctorate, or, postdoctoral training to qualify for psychotherapy. I have long maintained that I can train a student to do therapy, or therapeutic counseling, in a year. An additional year is required to prepare him to engage in vocational counseling, which requires knowledge of statistics, tests and measurements, and occupational information. This does not add to therapeutic effectiveness, however.

Experience, if not training, may make a difference, however. Cartwright and Vogel (1960) found that the clients of experienced therapists improved while clients of inexperienced therapists got worse. And there are, of course, differences among trained and experienced counselors. There is evidence that clients of counselors low in the facilitative conditions of effective treatment may get worse (Bergin, 1963; Truax, 1963). Caution must be exercised before we assume that neither training nor experience is necessary for counseling.

The Nature of the Therapeutic Relationship

What is the nature of the therapeutic relationship? What are the characteristics of the criterion behavior for which we must select students? There now

exists considerable evidence of the nature of the conditions in the counselor which facilitate counseling or psychotherapy. We have felt for a long time that interest in and concern for the client, respect for the client as a person and for his ability to make his own decisions and choices, empathy and understanding, are essential characteristics of the effective counseling relationship.

Gardner (1964) reviews evidence for the correlation of the good psychotherapeutic relationship with measures of progress, as well as the relationship of therapist variables and good therapeutic relationships, concluding that the research in this latter area is disappointing. Gonyea's (1963) study is being widely cited as showing that there is no relationship between the quality of the relationship offered by the counselor and the outcome of counseling. Before this conclusion is accepted, one must note the nature of his study, which is of eight student interns, working with a university counseling center clientele, rated by their supervisors using the Fiedler Q-sort on the extent to which they provided a good therapeutic relationship, and using client ratings on a Self-Description Form as the measure of outcome. Gonyea himself qualifies his findings in terms of the two instruments used, but further qualifications are needed, all adding up to little or no confidence in the results. It is important to note this study, because it is beginning to be widely cited as the result of its receiving honorable mention in the APGA research awards in 1965. This is the place, perhaps, to note that too much reported research should not have been done, much less reported, since by the nature of the instruments, subjects, conditions and other lacks, no conclusions can be drawn. Too often studies from which the author states no conclusions can be drawn are published, and then are cited for conclusions which the author did not present. Too often the conclusions of the investigator are not justified, but continue to be quoted without recognition of this fact. In other cases, qualified conclusions are cited without the qualifications. The result is that there is considerable research literature which misrepresents the state of affairs and confuses rather than clarifies problems.

Until recently we had no good evidence of the effectiveness of these conditions, nor did we have any way of determining their presence or the extent of their presence in a given counselor. We now have this evidence in the studies of Rogers and his colleagues during the Wisconsin period. Although the detailed evidence has not yet been published, it has been summarized by Truax and Carkhuff (Truax, 1963, Truax and Carkhuff, 1964a, 1964b, 1965a, 1965b). Four conditions or characteristics in the counselor have been measured and *demonstrated to be related to the outcomes of counseling*. These conditions are (1) empathy, or the ability of the counselor to understand sensitively and accurately the clients' inner experience; (2) unconditional positive regard, or nonpossessive warmth and acceptance of the client; (3) self-congruence, or genuineness and transparency (authenticity) in the counseling relationship; and (4) concreteness, or specificity of expression.

Scales have been developed to measure the extent of these conditions in taped interviews (Truax, 1961, 1962a, 1962b, Carkhuff, 1967). There are now available instruments to measure the criterion, that is, the actual functioning of the counselor in the counseling relationship, as measured by instruments related to counseling.

Fox and Golden (1965), in their review of the concept of empathy, emphasize its importance in the therapy relationship. They criticize the usual approach to the measurement of empathy, the ability to predict responses of others on tests and inventories, as artificial, and suggest that "this artificiality would be eliminated if empathy could be measured in the context of the ongoing interaction." This is what the Truax Accurate Empathy Scale attempts to do. This scale has been used in a significant study by Bergin and Solomon (1963). Interviews of 18 post-internship students in clinical and counseling psychology were rated on the scale, and the scores correlated with a number of test scores, grades and supervisors' ratings of therapeutic competence. The empathy rating correlated as follows with other variables: On the MMPI, $-.41$ with D, $-.54$ with Pt; on the EPPS, $-.54$ with Consistency, $-.41$ with Order, $-.53$ with Intraception, $.54$ with Dominance, $.55$ with Change. There were no significant correlations with academic grades or practicum grades or with Graduate Record Examination scores (all low negative r 's except for GREQ). The supervisor ratings of therapeutic competence correlated $.41$ with the empathy ratings. The correlations of the supervisor's ratings with the other variables followed the same pattern as the empathy rating, though they did not reach significance except for EPPS Dominance. In view of the small sample, and the restricted ranges on the variables, these results are worthy of attention. It is interesting to note that practicum *grades*, an average based on two years work in diagnostic testing and interviewing, did not relate to empathy. This suggests that supervisor's ratings may not always indicate counseling competence. Also of interest is the negative correlation of EPPS Intraception and the positive correlation of Dominance with empathy. This is the reverse of the correlations found in the studies cited earlier. If the definition of Intraception is examined, however, one might wonder, as I have, if it should be expected to be related to empathic understanding. Defined in part "To analyze one's motives and feelings, to observe others . . . to analyze the behavior of others, to analyze the motives of others . . ." EPPS Intraception would appear to be a diagnostic, labeling, interpretive, interest or understanding rather than understanding from the internal frame of reference of the client. Thus, a negative correlation becomes meaningful, and the positive correlations found in other studies suggest that the criterion of counseling competence may have been diagnostic, interpretive ability or activity rather than empathic understanding. The high positive relationship between Dominance and empathy is also at variance with other results, and at first glance inconsistent. But Bergin notes

that it is perhaps a measure of mental health as indicated by its relationship with MMPI scales (Merrill and Heathers, 1956). Dominance in its usual sense is perhaps an inappropriate name for this EPPS measure.

An interesting finding of Bergin was that age, from 23-29, correlated highly with both empathy ($.50$) and supervisor's ratings ($.66$), but the correlation with empathy dropped to $.15$ when students over 20 (up to 38) were included. Since all students were at the same experience level, experience was not a factor in this relationship. Another finding of importance for training was that one of the supervisors explicitly attempted to teach empathic behavior to his students, and this group was significantly higher in empathy than all but one of the other five groups.

Although the criterion problem may be completely solved to everyone's satisfaction, it would appear that it is close to solution, much closer than in most other areas plagued by this problem. Interrelationships among the criterion variables, and exploration of other aspects of the therapeutic relationship, need to be determined. Perhaps a regression equation relating the variables of the relationship to outcomes will become possible, giving us weights for the relationship variables. But it is not necessary to wait for this refinement before we can use these variables as criteria.

Next Steps In Research

The next steps are obvious. While it will be of interest to have the results of studies of variables concurrently related to the criterion, including aspects of it in addition to empathy, similar to the Bergin and Solomon study, longitudinal studies of predictive relationships are necessary. If we are to be able to use correlations for selection, it must be demonstrated that scores or ratings prior to entrance upon training are related to the outcomes of training, or competence in therapy. There is, of course, the problem of instruments.

One possibility that bears exploration is whether the Truax and Carkhuff scales can be applied to behavior of applicants for counselor training. While it would be desirable that a simpler, more easily obtained predictor be available, it may not be possible to find or develop one. It may be that the best predictor of therapeutic competence will be the quality of relationships the applicant is able to display prior to training. I personally doubt this, since I believe that, given appropriate training, the aspects of the therapeutic relationship can be developed in counseling students. It might still be that those who were best at the beginning would be best at the conclusion of training. It may be that other characteristics may be more predictive of ability to develop the capacity to provide a therapeutic relationship.

In addition to the Truax-Carkhuff scales, other scales purporting to measure aspects of the counseling relationship should be used. O'Hern and Arbuckle

(1964) have developed a Sensitivity Scale, which has not been related to counseling outcome, however. The Wisconsin Relationship Orientation Scale (Wasson, 1965) is another potential instrument. Strupp (1962) has also developed an empathy scale. Campbell and Kagan (unpublished study) have developed an Affective Sensitivity Scale which should be explored in selection. Rank's (1966) Film Test of Counseling Perception is another promising instrument. The Fiedler Q Sort (Fiedler, 1950a, 1950b, 1951) should also be applied.

These scales of instruments require responses from applicants for their application. These responses may be obtained from presentation of standard stimuli, or in a free interview situation. O'Hern and Arbuckle (1964) prepared a standard tape. Strupp (1962) has produced a series of brief films to which the responses are made. Rank's test also uses film. Campbell and Kagan use videotapes. A live interview using a standard "coached client" may be used. Or, the applicant may be rated on the basis of a free interview, perhaps with a friend, as in Truax and Carkhuff's (1965b) study. Whether a standardized procedure or a real interview is more useful or valid is not known at present.

These instruments require the applicant to respond in a therapeutic situation, or at least in a therapeutic manner in an interview. At this stage in his career, the student has no basis for knowing how to respond, or how he should respond. In addition, the novelty and the threat of the situation may interfere with his being natural, or being himself. Thus, such a "test" may not be appropriate. However, this is not known, and it certainly would be worth investigating whether those applicants who respond most therapeutically with no preparation or experience, and in a novel or even threatening situation, are the ones who become the best therapists following training.

This approach is a very expensive and time consuming one, involving individual administration of the "test" and individual evaluations for rating the responses of the applicants. It would be worth exploring whether an instrument such as the Porter (1950) test or a similar instrument might be useful as a predictor. Arbuckle and Wicas (1957) have developed a free response test of counseling perceptions which might also be studied.

On the basis of the research reviewed earlier in this paper, some suggestions may be made regarding existing tests which may be worth exploring in relationship to the criterion now available. It would appear to be desirable to re-evaluate many of the instruments used in previous studies of counselor characteristics, particularly if there was evidence of differences between counselors and other groups, or between counselors considered more effective and those considered less effective. In addition, instruments which would appear to be logically related to the criteria of an effective counseling relationship, even if they were not found to be related to other criteria in earlier studies, should be explored further.

One group of instruments, or an area which would appear to be worth exploring, is represented by measures of authoritarianism, including the F Scale, Dogmatism Scale and Opinionation Scale. These instruments have shown rather consistent positive results in earlier studies. One drawback, in terms of their predictive usefulness, may be the fact that scores are affected by education and training, as indicated by my study (Patterson, unpublished study). However, scores could still be predictive.

Several standard personality tests appear to be less subject to change. The MMPI, including the Barron Ego Strength Scale, the EPPS, and the CPI would bear further study against the counseling relationship criterion. An objective instrument purporting to measure empathy is the Kerr-Speroff Empathy Scale. This scale has had little use, except perhaps with supervisors in industry. In a study of rehabilitation counseling students (Patterson, 1962a), female students scored at the 70th percentile of liberal arts women, and male students scored between the 50th and 55th percentile of liberal arts men. The norm groups are very small, however. The scale did not correlate with EPPS Affiliation, Nurturance, or Intracception, nor with the MMPI K, Mf, or Pa scales, which are sometimes considered to be related to sensitivity or empathy (Patterson, 1962b). Another measure of empathy is an adaptation of the Kelly Role Construct Repertory Test by Cartwright and Lerner (1963).

Measures of interest would appear to be worth investigation, particularly the SVIB. In perhaps the most extensive study of prediction of performance in psychology, that of Kelly and Fiske (1950) of VA clinical psychologists, the SVIB produced the only significant results. The results of the Whitehorn and Betz (1960) studies mentioned earlier, also suggest further exploration of this instrument.

A point to be considered in future studies is the possibility of nonlinear relationships between predictive measures and the criterion. Perhaps some of the negative results of earlier studies have concealed positive results represented by curvilinear relationship. Particularly in the area of certain bipolar personality dimensions, extremes may be negatively related to therapeutic effectiveness. In other cases there may be a linear relationship up to a point, toward one or the other end of the continuum, with a change or reversal occurring. Another kind of relationship which may be obtained is one in which above a minimum level, further possession of a characteristic is simply of no effect. It is possible that the apparent conflicting results on the EPPS Intracception, Nurturance and Dominance scales may be due to such relationships.

Summary

There has been almost no research on counselor selection as such. There has been no study of the kind necessary to validate selection instruments, of the kind routinely done in other fields, including industry and the armed services.

Such a study would involve the administration of a battery of selection tests to a group of applicants all of whom are then permitted to enter training. Their progress and success are evaluated by criterion measures during the following training.

The research on characteristics of counselors has been limited almost entirely to studies of counselors in training—the studies of Whitehorn and Betz are almost the only exception. These deal with psychiatric residents rather than with experienced therapists. Fiedler's studies, however, did include experienced therapists, as have other studies of differences among therapists of various theoretical orientations.

Many studies have simply described the characteristics of groups of student counselors, to be sure, since counseling students have things in common. They are thus self-selected, as well as selected to some extent by the training institution. However, with little basis for selection, most institutions actually select almost entirely on the basis of academic aptitude.

Students also can be expected to differ in therapeutic aptitude or ability. Some studies have attempted to compare better, or more effective, counseling students with poorer, or less effective students. The criteria for separating these groups of students have not been adequate. Generally, ratings of supervisors have been used. The varying, if not contradictory, results are no doubt due in part to differing conceptions of what is a good counselor. The influence of academic performance on such ratings has also influenced results in some studies. In any event, such ratings have not been based upon systematic evaluations of interview behavior known to be related to the outcomes of counseling. Any criterion involving the evaluation of counseling interviews is a mediate rather than an ultimate criterion, and must be demonstrated to have validity in terms of outcome.

The problem of measuring the outcome of counseling or psychotherapy has not been resolved. However, sufficient progress has been made so that there now appears to exist a mediate criterion in the characteristics of the counselor in the counseling relationship which can be applied in a standardized, objective manner to counseling interviews. It has been demonstrated to relate to counseling outcomes. This criterion consists of ratings of counselor empathy, congruence, warmth and concreteness. These ratings, which were developed on counselors who were client-centered in orientation, have been in effect cross-validated on therapists with another orientation and different outcome measures at John Hopkins (Truax, *et al.*, 1966). The development of this kind of criterion is important, since it is much easier to apply than the obtaining of outcome measures on a representative sample of each counselor's clients.

We are thus in a position where a usable criterion makes possible predictive studies. It is now necessary to find, or develop, predictive measures. Because longitudinal predictive studies are so costly, it is desirable that predictive mea-

ures with some evidence of their usefulness be used if possible. Possible predictive measures can be evaluated by determining if they bear a concurrent relationship to the criterion. It is also suggested that the best predictors may be the instruments which are used to measure the criterion, applied to the interview relationships of applicants in either free or structured interviews. But since this is an expensive measure, it is desirable to explore the usefulness of more easily obtained measures, either of the kind involving responses to filmed or taped interviews, or even simpler measures such as standard paper and pencil personality inventories. A number of possible instruments which appear to be worth exploring have been suggested, on the basis of the research on counselor characteristics.

It appears that it is now possible to conduct the necessary research to develop predictive measures of counseling ability. But while only practical problems remain, these are by no means easily overcome. However, the conducting of such a study would be no more of an undertaking than the Kelly and Fiske study, and certainly support for such a study could be found from among all the sources now available.

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Discussion

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"The Selection of Counselors," by Dr. Patterson provides an impressive review of the recent empirical work in this area. The general findings of the review elicit a mixture of optimism and pessimism about the work which has been done, and relationships which have been found. In regard to studies of counselor characteristics, Patterson recognized the evidence that counselors as a group differ from the general population in terms of some personality attitudes, interests, and traits (Cottle and Lewis, 1954; Foley and Proff, 1965; Patterson, 1962; Wrenn, 1952). He concluded, however, that in many cases the meaning of these findings was obscured by shortcomings in the research. Differences between counselors and other groups, when found, were rarely of practical usefulness. Personality score comparisons of advanced and beginning counseling students did not necessarily indicate that the advanced students would be better counselors than the beginners. Some counseling students evidently possess personality characteristics which are not considered desirable in counselors (Mahan and Wicas, 1964). In many of the studies, subjects denoted as counselors were actually trainees or individuals engaged in activities which were not necessarily counseling.

Even when studies of counselor characteristics were refined by separating "good" from "bad" counselors, or "preferred" from "nonpreferred" counselors, Patterson found that similar limitations could be noted. That is, students were used more often than were practicing counselors; differences between groups were frequently of statistical significance but not actually useful in selection procedures, and most important, the criteria upon which the

groupings were based were not always clear. Thus, we are left with little of certainty regarding the relevant personality characteristics of counselors.

In regard to research on counselor selection, the findings were also pessimistic. The major reviews cited were able to identify only a few studies which focused on the issue of counselor selection. As in the studies of counselor characteristics, Patterson noted the difficulty of the criterion problem in counselor selection. Because grades were not acceptable as criteria, most studies used rating by peers, instructors, principals, superintendents, and others (Blocher, 1963; Dole, 1963, 1964; Johnston, 1966; Wasson, 1965). The validity of these ratings was questioned for a number of reasons, including the fact that ratings by different individuals are not always based on the same things, even though instructions may attempt to achieve this. There was specific evidence that in a number of studies the ratings of counseling competence or potential were notably influenced by impressions of academic ability and performance (Bergin and Solomon, 1963). One particular criticism of ratings was that agreement between selection ratings and later performance ratings does not necessarily indicate rating validity. It is possible that both sets of ratings are influenced by the same bias, academic ability. In this section, Patterson's criticism was not so much in response to the studies which had been completed, but to the fact that more studies had not been conducted on counselor selection.

If the sections reviewing research on counselor characteristics and counselor selection ended on a pessimistic note, the final discussion of future prospects in the selection of counselors more than overcame this. In counseling, the ultimate criterion of counselor selection is client improvement or outcome. Massive followup studies required by this kind of criterion are beyond the scope of most researchers at present, so that a mediate criterion will have to be used in most cases. The nature of the counseling relationship has been shown to be related to counseling outcome, and some measures of the counseling relationship have been satisfactorily developed and tested. As seen by Patterson, knowledge of the importance of a counseling relationship greatly simplifies the problem on counselor selection. Indeed, "only technical problems remain," and it would seem that what is needed now is for someone to conduct the obvious, large scale, comprehensive study of counselor selection, using capacity to offer a counseling relationship as the criterion.

The relative emphases of Patterson's paper reflect some basic issues which continue to be sources of difficulty in research on the selection of counselors. Three questions which were raised, explicitly or implicitly, and were answered to a certain extent were these: First, what is this process "counseling," for which we are selecting would-be counselors? Second, what are the effects of training on the individuals selected to be counselors? Third, what are the personal or personality variables relevant to the selection of counselors?

The attempts to define counseling have inspired much discussion, debate, and publication. Yet there still exists a wide variety of answers to the apparently straightforward question, "What is counseling?" Patterson has provided an answer in his statement that "Counseling is a relationship, involving verbal interaction, between a professionally trained person and an individual or group of individuals voluntarily seeking help with a problem which is psychological in nature, for the purpose of effecting a change in the individual seeking help (p. 27)." Even with the understanding that counseling is basically a relationship, ambiguity still abounds in the definition of the processes required to produce the appropriate relationship. To distinguish between mechanically applying some technical procedures without appropriate feeling or involvement on the one hand and, offering a counseling relationship on the other, is a touching distinction. However, this does not complete our understanding of the counseling process. Ultimately, more specific statements describing the nature of counseling will be developed as more is learned about the process.

Perhaps a more satisfactory statement of the goals of counseling would be helpful in the selection of counselors. On this topic of goals, Patterson was able to interpret possible commonalities among writers who are extremely diverse in terms of their stated procedures. Most counselors would agree that a goal of counseling is an improvement in the existence of the client. There is not much disagreement that successful counseling achieves positive changes in a troubled person's outlook and behavior. In Patterson's words ". . . changes in the person, in his overt behavior or in his thoughts, attitudes, and feelings (p. 29)." If there is agreement on goals, there remains a diversity of opinions concerning the way to reach these desired ends. For all the commonality in ultimate aims, we cannot yet conclude that counseling and the counseling relationship are the same for all approaches.

The need for an answer to the question of effects of training is clearly presented in Patterson's review. There is evidence to support differences between beginning and advanced students; however, there is little data comparing the same individuals before and after training. There is also evidence that experienced counselors respond differently from inexperienced counselors, but that these differences are particularly related to the training procedures has not been conclusively demonstrated.

The finding of a number of studies indicating that some experienced counselors of different persuasions were more like each other than they were like students in their own area (Fiedler, 1950a, 1950b, 1951), has been parlayed into the general conclusion that counselors all tend to have the same attitudes toward the counseling relationship. It is interesting to see this conclusion maintained in the face of the other evidence pointing toward differences among counselors or therapists which have been related to theoretical position, type

of training, level of experience and similar variables (McNair and Lorr, 1964; Sundland and Barker, 1962; Wallach and Strupp, 1964). Future research may arrive at the not-too-surprising conclusion that different training approaches lead to different types of counselor approaches and outcomes.

As emphasized by Patterson, at this time we do not know the effects of training. Answers to this question will have to be produced by extensive before and after studies. Use of "after" subjects only, will never answer questions about the effects of training.

Finally, the third and most obvious question raised in this paper is the issue of personality characteristics relevant to the selection of counselors. Currently most training of counselors takes place in academic settings, and it is understandable that intellectual and academic measures are emphasized. Intellectual and academic measures are the most stable of our personality assessment techniques, and certainly intellectual measures have been more predictive of graduate school performance than have other measures.

The question is: are these the measures appropriate for the selection of counselors? Evidence on the training of lay personnel as counselors suggests that academics may not be as important to counseling as we like to believe. Why should a person be required to experience graduate education if this is not necessary for him to perform as an effective counselor? Could it be that the NDEA Counseling and Guidance Institute Manual (1966) last year anticipated developments in counseling by its changed and lessened academic restrictions for schools offering institutes?

A partial solution to the problem of personality characteristics in counselor selection can be found in studies of present counselors. Identifying characteristics of successful, competent counselors would give us a better idea of what is needed in counselors, although as Patterson notes, present counselors have been selected on the basis of criteria which may or may not be related to counseling effectiveness. As with study of effects of training, research is needed on individuals who are only minimally selected. Such a group is needed to provide definitive statements about relationships of counselor personality to initial selection, performance in training, and performance as a counselor.

Patterson has identified an admittedly crucial aspect of counseling when he focuses on the relationship. As we understand more about the counseling relationship, we will be more efficient in our selection of counselors. Emphasis on relationship in counseling involves a very real temptation to accept the counseling relationship as the end in itself. Our understanding of the counseling relationship must be incorporated into improved definitions of counseling, expanded knowledge of the effects of counselor training, and better identification and measurement of personal characteristics relevant to the capability of engaging in a counseling relationship.

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Discussion

Francis P. Robinson

Cecil Patterson's paper seems to me to be an excellent review of the literature. I particularly like his emphasis on next steps, for the findings of previous studies have shown limited success. Thus Dr. Patterson's major suggestions, and mine, have to do with ideas of what might be. These ideas vary with our own background, experience and discoveries.

Dr. Patterson notes one major problem, the "loose definition" of counseling. It is difficult to do research on selection when it is not clear what is meant by counseling. (1) He notes that our predictive measures are validated against contaminated criteria; college professors rate in part on brightness and grades earned in other courses, administrators rate counselors in terms of absence of trouble, and clients rate counselors in terms of their liking for them. (2) Some researchers have had different kinds of counseling in mind; client-centered therapy, vocational guidance. Also differing goals; self acceptance, wise decisions, better grades. (3) Another source of unclear definition has been the effect of cultural lag by the public: emphasizing historically outdated advice giving, fortune telling, guiding, disciplining. For instance, it was brought out in our small group discussion yesterday that high school counselors feel great pressure to mold pupil behavior and decisions to conform to parent plans and hopes. (4) Still another source of confusion has arisen from other fields using popular terms to cover their own activities; undertakers who call themselves "bereavement counselors" to cover up their selling act.

(5) A fifth source of confusion is the matter of changing purposes of counseling, and the discovery of new approaches to counseling work. Dr. Patterson has "solved" this problem by limiting counseling to psychotherapy. My own approach is to look at all effective means of facilitating individual devel-

opment in conferences. Traditionally, counseling has been oriented around clinical treatment of the disturbed, psychotherapy. The emphasis has been on remediation rather than development, on the derelict rather than the normal. Traditionally, counseling has dealt with client expressed problems through talk and developing insight, whereas counseling may also facilitate development in many areas not expressed as client problems. Such development may not necessarily come only through talk. In brief, most research has been on psychotherapy but there is much recent interest in developmental counseling. Different types of counselors may be needed. One interesting contrast strikes me here. Most of us are involved in graduate education in which a central aspect is our attempt to facilitate the development of our advisee through individual conferences. In these we do much more than offer a "therapeutic triad" and I am sure that many of the things the student learns were not told to him but come from observation, unconscious imitation and identification.

You will note that Dr. Patterson and I tend to differ at this point. He has dealt with this looseness and proliferation of meaning of the word "counseling" by limiting it to client-stated problems (mostly emotional problems) dealt with through traditional psychotherapy. I would like to take a look at some new means and purposes for the professional counselor who is to work with developing adolescents and adults, developmental counseling (Blocher, 1966). We are both justified in our approach to next steps, but note that I will be ranging wider than his projected definition. With changing purposes, we need work on definition.

Quite obviously, I am quibbling little with Dr. Patterson's presentation, but while on the topic, let me note that in the latter part of his paper he discusses the importance of empathic understanding and the therapeutic relationship—what I call the "greenhouse" variables which facilitate growth. I agree that these are important aspects of counseling, but in this section he goes on to say that in light of the discovery of the importance of the "therapeutic triad" (Truax, 1963) "the criterion problem is close to solution." These counselor characteristics are some of many possible predictors, but if they are considered a criterion, they may become reified in training counselors and distort their approach.

Another reason why research on counseling effectiveness has not been highly productive has been the assumption that comparing better counselors with poorer counselors would turn up important differences. Actually, however, research shows that the nature of effective counselors will not be obtained by the averaging of the methods used by these more or less self-taught experienced counselors (Porter, 1945). Thus we early found that comparing the study methods of "A" and "D" students did not turn up anything that the latter group should learn. Similarly experienced counselors tend to be idiosyncratic bundles of habitual procedures.

But what might good counselors be? What is needed for facilitating development for a wide range of normal individuals? Past counseling has emphasized talking to obtain insight and understanding, but may other approaches be useful such as reinforcement, modeling, developing cognitive structure? (a) Present approaches emphasize relationship, but past practice has brought confusion as to the counselor's role being one of neutral ambiguity or of transparency and openness. But are there also advantages in the counselor as model and as a means of hero identification? Farson (1954) has noted that traditional psychotherapist roles seem feminine. These would represent poor models for male clients and will probably be little admired. (b) Past practice has emphasized the value of release, discovery and awareness, but is there also value in developing a cognitive structure, coping behavior, logotherapy, semantic training, or higher-level adjustment skills? (c) Past practice has emphasized two-person interactions, but is there value in corollary automated devices such as suggested by Magoon (1964) or in using automated equipment to facilitate counseling (Cogswell, 1966; Loughary, Friesen and Hurst, 1966; Veldman, 1967)? (d) Past emphasis has been on the counselor in his cubicle being a facilitator or midwife to a decision, but recent writings by Shoben (1962) and Stewart and Warnath (1965) recommend that we become agents of social change. The study by Wicas and Mahan (1966) and Lister's (1966) comment suggest that we are more typically organization men standing for the status quo rather than being agents of change.

It may be that all of these suggested roles and procedures are not worthwhile nor relevant to the role of counselor in our society, but if any are, they have implications for different variables in selection. While a counselor would not be all of these things to one client, it does seem that any future counselor should be able to play many roles to fit the needs of his many clients. The future counselor may be quite different from our present experienced counselors.

Let me briefly talk about a few of these "new" ideas. As noted earlier our highest development has been in the field of psychotherapy and we have generally maligned the high school counselor as an untrained advice-giver. Yet we know that many high school counselors and teachers are highly effective agents with students. College personnel workers are often struck by how many freshmen from a certain high school want to go into history while those from another high school want to go into biology. Part of this effect is due to good teaching, but there is good evidence that part of this choice comes from hero identification. The adolescent and young adult years are times of finding models through observation and reading. This identification is in great part non-verbal. The student may observe and decide to adopt certain modes of behavior; other modes of behavior seem taken up in unconscious imitation. The close personal contact with a counselor often facilitates this identification

process. Should counselors make use of it in fostering adolescent development? I suspect that many present counselors feel this is foreign to their role.

Let me turn to another area we tend to reject—the use of automated equipment. Magoon (1964) has suggested that many aspects of question answering in counseling centers might be automated to save student and counselor time. But in what ways might automation help the process of counseling itself? Would immediately accessible equipment in the counseling room facilitate finding up-to-date occupational information, the integration of complex profiles of test results, and at last make clinical prediction better than statistical prediction? But what kind of person would it take to use this equipment in conference and what effect would such impressive apparatus have on the client? Would counselors have to be more expert in computer technology? Would the presence and use of the computer make the counselor seem so expert and overwhelming that clients would refuse to take responsibility for attacking their problems? I am reminded of a cartoon I saw a while back in which there was a man sitting in front of a huge bank of computers and on the wall was a framed homely slogan, "To err is unlikely and to forgive unnecessary." Would this image destroy the "humanness" of the counselor? Would such a person be identified with as a model?

Might we do away with the counselor altogether and have the client counseled directly by the computer? I'll admit some feelings of horror at the idea, but maybe I am being defensive. However, knowing how equipment manufacturers like to sell, and knowing the effect of cost accounting on administrators, we may find Madison Avenue bombarding us with literature. Some of you who are working in the field of beginning reading are familiar with the Edison Responsive Environment. Knowing how equipment makes research look impressive, I can see studies of variables to make equipment better or at least sell better. One study might be made of the effect of pre-warmed keys so the client will feel more immediately accepted. Another study might show that an electric typewriter keyboard would be better than the usual manual typewriter because it takes less energy and is more "accepting," or shows "less resistance." And in the mad scramble for "better" machines, we might have another company have an electric typewriter keyboard which not only went down easily but shoved the finger back up afterwards. This would not only save energy but would show that the machine "cared."

More seriously, let me mention the effect that giving emphasis to developing cognitive structure might have on counseling procedure and the nature of our counselors. Past practice has made us aware of the dangers of using slogans and preaching, but recent writing such as that by Hobbs (1962) in his presidential address before Division 12, indicates the importance of developing cognitive structure in bringing about improvement in clients. Victor Frankl

(1957) has discussed procedures in logotherapy. The semanticists note specific need to help people alter their cognitive structure in order to adjust to the world as it is. Don Blocher (1966) has talked about developing coping behavior. Counseling in these areas will demand different roles than presently used, and it may be that different personality patterns in counselors will be more relevant.

My point today has been that we have difficulty in counselor selection studies for many reasons, but my emphasis has been on potential changes in the nature of the counselor's job and approaches which he may use. The future counselor will have to be able to play many roles if he is to fit the students' needs. It may be that we will have to develop different specialists in psychotherapy, vocational development, modeling behavior, semantics, but I would like counselors who are broadly competent. It is true that in our selection research we will need to define what type of counselor we are predicting: psychotherapist, vocational counselor, or skill counselor.

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Teacher Effectiveness Research: Implications for Research on Counselor Selection and Effectiveness

Ralph L. Mosher

Introduction

The essential questions before the conference are how to select counselors, train them, and evaluate their effectiveness. I would like to make a further qualification. The issues of who to select and how to train them are inseparable from the conceptual issue of what effects the counselor is to produce. As I see it, it is this issue: What Is Counseling (to accomplish)? that is *crucial* and which must direct studies of selection and training. For example, the objective of counseling may be defined as facilitating instruction in the school, as psychotherapy, or as direct action to change family or community conditions. Depending on what effects the counselor is to produce, the person selected (and his training) could be as different as Carl Rogers and Saul Alinsky.

If this issue of counseling objectives is not kept continually in the forefront, then research on selection and effectiveness can become conceptually unrelated or unimportant. In brief, I see as much need for hard thinking about what effects the counselor is to produce as there is need for hard data about who to select and how to train.

Why approach these questions indirectly, by examination of the analogous questions of how to select, train for and evaluate *teacher* effectiveness? A care-

ful review of the counselor selection and effectiveness literature is presented elsewhere in this book. The writer's particular interest has been with the analogous research literature on teacher selection and effectiveness, areas with which I am familiar, both theoretically and directly.

Certainly the answers in the literature on teacher effectiveness are not necessarily clearer, nor is the research more advanced than in counseling. If the absolute number of nonsignificant findings is a criterion, the research on teacher effectiveness is more developed. Indeed, a literal reading of most of this literature could tend to raise very basic questions about the issues confronting a conference such as this. "After 40 years of research, we do not know how to define, prepare for or measure teacher competence" (Biddle, 1964). This provides perspective, and underscores both the tremendous complexity of the questions, as well as the high cost of even negative information about them. It can also be said, however, that teacher effectiveness research is moving toward some clarity about how not, and how better, to formulate the question, "What Is (Effective) Teaching?"

A fundamental reason for using the perspective provided by teacher effectiveness research is to be found in the nature of counseling itself. I see counseling as essentially an educational process. I do not define counseling as a "treatment," as psychotherapy or basic *re*-education for people with disabling emotional deficits or disturbance. I do see counseling as educating, in that its objective is to facilitate "personal learning." By this I mean the learning of new, more comprehensive perceptions, ideas, and feelings, about one's self and situation, and new personal behavior in that situation.

More specifically, counseling is typically verbal behavior—talk between a counselor and a client—usually about educational, vocational or "personal" concerns of the client. It is, too, a social process—that is, communication and interaction between two people. There may be characteristics of this interpersonal relationship which result in emotional, attitudinal effects which are not explicit in their verbal discourse (but which are, correlated with their talk). I am suggesting, then, a close analogy between teaching and counseling as educational processes as they are practiced, and in terms of their underlying methods of communication. This analogy is evident, to me at least, when one listens to teachers talk to students and to counselors talk to clients: for example, in the content free characteristics of this talk that effect its outcome. It is not the intention in saying this to get into tired issues of distinctions between teaching and counseling. There is the danger, however, of reifying differences instead of examining them at a more basic level. The principal point is that current ways of construing teaching and existing methodologies for doing research on teaching have possible implications for counseling effectiveness research which merit careful examination.

Section I: Research on Teacher Effectiveness

The literature on teacher effectiveness is extensive. (Domas and Tiedeman, 1950; Getzels and Jackson, 1964). There is little conclusive research, however, as to the conceptual issue of what (effective) teaching is, and the empirical problems of how effective teaching can be reliably predicted or measured. One way to make the literature on teacher effectiveness research manageable is to classify it. The discussion to follow, then, presents first, essentially negative information. Current theoretical and research approaches which seem relatively more promising will be briefly described. This part of the chapter concludes with a discussion of what the literature says about teacher effectiveness. In an inter-linear way throughout this section, I would like to deal with possible implications for counselor effectiveness research.

Teaching—What the Teacher is?

The literature on teacher effectiveness is replete with information as to what the effective teacher is not, what variables not to investigate, and examples of what is not effective research. "Personality" factors, dear to counselor effectiveness research, are illustrative. With few exceptions, research attempts to correlate measures of teacher attitudes or values, adjustment, needs, personality factors, and intelligence, with ratings of teaching effectiveness have not produced significant results (Getzels and Jackson, 1964). The same is true for correlations of the teacher's cultural background, socio-economic status, sex, and marital status, with ratings of effectiveness (Fattu, 1963).

In short, "Despite the critical importance of the problem and a half-century of prodigious research effort, very little is known for certain about the nature and measurement of teacher personality, or about the relation between teacher personality and teaching (performance) effectiveness (or pupil achievement)" (Getzels and Jackson, 1964). Why is this so? (a) Much of this research has been conducted with no, or inadequate, conceptualization of teacher personality or of its interaction with teaching. Many studies have entailed little more than a "shotgun" empiricism. A hypothetical example may stand for dozens of such studies: The Minnesota Multiphasic Personality Inventory is administered to a sample of undergraduate majors in education. Correlational analysis is done with ratings of the subjects' student teaching. Findings, generally nonsignificant or inconclusive, are reported. What is not given is any (*let alone plausible*) idea as to why or how these measures of static psychological variables in the teacher might be expected to differentiate teaching effect. This is simply to say that a theory of instruction, or, more simply, a conceptual linking of the particular personality variables to practice is crucially missing. (b) A second problem plaguing such research is a recurring one: the validity

and reliability of the instruments used to rate the teaching (an analogous problem exists in regard to the personality measures employed). Typically these are check lists which focus on aspects of what the *teacher* does. They are usually unrelated or unspecific in terms of the particular effects to be produced by the teaching, and are dependent on major inferences by the evaluator. That such ratings are usually based on a fraction of one per cent of a teacher's entire teaching simply compounds the problem. (c) Further, such studies of teacher effectiveness generally involve no control on the content or subject field of what is being taught or on the kind of pupil being taught. It would have to be a very significant personality variable indeed to show consistent, significant effects for all content and for all pupils.

If we want to deal with the issue of teaching effectiveness as a whole, an implication is that consideration of what it is that is being taught cannot be separated from the methodology being used and the type of pupil being taught. The research question becomes somewhat more manageable if it is: "What is effective teaching of these specified social studies ideas to these particular eighth grade pupils?" It seems, too, that attempts to study the teacher independently, or as the assumed cause of all that happens in the classroom, are likely to be unproductive. Research on the teacher, or what he does, in isolation has had little payoff. Another implication is that the differences between effective and ineffective instruction are likely to be relatively specific and fine differences. For example, Flanders reported that only a twenty per cent difference between "direct" and "indirect" patterns of teacher verbal influence had significant consequences for pupil learning (Flanders, 1964). It is unlikely that such fine differences will be picked up by the available gross instruments developed for other research purposes. The (negative) point of the literature is clear, and it is that conventional studies of the personality of the teacher as a way to get at who to select, how to train, or who will be effective are largely futile.

New Theoretical and Research Approaches

I would like to mention now, briefly, some significant present work which promises a more powerful conceptualization and research findings on teaching. Bruner, distinguishing between learning theory and theory of instruction, has argued the need for the latter, and has presented some preliminary elements of a theory of instruction (Bruner, 1966).¹ Mecca, for teaching, has tended to be viewed as learning theory. Instructional practice, however, typically occurs

¹ See also David P. Ausubel, Review of *Toward A Theory Of Instruction*, by Jerome S. Bruner, *Harvard Educational Review*, 36 (Summer, 1966), 337-340.

as though the journey has not been, or cannot be, made. Teaching often evidences an overly simple view of the conditions under which the individual learns, by listening to a teacher talk. Theory of instruction and knowledge of how to make specific learning happen are critically needed. I think this is true for counseling as well.

Counseling has been pre-occupied with learning theory. It, too, (for example, in the case of the non-directive school) has assumed a highly confining view of the conditions under which the client learns. Counseling also has drawn heavily on a considerable ideology and some evidence from psychotherapy as to the circumstances under which the anxious, neurotic individual with serious emotional deficits may be able to learn. Behavioristic ideas and practices in counseling (Michael and Myerson, 1965, Krumboltz, 1966), while derivative from learning theory, do underscore the point that clients learn in different ways. It is probable, I think, as more elaborate theories of instruction, of learning and of their inter-relationship are developed that teaching and counseling will be both *more* differentiated, complex, and *less* distinguishable methodologically.

Ryans, by statistical analysis, found common or normative patterns which differentiated teaching behavior (warm, friendly versus aloof, restricted teaching; businesslike versus unplanned; stimulating, imaginative versus dull, routine teaching) (Ryans, 1960). Flanders has developed a method for analyzing teaching when defined as verbal interaction or discourse between teacher and pupil. Teaching evidencing particular characteristics (the ratio of teacher statements accepting student feelings, giving praise and accepting, clarifying or making use of a student's ideas to teacher statements giving directions and giving criticism) was found to be significantly related to pupil learning of subject matter, (Flanders, 1964). In the area of learning outcome, Bloom *et al.*, have provided a sophisticated way to translate content objectives into specific, measurable pupil "behaviors," (Bloom, 1956). All of this, and related work, ought to be required reading for researchers investigating counselor selection-effectiveness. I believe it has significant implications for such research. Let me illustrate by summarizing what it seems to suggest concerning teaching and the implications for studies of counseling.

Teacher Effectiveness—What We "Know" Now

The effective teacher is not necessarily one with an honors A.B. (or Ph.D.), a G.R.E. score on the 95th percentile, 30 graduate hours in educational psychology, an A in student teaching or an Ivy League All-American. The effective teacher is one who responds appropriately to specified factors in

the classroom, such as the individual learner's intellectual ability, the organization of his knowledge, and how he thinks. This is a first order definition—if we look at what the teacher does and says as he teaches. The emphasis is on teacher *behavior* in *interaction* with specific factors in the classroom. Viewed less in terms of immediate classroom behavior, another definition of effective teaching focuses on its products or results. *Effective teaching is the ability to produce agreed upon educational effects.* It is evident that research using this definition will have to agree on what educational effects the teacher is to produce. (In English, for example, the objective of the teaching may be knowledge of anything from Beowulf to Joyce, or instruction in very specific reading skills.) Obviously, these effects will and should vary. This is a basic point to which we will return in a moment.

The notion of "*ability to produce*" as a teacher property has been introduced in this second definition and needs brief elaboration. Perhaps the concept of an "independent variable" from research is a useful one here. Teacher properties (intelligence, empathy) are really hypothetical, psychological constructs. They are presumed to characterize the teacher in a consistent way and explain his behavior in response to a variety of teaching situations. The trick is to avoid already debunked, static personality, or other, variables. The question is really the old question—or the continuing question: What abilities? Let me suggest two such independent variables, at least one of which is new, and both of which can be related logically to a conceptualization of teaching.

The first is cognitive flexibility-rigidity. This is, very simply, the teacher's ability to think on his feet—to adapt teaching objectives, content and method as he teaches (in response to the reaction and learning difficulties of the pupils). As a psychological concept, cognitive flexibility refers to dimensions of open mindedness, adaptability, and resistance to premature perceptual closure. Cognitive flexibility is hypothesized as one variable involved in teacher effect. Since the second half of this paper will describe two studies of cognitive flexibility as a factor in teacher and counselor effectiveness, further discussion here is deferred.

A second teacher property which may characterize the teacher in a consistent way and explain his behavior in a variety of teaching situations, is his interpersonal relationship with pupils. I would think it might be measured in the motivational or attitudinal effect of the teacher in interaction with students, or by student identification with a teacher and his subject field. Interpersonal relationship with clients is a property which will be immediately familiar to counselor educators. Significantly, it has been studied less in relation to teachers than in relation to counselors (Rogers, 1965). Although there will be little further reference to this variable here, I personally expect this attitudinal-emotional correlate of teaching to be *highly significant* to the effect of formal instruction.

Additional teacher properties are deliberately represented by $x \dots$.² Cognitive flexibility and the quality of the teacher's interpersonal relationship with students might be expected to explain perhaps a quarter of the variance in teacher effect. These properties should not be expected to account for more, under any circumstances of content and pupil, or for *all* of such variance.³ It seems likely that to the extent that teaching effect is explainable in terms of this *one* category of independent variables, teacher properties, that we will find effective teaching to be the result of a cluster of "unrelated" abilities. Effective teaching is the product of many factors.

Perhaps the discussion can now go back to the point of digression—that we have got to agree on what educational effects the teacher is to produce before we can evaluate who or what method can best do this. It is here that the problem moves outside the exclusive realm of research or empirical answer. What is confronted is a profound philosophical issue regarding what is to be taught or learned. At one level these are curriculum and instructional issues; in a deeper sense they are value issues: priorities as to what knowledge is of most worth. My own priority, for research on instruction, would be to focus on immediate, "educational" effects. By this I mean pupil learning of specified subject matter or other content/curriculum objectives: the outcomes of formal instruction. To adequately measure these outcomes is a formidable task. Alternatively, "effect" may be pupil *attitude* toward subject matter, content/curriculum or learning. This, as noted, would satisfy the writer in response to the large question: "What knowledge or behavior is the learner to manifest?" I am less concerned, in the context of measuring teacher effectiveness, with estab-

² Cognitive factors other than general intelligence have, as noted, been little studied among teachers. *Studies of divergent thinking and of authoritarian attitudes of the teacher would seem a promising line of inquiry.* Knoell, for example, found correlations ranging from +.28 to +.46 between two (of nine) measures of "ideational fluency" and careful ratings, *a year later*, of teaching effectiveness (Knoell, 1953). Ideational fluency has been defined by Guilford as a divergent thinking factor: "the ability to call up many ideas in a situation relatively free from restrictions where the quality of response is unimportant" (Guilford, 1959, p. 382). For example, one of the four minute tests Knoell used required the subject to "write all the adjectives which could be used to describe a house," the other was "to list all the things that are round or could be called round." The Knoell study is essentially unique in the literature; it should be replicated and elaborated.

The work of Jones (1955) and Scodel and Mussen (1953) found that authoritarian individuals (those with more rigid cognitive attitudes) are more insensitive than non-authoritarians to the personality characteristics of others and more insensitive to individual differences. McGee, in a carefully conceived and designed study, found a correlation of +.58 between the California F Scale score, a measure of authoritarianism, and teachers' verbal and overt authoritarian behavior toward pupils in the classroom (McGee, 1955). Replication of this study, in conjunction with measures of pupil learning, could be highly informative.

³ To underscore this point, it is only necessary to mention the numerous and not well understood environmental conditions, or independent variables, in the classroom which affect instruction there.

lishing that the student behaves more rationally or ethically *in life*. Obviously, however, it can be questioned whether education is having any genuinely significant effect if it does not produce such behaviors. Again, we face the problem of agreeing upon what educational effects the teacher is to produce—when, in whom and for how long.

This seems to me the crucial issue in counseling too. What effect is the counselor to produce? Recognizing that the answers here, too, will vary, let me suggest a statement of the immediate effects a counselor might produce. It would seem to me that the formulation, on the client's part, of a more comprehensive idea as to the presenting problem(s) and its elements; a better rationalization of a position to be taken, a more comprehensive plan on the client's part for action; the clarification, or resolution, of his feelings—any or all could satisfy a definition of immediate counseling effect.

In teaching it now seems increasingly clear that these immediate educational effects (learning of subject matter, and pupil attitudes toward the teacher) result from interaction between what the teacher does (says) and what the pupil does (says).

There are several assumptions here which need spelling out: (a) A first assumption is a definitional one. Teaching, as typically practiced, is verbal behavior-talk between teacher and students. The Meux and Smith statement: "Teaching behavior is primarily verbal" coupled with Stolurow and Pahal's view that "Teaching is fundamentally a social process involving communication and interaction between at least two people, a teacher and a student," set the definitional context of this chapter (Meux and Smith, 1964).

(b) A further assumption is that teaching, so defined, is one significant variable intervening between or effecting curriculum and pupil learning. Teaching or formal instruction is important to what children learn.⁴ This is not to contend that verbal discourse between teacher and student is a pre-emptive definition of teaching or the only way to learn. The theoretical viewpoint is that in specifying the conditions under which individuals learn, instruction by classroom verbal interaction is but one of a number of instructional (*learning*) conditions. In most *schools*, however, and for most *teachers* and *students*, it is likely to be the predominant mode of instruction.

It has already been suggested that, with certain modifications, counseling is a social process involving communication and interaction between at least two people—a counselor and a client. Operationally, most counseling is talk. The

⁴ Admittedly, there can be an argument here. Rogers, for example, has said: "Teaching, in my estimation, is a vastly over-rated function" (Rogers, 1966). For the writer, formal instruction is the essential justification for the school *per se*. Indeed, I see little other. Let me not imply, moreover, that I equate education and school. I am much more ready to give up most current definitions of school than I am ready to concede the necessity for formal, systematic instruction.

reader appropriately may object to this pre-emptive definition, or reality, with regard to counseling. I, too, think it is overly confining for many categories of client and counselor. Counseling is not solely, or perhaps even substantially, what counselors do (or should do with many clients). Blocher's comments about indirect treatments in Chapter One have profound implications for counseling objectives and roles.⁵ When *counseling*, counselors primarily talk with clients, and we know little about the power or limits of counseling so defined.

In one sense, talk between counselor and client is more "content free" than is teaching (the commutative principle is rarely talked about in counseling). But what is talked about in counseling is certainly classifiable. The idea of domains of client concern, or decision-making, as educational, vocational or "personal" are familiar and useful. It is, presumably, the client who brings or develops the agenda and the domain, but obviously there is content in counseling talk. Ways to classify what is discussed in counseling can be derived on a priori or empirical grounds.

Counseling manifests personal-social interaction between two people. In a way, that is the play within a play—or what is implicit—between the actual lines of the dialogue. These emotions and feelings of counselor and client toward one another are unquestionably important to the outcome of their dialogue. Perhaps even more so than in teaching is this the case. But not only feelings are expressed, ideas are being communicated, plans formulated and decisions made; counseling touches, and must be responsive to, all of this communication. It seems to me that this operational definition of what counseling typically is, is manifest as one listens to electronic recordings of counselors and clients talking. The typescript is a word picture of counseling. I think we recognize this, too, when we supervise counselors-in-training and make micro-analysis of tapes of their talk with clients.

This is an assumption important to much of this paper. I am suggesting that the "action" and the message in counseling as typically practiced is significantly in talk between counselor and client. In a sense, the message is the medium. An important part of the difference, in what determines the effects or outcomes of counseling is either explicit or implicit in this talk. Operationally, studies of counselor effectiveness might productively focus here. That seems to be the "word" from teacher effectiveness research at this point. The position is clearly behavioral. It attaches no necessary mystique to what the counselor is or to relationship in the abstract. What the counselor and client talk about, how they talk and their emotional attitudes toward one another are what matter.

The problem in teaching, so defined (and in counseling effectiveness research which might assume this focus) is that the basic rules for analysis and

⁵ For an analogous critique of the school and of teaching, and a radical re-formulation with regard to the objectives of education, see Fred M. Newmann and Donald W. Oliver, "Education and Community," *Harvard Educational Review*, 37 (Winter, 1967), 61-106.

summation for verbal discourse between teacher and student are still unknown. But research is being concentrated here. Teacher-student (or counselor-client) interaction can be readily recorded electronically and on video tape. The problems of analysis and summation are formidable ones, but research methodologies do exist. Programmed instruction, in conjunction with Bloom's work, has taught us how to be relatively specific about the content to be communicated. How accurately or validly such content is communicated is a complex but not unmanageable problem, and the validity of the content communication problem is perhaps no trickier for teaching than for counseling.

Interactional analysis, developed by Flanders, is a method, among several systems, of quantifying selected qualitative aspects of verbal communication between teacher and student. It permits analysis of spontaneous communication between individuals. Seven categories of teacher talk are employed: (1) accepting student feelings; (2) giving praise; (3) accepting, clarifying or making use of a student's ideas; (4) asking a question; (5) lecturing, giving facts or opinions; (6) giving directions or (7) giving criticism. Student talk is classified as (8) student response or (9) student initiation. (Of interest to those with a counseling orientation is the fact that silence and *confusion* represent a 10th category). The instrument, by itself, is content or subject matter free—that is, it does not indicate how well a particular topic in a curriculum or subject, or a given concept, was taught. Right, wrong, good or bad content information—whatever is being discussed—is not recorded by Interaction Analysis (such information can be recorded separately, of course). What is measured is teacher verbal influence and the flexibility of the teacher's verbal interaction with children. From Flanders' work, too, there is preliminary but promising evidence as to what characterizes effective discourse between teacher and student. What Flanders has found is that teaching which is indirect—which evidences systematic and significant shifts in the pattern of teacher verbal influence as classroom learning activities change over time—is effective teaching. Superior subject matter achievement was experimentally established for such indirect teaching ($p < .01$) in two subject fields: social studies and mathematics at the junior high school level. Fewer discipline problems were associated with indirect teaching. Significantly higher ($p < .01$) attitude scores (toward the teacher, the class and the learning activities, and independence of the teacher) were also found to be associated with indirect patterns of teaching.

Summary

In summary, it has been suggested that teaching is currently defined as communication; talk and personal interaction between at least two people. To understand the effectiveness of this communication we must look at its con-

ment, the characteristics of the talk and of the personal interaction. Opinions vary as to the degree to which verbal and non-verbal behavior are correlated in teaching. This paper has suggested, however, that these be two major focuses of research on teacher effectiveness (and, perhaps, counselor effectiveness, too). What is emerging from current research is that that teaching which is "indirect:" teaching which is relatively more concerned with and makes greater use of statements by students; which integrates student ideas into the content of what is being talked about and does so much more often; teaching which asks longer, more extended questions, and does so more frequently; teaching which praises and encourages student action and which makes constructive interpretation of student feelings or attitudes, and teaching which can systematically shift these strategies in response to what is happening in the classroom—such teaching is significantly related to how much children learn, their "deportment" and most important, perhaps, their attitude toward learning and their ability to be independent intellectually and personally of the teacher. Note, too, that this finding was true when both subject matter (in this case social studies and mathematics) and the ability of the students were controlled factors.

Research on teaching is currently being concentrated on this process of verbal (and, in lesser degree, social) communication. This clearly seems to be what teachers do, and what in fact teaching is. What is also increasingly clear is that we cannot select or train teachers for this process of verbal and personal communication exclusively by G.P.A., Miller Analogies scores, courses in Beowulf or Joyce. Using these procedures, we can predict, with reasonable validity, a student's ability to complete graduate degrees in education and/or English. The correlations between any of these indices and instructional practice (or its effectiveness), however, is inadequately low. Research related to this emerging conceptualization of what it is, additionally, that makes a difference in teaching is now possible. The rest of this paper deals with studies of one such independent variable, cognitive flexibility, which may be both conceptually and practically related to this process of talk and personal interaction between teacher and student (and counselor and client).

It has been suggested that research on counseling might productively concentrate on the process of verbal and personal communication between counselor and client. Descriptive studies, at least, of the types of problems discussed in counseling—with various clients in various settings—of the content-free and content-related characteristics of talk between counselor and client, and of immediate counseling outcome, appear to be indicated. I am suggesting studies of counselor influence—expressed through verbal influence and with which emotional influence is positively correlated. Ideological disputes: the argument that counselor values be withheld; counselor intellectual

influence and counselor statements be systematically minimized (or non-directive), focused upon and reflective of feeling rather than client thinking, can better become hypotheses to be tested with particular clients and particular client problems. For example, it is probable that counseling characterized by a high degree of *flexibility* of counselor verbal influence (and a similar flexibility in the degree to which counseling involves communication about emotion) will be significantly related to outcome. Outcome here is defined as achievement of certain of the immediate short term counseling effects or attitudinal changes on the part of the client. The kinds of people and the kinds of (presenting) problems with which counselors interact are highly varied. It would seem that their talk will have to be as highly varied. What the counselor listens for and replies to—both intellectually and emotionally—must be characterized by a very wide range and flexibility in reply. Counseling can hardly be other than comprehensive and empirical in its conception of the conditions under which a client learns. Here I would stress again conceptions of treatments radically different from, and additional to, counselor-client talk. The implication that counseling should be highly flexible methodologically is equally clear. Whether counselors can be renaissance men—equally effective with all presenting problems, all clients, all methodologies—may be a moot question. I think not. We should consider this, too.

Section II: Cognitive Flexibility as a Factor in Teacher and in Counselor Effectiveness

The discussion now turns to two related studies of effectiveness. The first deals with beginning teachers; the second deals with counselors in training. In line with the general argument of this paper, it merits noting that the research began with the study of *teacher* effectiveness. It will be evident that the controlling ideas and the research methodology are pretty much of a piece for the studies with both groups: teachers and counselors. This may underscore the general argument by analogy from teaching to counseling.

Cognitive Flexibility-Rigidity

The "cognitive flexibility or rigidity" of the teaching seemed an important difference. This difference is observable in the teacher's ability to think on his feet, to adapt teaching objectives, content and method as he teaches (in response to the reaction, learning difficulties and verbal "feedback" from the students). The degree of such articulation between the particular content,

what the teacher says and what students say (and, by inference, the teacher's ability to produce it) appears to vary significantly among beginning teachers.

More technically, cognitive flexibility refers to dimensions of open-mindedness, adaptability, and a resistance to premature closure. Cognitive flexibility implies an ability or capacity to think and to act simultaneously and appropriately in a given situation. Rigidity assumes the opposite, an intolerance of ambiguity or excessive need for structure, a difficulty in adaptation. Cognitive, in this sense, is admittedly quite broad; more inclusive, for example, than either intellectual capacities or a trait such as creativity. The former implies sets of factors which add up to "brightness;" creativity, or divergent thinking, implies atypical problem solving. Neither specifically predicts an individual's action in a real situation, as a classroom teacher.

The major formulations for the general construct were derived from studies of political and religious beliefs, prejudices and authoritarianism. The particular contributions of Rokeach (1954, 1960) have provided an important step toward conceptual clarity. Rokeach focuses on the "openness" or "closedness" of belief systems. Openness and closedness in terms of relating to one's situation might seem to be particularly relevant in teaching. In studies of the authoritarian personality, Adorno (1950) and others note this individual's method of cognitively structuring his world in terms of his own frame of reference instead of integrating the varied aspects of the objective situation. Dogmatism, as Rokeach (1960) develops the concept, is relevant for the same reason as an example of cognitive rigidity.

Researchers have found certain consistent clusters of traits associated with flexible or rigid thinkers. Gardner, *et al.* (1959) found, for example, that flexible thinkers do not suppress feeling, while constricted thinkers avoid using feelings or emotional reactions as a source of information.

Eriksen (1954) concluded his study of perceptual defense in terms of the effects of anxiety on cognitive functioning with the statement that: "Already there are some indications that these individual differences are associated with rather broad dimensions of personality (p. 81)." Studies by Shaffer, Mednick, and Seder (1957) and by Frenkel-Brunswick (1951) have related the flexibility-rigidity dimension to child rearing methods and early experience.

Witkin *et al.* (1954) and Allport (1961) have provided summaries of the personal characteristics of rigid and flexible thinkers. In Allport's terms, the rigid and flexible people are summarized in the following manner:

A person who is insecure, self-distrustful, who feels threatened by life or otherwise inadequate, tends to have a congruent cognitive style which is rigid, field-bound, concrete, acquiescent. By contrast, the more active, able, secure, relaxed individual is able to perceive and think in channels that are flexible and on the whole better adapted to the objective demands of the situation he finds himself in (p. 270).

Cognitive Flexibility-Rigidity in Teaching

The research to be reported here is not sufficiently comprehensive in design to present evidence that "cognitively flexible" teaching is more effective in producing pupil learning. Logically, however (and in the thinking of a number of teacher educators), there is support for the hypothesis that perceptual, intellectual and pedagogical flexibility is a differentiating quality in teaching.

The right decision at the right moment is the essence of good teaching . . . (The teacher) must decide when to begin an activity and when to bring it to a close; when to use student interest and when to pass it by; when to insist on exactness and when to sacrifice exactness to feeling. All these things and more the teacher must take into account in timing and pacing students' learning. (Goodlad, 1959 p. 39).

It perhaps merits noting, too, that cognitive flexibility—defined as a psychological construct (as a correlate or aspect of cognitive ability)—may seem to lend itself more directly and logically to a conceptualization of the teaching process than do many of the psychological variables previously cited. A point made by Getzels and Jackson is relevant here.

The role played by different types of (cognitive) abilities (divergent thinking) and by attitudinal correlates of ability has yet to be explored. If linked to an adequate conceptualization of teaching, these two-types of inquiry may lead us closer to an understanding of how intellectual power contributes to the teacher's behavior and effectiveness in the classroom. (Getzels and Jackson, 1963, p. 574)

While the research has been centered on one independent variable, it should be clear from Section I that cognitive flexibility-rigidity is not viewed as the single or only mediating variable for effective teaching. Both in theory and in practice, however, it does seem to have a logical relationship to what the teacher does and says in interaction with students. Cognitive flexibility-rigidity would be inferred largely from the teacher's verbal behavior in interaction with the pupils. Non-verbal aspects of this interaction, subtle affective cues such as voice tone or frowning, would not be considered. Again, the assumption is that most teacher influence is expressed through verbal statements and that most non-verbal influence is positively correlated with the verbal.

The Study of Teacher Effectiveness

In overview, the research on teacher effectiveness attempted to: (1) develop a set of concepts denoted as cognitive flexibility-rigidity; (2) relate these con-

cepts to a criterion of teacher effectiveness (admittedly "proximate"): teacher performance in the classroom—more specifically, teacher verbal behavior in interaction with the pupils' verbal behavior; (3) devise a method for the assessment of flexibility-rigidity prior to teaching experience; and (4) predict, and test out the predictions to actual classroom behavior for a sample of teachers-in-training.

Sample

The sample of 28 subjects (15 male and 13 female) was randomly selected from the population of student teachers in the Harvard-Newton Summer Program in 1964. The subject matter areas represented were English, social studies, mathematics and science. All subjects were candidates for the Master of Arts in Teaching degree at Harvard and involved in a summer program of intensive practice teaching. At the end of this practicum, the intern teachers spent half the following year as fulltime graduate students in residence, and the other half as paid intern teachers in local school systems.

The admissions standards for the program are rigorous. The average Graduate Record Examinations score for admitted candidates in 1964 was 660 verbal (94%) and 590 math (82%). Over half of the accepted applicants were honor graduates in their major field of study.

Predictor Instruments

The psychological tests used as predictors were the Rorschach and the Visual Impressions Test, a written form of the Thematic Apperception Test. Both instruments were administered before the intern teachers began practice teaching. The tests provided the data for predictions on each dimension of the criterion measure—the Teacher Rating Scale (to be discussed below). The procedures followed in scoring the Rorschach and the V.I.T. were developed for a prior study of elementary school interns, and are described and illustrated in detail in a published report of the study under discussion. (Emlaw, Mosher, Sprinthall and Whiteley, 1963; Sprinthall, Mosher and Whiteley, 1964; Sprinthall, Mosher and Whiteley, 1966).

In general, the Rorschach was used in such a manner as to develop a construct of a subject in the form: "He seems like the sort of person who ____." (McArthur, 1954) Translated to predicting how an individual would teach, the procedure would take the form, "He seems like the sort of person who would teach ____." This approach, using the Rorschach data, was applied to each flexible-rigid dimension in the Teacher Rating

Scale. A similar approach was used in analyzing the V.I.T. stories. The scoring system was an attempt to use the Rorschach and V.I.T. in a manner to avoid the pitfalls of a completely objective approach (for a comprehensive attempt to use the Rorschach in this way see Cooley, 1963). At the same time, the attempt has been to specify the particular elements of the protocols which were used in deriving predictions so that replication studies would be possible.

The Teacher Rating Scale

The Teacher Rating Scale was designed to categorize and rate certain cognitive behaviors characteristic of teaching. The categories are broad: (1) The way in which intellectual process is applied in the teaching (the cognitive "style" of the teacher); (2) the cognitive attitude adopted by the teacher toward the pupil(s); (3) the cognitive attitude characterizing the definition of the teaching objectives, the planning of content, the teaching methods selected and how they are employed. Subscales are included for each category; descriptions of both flexible and rigid teaching behavior are provided for each subscale.

The ratings were based on a complete period of the intern's teaching. The rater also observed the subject during the supervisory and planning conference which followed the teaching. As noted, the rater used the intern's verbal behavior in interaction with the pupils' (or supervisors') verbal behavior as the starting point for a majority of the sub-scale ratings on cognitive flexibility-rigidity. Written discourse and symbolic expression between teacher and pupil (as mathematics) figured less generally in the ratings than did spoken discourse.

Findings

The research findings indicate support for the basic hypothesis that cognitive flexibility and effective teaching are related. The overall findings were: (1) the dimension of cognitive flexibility-rigidity may represent a critical and differentiating factor in teaching. Predicted rank order of the subjects correlated $+0.53$ with their actual performance rank on the Teacher Rating Scale (the Teacher Rating Scale was scored to derive a summary score on flexibility-rigidity in teaching); (2) the research method for prediction along this dimension was found accurate, using particular aspects of the Rorschach and the V.I.T. administered prior to entry into the teacher training program; (3) the method for prediction of teacher behavior for the first two sub-scales of

cognitive flexibility-rigidity (personal cognitive characteristics, or cognitive "style," and cognitive attitude toward the pupils) was most significantly related to actual, observed teaching. (Rank order r of $+.54$ ($p. < .01$) and rank order r of $+.49$ ($p. < .01$) respectively.)

To examine the efficiency of prediction for each intern, the sample was divided into three groups: (1) the seven subjects predicted to be most flexible—the top quartile ($N=7$); (2) the middle group ($N=14$); and (3) the seven predicted to be most rigid—the bottom quartile. The predicted and observed ratings were compared by a Chi-square test. Five of seven teachers predicted to be most flexible were so rated; for the bottom quartile, accurate predictions were made for six of the seven rated most rigid in their teaching. In no instance was a false positive recorded (a "most flexible" predicted as "most rigid" or vice versa); (4) follow-up data indicate cross-validation for the predictions of effective and ineffective teacher behavior, particularly for the group rated as most rigid. For example, three of the 28 interns in the sample were dropped from the Harvard M.A.T. program at the end of the summer because of ineffective performance, a judgment rendered independently of the research. All three had been predicted and rated as most rigid. Another subject—predicted and rated as rigid—was not permitted to continue in the internship program; two others from the most rigid lower quartile were in the bottom decile—clearly marginal—in supervisor ratings of their internship teaching per se. By contrast, the subject rated highest in cognitive flexibility was the first intern ever to be appointed a "master teacher" at Harvard-Newton after but one year of classroom teaching experience. (5) Finally, the results from this study are highly congruent with those from a prior study using elementary school intern teachers.

The apparent lack of behavior change within the group of student teachers identified as most rigid and hence predicted to be most ineffective in the classroom merits noting. Under the existing procedures for training and for supervision (relatively optimal it should be added), it would seem that the cognitively rigid student teacher is unable to modify his behavior. Whether cognitive flexibility can be "learned" thus is an open question. The weight of the theoretical evidence tends to suggest that a disposition to flexibility-rigidity is another of the "by age five" phenomena. As noted previously, researchers have found consistent clusters over time associated with flexible or rigid thinkers and relationships to child rearing methods. Other theorists (Witkin *et al.*, 1954; Allport, 1961) have summarized descriptions of flexible and rigid personalities which indicate both stability over time and relative permanency as a life "style." In the research context, the writer's opinion is that for those student teachers rated to be in the lower decile (or perhaps quartile) as to personal cognitive characteristics, cognitive attitude toward pupils and in the definition of the teaching objectives, content and teaching

method, this particular independent variable may be both crucial and essentially refractory in its effect on the teaching. At a time when selective admission procedures are becoming possible in teacher training, this has practical implications.

Cognitive Flexibility and Counselor Effectiveness

Despite the acknowledged need for research on the selection and assessment of effective counselors, the existing "hard" evidence is disappointingly inadequate. Hill (1961), in reviewing a report by Barry and Wolf (1958), notes that almost no research has been attempted in this area (see also Cottle, 1962). Analogous research in related professional fields, while somewhat more extensive, is characterized by equivocal results. Kelly and Fiske (1951) studied predictions for success in clinical psychology, while Holt and Luborsky (1958) investigated similar questions in a psychiatric training program. Neither study was able to make substantial predictions of success.

The investigation which I would now like to summarize briefly developed from the research on teacher effectiveness described in the preceding section of this paper. Perhaps rather rigidly, we were interested in the implications of the concept of cognitive flexibility-rigidity as it might relate to counselor effectiveness.⁶ The theoretical meaning of cognitive flexibility and rigidity has already been developed. Applied specifically to counselor effectiveness, the flexible counselor, for example, might be expected to respond easily to both the content of what the client says in their communication and to the client's feelings. The counselor can ask or answer questions as necessary and yet keep the counseling dialogue open for additional exploration by the client. Put another way, flexibility would imply a general avoidance of either excessive structuring in the counseling situation, or the complete ambiguity of non-direction.

The nature of the counselor's work with clients makes flexibility a particularly relevant factor. The counselor cannot know in advance what solutions would be appropriate for any individual. He cannot know in advance in what direction his dialogue with the client may go. He does not know how the presenting problem may be related to other and perhaps deeper personal concerns of the client. He cannot, then, have an exact plan as to how he will operate in any given situation. It would seem that the counselor's communication per force must be flexible, open ended, an active exploration of ideas and

⁶ The idea and research design for this study is elaborated in Sprinthall, Whiteley and Mosher (1966). Its implementation and findings are discussed in detail in Whiteley, Sprinthall, Mosher and Donaghy, "Selection and Evaluation of Counselor Effectiveness," *Journal of Counseling Psychology*, Volume 14, No. 3 (May, 1967).

feelings with the client. Cognitive flexibility thus would seem a most relevant dimension to any counseling interaction where the objective is that the client clarify his own perceptions, thoughts, feelings and develop his own decisions and plan of action.

The hypothesis is very simple: it is that cognitive flexibility will contribute to effective counselor-client communication. The ability to listen and to respond to the client's perceptions, thoughts, and feelings would require that the counselor operate from an open cognitive system within himself. Previous research has clearly demonstrated the importance of this dimension as a factor in being able to understand and to communicate with people (Rokeach, 1960; Bieri, 1955; Kelly, 1951; Jones, 1955; Scodel and Mussen, 1953). Cognitive flexibility, then, is selected because of its close logical linkage to factors in counselor-client talk which may differentiate its effect.

The Research Procedures

The way in which this particular research was done will be described briefly. The study was done with candidates for the Master of Education Degree in Guidance at Harvard in 1964-65. The final sample consisted of 19 students (7 men and 12 women) who completed the projective tests and other independent variables, and for whom a criterion measure (a supervisor rating of practice counseling) was available.

The principal predictor instruments (the Rorschach and the Thematic Apperception Test) were administered during the early months of the training program. The tests were coded and scored as a basis to make predictions of the various dimensions of the Counselor Rating Scale. This latter scale was rated independently by supervisors on the basis of the subject's actual counseling performance in a practicum. This practicum is done during the spring semester of the academic year. The procedures used in scoring the Rorschach and the TAT were modifications of those used in the research on teacher effectiveness. These have been described in this paper and in published sources. The projective data were essentially used to make predictions in the form of "this subject seems like the sort of person who would counsel."

A third predictor instrument, the Personal Differentiation Test, was developed as a non-projective measure of cognitive flexibility. The subject is required to consider the personal characteristics of particular individuals associated with the school environment. The task is to link any two individuals of three being presented by a personal characteristic which differentiates the chosen two from the third. For example:

<u>Yourself</u>	<u>Friend</u>	<u>Principal</u>
Emotionality		Reserve

A detailed description of the Personal Differentiation Test and its scoring procedure is included in the article elaborating this study already referred to.

Two case studies, used to predict counselor response, were administered to the subjects in the spring semester. These cases were developed as a type of "crisis" situation or "critical incident" in counseling. The subjects were asked to write out their responses as quickly as possible since the framework was created to see how quickly they could think on their feet. The reader interested in details of the cases and the scoring procedures is referred to the *Journal of Counseling Psychology* article.

A film was also used for predictive purposes in this study. It was *A Clinical Picture of Claustrophobia*, in which a counseling session is presented. It was shown to the subjects in the early part of the spring term. The film was stopped at 28 critical points following a procedure developed by Strupp (1960). At each critical point, the student was asked to respond to the client as he thought appropriate, or not to respond at all if he thought no response would facilitate the counseling.

Student responses were scored using a system developed by Allen (1966). The focus is on what aspect of the client's verbal statements the counselor chooses to respond. Categories used in evaluating counselor response are as follows: response to feeling, such as recognition, question about, reorganization of, or response to, un verbalized feeling; response to content, such as remarks about ideas or statements; acceptance of a client's remark; interpretation; information giving; silence; and critical evaluation of the client.

The subjects' test scores from the Graduate Record Examination or the Miller Analogies Test were also included in the analysis. The point was to see whether there was any trend or possible relationship between these intellectual measures and either the independent or dependent (supervisors' ratings of cognitive flexibility-rigidity) variables.

The Dependent Variable: The Counselor Rating Scale

The rating scale is designed to categorize and rate certain characteristics of counselor behavior. The categories are broad: (1) an overall rating of the way in which intellectual process is applied in counseling; (2) the cognitive attitude characterizing the counseling. The latter is rated in terms of the degree of exploration and examination in the interaction between the counselor and client, the degree of focus on the client's perspective, the repertoire of counselor responses, the amount and quality of interpretation, the ability of the counselor to handle the unexpected, and the counselor's professional objectivity. (3) A third general category has to do with the cognitive attitude adopted toward the supervision process for example, the subject's openness to alternatives, and his understanding of the dynamic complexities in counseling.

A full description of the Counselor Rating Scale and its use in this study has been published. Suffice it here to say that ratings of counselor behavior for the experimental subjects were made by the Harvard supervisors. The ratings were based on a five month period of supervision involving tapes of the subject's counseling, verbal and written reports, weekly seminars, and individual supervision sessions at least every other week.

Results

The principal findings of the study may be summarized quickly. The correlation coefficients were +.78 between the projective test scores and the supervisors' ratings of counseling, and +.73 between the critical incident case scores and supervisors' ratings. The correlation between the Personal Differentiation Test and the criterion variable was +.33 (nonsignificant). The fourth predictor, the film, *A Clinical Picture of Claustrophobia*, presents a somewhat clouded negative. The correlation between the number of response categories for the film was virtually zero with supervisory ratings of counselor effectiveness, as was also the case with the number of feeling responses made by the counselor. Between the criterion and the number of content responses, there was a negative correlation ($- .47$, probability $< .025$). Overall, however, the absolute number of responses of a given type did not correlate with supervisory ratings of counselor effectiveness.

A final variable was that of the intellectual ability of the student counselor. The supervisor's ratings and the intellectual data correlated only +.09. That is, there was no relationship between scores on Miller Analogies Test or the Graduate Record Examination and the supervisory ratings of rigidity or flexibility in counseling.

Discussion of Findings

The major finding of this study was that a subject's cognitive flexibility or rigidity as predicted on the basis of projective tests showed a reasonable high positive relationship to supervisory ratings of the subject's counseling along the same dimension. Over half the graded performance of counselors-in-training are accounted for by this correlation. It is perhaps especially of interest that this is the third time that such a finding has appeared. The two prior studies, with elementary and secondary teachers-in-training, produced analogous results. Using a scoring system for responses on the Rorschach and the Thematic Apperception Test based on indices of cognitive flexibility and rigidity, a consistent relationship has been demonstrated between these indices and the role performance of both teachers and of counselors in training.

It is of interest, too, that the critical incident cases were equally significant statistically when correlated with supervisory ratings of counselor behavior. Logically, this is not surprising. The cases were designed to represent counseling situations where there was no single correct answer. This kind of test is a paper and pencil simulation bearing close similarities to the demands of actual counseling situations. The need to think and respond quickly while in the situation may have been the most important element in apparently differentiating between those subjects subsequently judged flexible versus those rated as rigid in actual counseling. A clear implication is that more study should be done on the possible applications of critical incident cases in admission. Such data may be more indicative of an important dimension in selection than either tests of intellectual ability or intuitive ratings made on the basis of personal interviews such as now are commonly in use.

On the matter of measures of intellectual ability, it would seem from this study that the Miller Analogies Test or the Graduate Record Examination can serve as predictors for those aspects of academic or professional training involving formal instruction or study. The Miller Analogies Test or the Graduate Record Examination can serve as well as cutoff scores below which successful completion of graduate study is doubtful. But we should not delude ourselves that we are predicting counseling effectiveness with such measures. The results of this study support unequivocally the findings of earlier studies that we are not.

Finally, the research findings raise an extremely important question. If, as has been indicated, the predictions were relatively accurate, does this mean that training has little effect? Is the implication that in spite of individual supervision and the broad phases of training programs which purport to be focused on developing the counselor as a sensitive inquirer with the pupil—that this process of deliberate education is, in fact, relatively unsuccessful? Or, to put the question another way, is the general assumption among counselor educators that responsiveness and sensitivity can be acquired in training realistic? Before any precise answers can be given, it certainly will be necessary to examine closely and extensively the existing process of counselor education.

Epilogue

Do we then, in conclusion, simply assert that we do not know how to define, select, train or evaluate *either* the effective teacher or the effective counselor? In essence, this is the case, but it need not be a paralytic conclusion. The intuitive and unverified nature of our answers makes it intellectually imperative that we be non-categorical about who to train, how to train and in regard to what teaching or counseling behavior is effective. I personally am optimistic,

however, that these essential questions are finite and answerable with more research. But I think we have had enough research on both teaching and counseling of an atheoretical, empirical, predictive nature. The research needs psychological (and other) theory and logical and clinical understanding, as well as psychometric theory or empirical prediction. Hard thinking needs to precede hard data. Indeed, a moratorium on the latter, in isolation, would be welcome. Similarly, small scale research in isolation (*ad hoc*, one variable studies—such research, candidly, as that reported here) should be superseded. Conceptual and research studies on a large scale (in terms of budget, personnel and time) are required. Medical research (for example, on cancer) provides a useful organizational model. It would now seem possible to organize research in this way. The Regional Educational Laboratories should put our research rhetoric to the test!

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Discussion

Lawrence E. Taliana

Recalling Patterson's (1966) review on counseling, there seems to be some consensus about counselor characteristics considered important for effective counseling. Few are surprised that empathy, warmth, and genuineness are mentioned as positive attributes. In reading Getzels' and Jackson's (1964) review of the research on teaching, one seems justified in concluding that these traits have some parallel to the characteristics of teachers who are effective in their teaching.

The concept of cognitive flexibility has been described as having dimensions of open-mindedness, adaptability, and a resistance to premature closure. Some rather interesting research possibilities occur to me from the standpoint of the perceptual dimension. Combs and Soper (1963) have shown some relationships existing between counselor effectiveness and perception in their study. It has been further demonstrated in the literature that one's affective or emotional state can have an effect upon perceptual accuracy (Kretch, *et al.* 1962).

From my experience with counselor trainees in group work, noticeable differences in the perceptual accuracy of the various group members are apparent as the interaction progresses. Even though some of the interaction may involve a particular member, some individuals may have difficulty in accurately interpreting the behavior. It soon becomes possible to identify certain individuals who have difficulty in this respect. I have made no attempt previously to investigate this behavior, but it would seem that this area might provide some useful data if it has not been researched. It is hypothesized that this may be a correlate of the broader dimension, cognitive flexibility-rigidity.

From the research Mosher reports, the Rorschach and other perceptually oriented measuring instruments appear to provide some useful measures

toward the determination of positive counselor characteristics. Perhaps perceptual distortion or inaccuracy as measured by these instruments can be used to test hypotheses relating to accuracy of perception in counselors. The assessment of form perception obtained from the Rorschach is one such measure. This could well be a curve-linear relationship, in that poor form quality as well as an over-reliance upon form might contribute to poor perceptual awareness. Rigid personalities typically show a reliance upon structured aspects of the ink-blot for their percepts. Several factors relating to accuracy of interpersonal perceptions have been studied, and this accuracy tends to vary over time, so it may well be that a somewhat nebulous quality is being considered (Kretch, *et al.* 1962). At least it is a research variable that should be considered.

Even though the research reported by Mosher raises the question of whether training has an effect upon increasing one's cognitive flexibility, there is research in the literature demonstrating that one's perceptions can be sharpened through learning (Kremers, 1960).

Though counseling has been operationally defined as talk, and there is a strong parallel to teaching drawn here, I would like to qualify this. Generally it seems true that one of the mistakes a beginning counselor makes is talking too much. Some experienced counselors seem to make this mistake too. One training institution for psychiatrically oriented therapists advocates as a training technique that the therapist strive to complete his response to a counselee within a five-second interval. Exceptions to this, of course, would be recognized, but the consideration here is to decrease the amount of verbal interaction on the part of the counselor or therapist.

There is a tendency to over-verbalize on the part of the counselor, which has the effect of communicating a message of condescension to the counselee. Over-verbalization by the counselor seems to imply a talking down to the client, or that the client's interests are of secondary importance. This flavor of condescension is frequently seen in group dynamics settings, especially when the purpose of the talking may be that of one person giving feedback to another in ways he might go about changing his behavior. Not infrequently, in questioning, the individual spoken to relates that a feeling of being patronized is experienced.

Martin Buber (1958), in his work *I and Thou*, has an interesting observation about the use of language in interpersonal relationships. In modern culture, Buber stresses the importance of interpersonal relationships. They are the essence of living. To do otherwise results in man's depersonalization. Modern culture, in a sense, has destroyed interpersonal relationships by making them object-oriented. The "Thou" is the other person, and in a relationship between two people, this experience can occur without verbal communication, according to Buber. If an attempt is made to conceptualize it, it becomes an

"I—Thing" which implies a superior-subordinate position, and there is no longer any relationship. The "I—Thou" relationship cannot be verbalized.

There is a message here which has implications for the counseling relationship. Perhaps there is nothing more than a reaction to non-verbal cues, but the point is, verbalization (conceptualization) may have a tendency to destroy the interpersonal relationship.

True, most verbal behavior is positively correlated with non-verbal influence, but one wonders about the frequency of double-bind messages in counselor behavior. Over-verbalization could have this effect in the counseling relationship. Is such a characteristic related to the complex of traits—cognitive flexibility-rigidity? In clinical settings, we see as an extreme example intellectualization and pedanticism in the rigid personality. Measures of conceptual thinking typically show this individual to have a lack of fluidity in his thought processes too. These individuals are rarely characterized as warm, empathic, or genuine.

The hypothesis in Mosher's paper, "... cognitive flexibility will contribute to effective counselor-client communication. The ability to listen and to respond to the client's perceptions, thoughts, and feelings would require that the counselor operate from an open cognitive system within himself," has interesting implications. If this quality is a necessary one for effective counseling, what kinds of conflicts arise between such an individual and his functioning environment, the school? Does this suggest why counselors are accepted in some settings while in others they are not? It does seem to be a legitimate extension of the research that might be conducted with the cognitively flexible individual.

The research conducted with the use of the film, in which students are asked to make responses at varying points to the stopped film, might be investigated further. A similar technique, using a tape recorder, is employed at the University of Oregon Medical School as a training device. Unless the practice effect is not controlled in the design, results can be affected. Experience at Oregon seems to indicate that improvement in response skill can occur with this procedure and technique. Further investigation seems especially desirable with some modifications, perhaps in design, since a rather sizable negative correlation was obtained.

The implications of the research reported by Mosher for counselor education are especially provocative if cognitive flexibility-rigidity is relatively fixed prior to training; counselor education programs do not seem to affect it. Since we are looking at educational research for comparative purposes, we could cite the rather extensive study done by Jacob (1957) to humble us even further. His study related to the changing of student's values by the college curriculum. The influence was woefully lacking. There is little research to show that our

educational systems or teaching are particularly effective in making changes in the affective realm of the individual's personality. If we subscribe to Eysenck's (1952) critique, we do not have much effect in counseling either. If counselor education programs have no influence upon our charges, does our function become solely one of identification of talent?

A case can be made for the proposition that we should investigate the other end of the counselor education system, the creator of the product. This thought is not so new. Rogers' paper, (mimeographed) "Graduate Education in Psychology, A Passionate Statement," in which he voices concern about educational practices in graduate departments of psychology, has still had little impact. One wonders about the interaction effects between student and professor, especially where personal characteristics are concerned. If the cognitive flexible individual is in the program, he will survive through his resourcefulness. This encounter with the system will provide the basic training for his encounter with the world at large, to become an agent of change.

Do counselor educators tend to mold their students into their own self-images? Is this a variable that needs to be studied? Certainly if the relationship between individuals is responsive and identification occurs, emulation is likely to occur. This surely would extend to functioning as a counselor.

At an institute where I spent a year, a visiting counselor educator, after spending two days observing practicum sessions, counseling sessions, group discussions, and the general routine of the institute, commented that he could accurately identify enrollees with their group leaders. Apparently the characteristics that he observed in the four staff members were so emulated by the seven to eight people in each group, that he saw some relationships. Although he was not asked to back up his statement, his average might have proved interesting.

That the characteristics of counselor educators need researching, especially for interaction affects, seems obvious. We could point to some of the research conducted by the National Merit Scholarship Corporation, involving interaction between college campus climate and student performance, to draw a parallel.

I suppose in any counselor education program, a certain amount of disagreement between staff members is inevitable concerning progress or the desirability of continuing certain students. If one considers all the counselor education programs in the country, there are certain to be differences in emphasis. This was quite apparent to me at a second year institute which brought together enrollees from some 20 different counselor education programs. All of them had at least a master's degree and a year of experience following the degree. It was possible during the year to become well-acquainted with the 30 enrollees who came from all across the country. I wonder if the differences in the characteristics and competencies of these individuals were a function of cognitive flexibility, or was it perhaps the influence of their training programs.

Mahan and Wicas (1964), through use of an adaptation of the Rorschach and an adjective checklist, studied a group of NDEA counselor trainees and found the personality attributes to be in contrast to the picture of the desirable characteristics mentioned by Mosher. The obtained measures drew a picture of the trainees as "highly controlled, sensitive to the expectations of society and authority, doers rather than thinkers, defenders of the established order, and as rather repressed individuals not given to introspection or self-analysis." Does this suggest a different role and function for these trainees in the counseling relationship?

It is difficult for any of us to take a close look at ourselves, and perhaps even more difficult to make a change where change seems indicated. If any of you have been involved in a curriculum review, this point comes home to you quickly. For those of us who have a vested interest in our programs and positions, this self-scrutiny is perhaps more difficult. It is difficult for parents to accept behavior in their children that is in effect a mirror image of their own behavior. But it seems that some of our research effort should be directed toward the effectiveness of our training programs and the kinds of people we are producing.

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Discussion

William C. Cottle

Mosher and the speakers who preceded him have pointed out that much research is piecemeal, unrelated, contradictory, and often inconclusive. However, as I look back at the things that have happened to me as a counselor, to my clients, and to other counselors and their clients, I *know* that counseling *is* effective. It works. People change their behavior. When I hear comments which infer or state that the more complex cases get the least help and make the least progress, I do not believe this. I just believe we have not been able to demonstrate it.

For example, when you use controls, and when these controls are cases who were not accepted for counseling and were postponed, you get the same effect that you get with an individual who comes in to sign up for a counseling interview and can only get one some time in the next two or three weeks because the case load is so heavy. Something happens to this individual in these two or three weeks. Either he still feels under pressure and comes for his appointment, or he resolves his own problem by himself, or he learns to live with it and does not come back. If he is used as a control, either of these last two changes may contaminate the situation.

Another attenuating element is that we talk about individual differences. We emphasize this in counseling, but we do research by combining results on a group basis which may mask changes within each individual. We do not describe enough in detail the changes within the individual because the complex nature of that individual makes it difficult to identify and quantify them.

Counseling research itself has posed problems. Communication is one of them. I am thinking now in terms of central sources of information and re-

search. Years ago, Harold Seashore was talking about a system for Division 17, of classifying, organizing and disseminating information about research in counseling psychology. The reference cards received with the *Journal of Counseling Psychology* have been an outgrowth of this. But new methods of storing and retrieving information are beginning to solve this communication problem. New devices, new uses for old devices like the Rorschach and the TAT, and new methods are permitting the possibility of more precise designs.

At this point, I would also express concern with our tendency to have "faith" in computers. We need to work out some system for spot checking each computer program and its results. At Boston College, six students were held up on their dissertations for six months after we found errors in a computer's work. Had we not discovered the errors, they would have been faced with a dissertation which could be hung around their neck like a halter four or five years from now.

Another attenuation of research results because the interests of researchers have been varied and limited in the area of longitudinal research. Many of us have been reluctant or unable to undertake longitudinal research. We do not have the facilities, the vision, or the time. As a result, we are often unaware of counseling effects that have occurred. To illustrate: a client had prepared to be a math teacher; however, student teaching was a traumatic experience for this client. Instead of teaching, he came back to college and did a master's degree in mathematics. After that, he stayed on campus working at various low salaried, low skilled jobs. At one point in counseling, I was so discouraged at his lack of progress that I said, "I'll give you two more interviews. If you don't make any more progress than you're making right now, forget it." A year later, I got a Christmas card from this client saying, "I have been working as a math teacher for four months." I received another Christmas card this year with the same address, and the message, "still teaching." I would never have believed it if the client had not verified it. This is the factor that inhibits or diffuses accuracy of research results—results that you *do not know about*, whether it is from interview to interview, or over a period of five to ten years with these clients.

Cognitive Flexibility

Let us turn to the paper's second part, which focuses on cognitive flexibility. Use of these projectives overcomes the major difficulty of most of the structured inventories. Years ago I got interested in differentiating between the attitudes of counselors and those of teachers. With W. W. Lewis, Jr. and a number of other graduate students, we worked out an *Experimental Attitude Scale*. We were able to differentiate between the responses of counselors and

teachers to this inventory with the exception of two questions. The two questions were:

- (1) Are these differences between counselors and teachers something that the counselors brought to their training, acquired during training, or acquired in a job afterwards?
- (2) Is the person saying what he has learned to say in his preparation, or is there a real difference between behavior of counselors and teachers?

To the first question I believe the answer is all three mentioned in number one, predisposition, training, and experience. The second point is one which I think is more pertinent to structured inventories. You never know whether a person is saying what he has learned to say, whether this is a real change in behavior, or a real difference in behavior between counselors and teachers. I would like to see this kind of an instrument used along with the Rorschach and TAT to see whether in combination they can give us more information than any of those mentioned when used by themselves.

Another concern about the use of the Rorschach and the TAT is the question of the effectiveness of these projectives with many researchers on many types of clients across the country in institutional settings using different counseling styles or orientation. It is interesting and impressive that this same variable has emerged from three different studies. But they are three different studies done in one institution. This is not a criticism, it is just an indication of the limited nature of the findings at this point. Would the results vary with the purposes of counseling? Would they vary with counseling styles? Would they vary in psychotherapy? Would they vary with counselors at different levels of preparation and experience?

Another question is the nature of the dimension described as cognitive flexibility. In cognitive flexibility we are describing something that has many elements at a very low level of awareness, and may be as much *affective* as cognitive. The more limited effectiveness of the neophyte is not solely a function of cognitive elements in behavior. It may be personal adjustment. It may be simply lack of comfort in a new situation. I do not think awareness and sensitivity to others is purely a cognitive element. I am wondering if it might be more useful to call this "perceptive-reactive" flexibility. In terms of how this functions, it is a matter of many perceptions.

Emotions as well as the intellect are involved in functioning in a classroom or in an interview. Again, I want to underline that this is present in counselors in varying degrees at various levels or varying levels of their development (some never attain it). These last are the people we advise into evaluation and measurement. Of central importance is the degree to which flexibility can be learned or developed. And what about flexibility in connection with Blocher's paper on the selection of clients? Would it be less necessary to select clients if

the counselor becomes more flexible in perceptions and in treatment? Are there only negative factors which eliminate persons from counseling, such as the academic hurdles which were mentioned by Mosher? Or is the implication that there may be an inability on the part of some counselors to relate to some clients? Are we dealing with skills that do not require the level of education recommended for most counselors? Are these different kinds of skills? What can we learn from the people who work in the Employment Service or for the Office of Economic Opportunity? They are on the streets doing counseling-related activity without a Masters, a Specialist or a Doctoral degree.

Do all clients need the same sort of counseling? Perhaps as Blocher inferred, some people need non-directive counseling, and some people, whether they need it not, can accept and work with a fairly authoritarian person. We should be a focus for our research. As was implied previously, some clients may function better with male counselors than with females. Is the "eclectic counselor" more flexible than either of these extremes, and therefore able to work with more kinds of clients?