Television psychologists: a survey of viewers' perceptions of television psychologists

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Television psychologists:  
A survey of viewers’ perceptions of television psychologists  

by  

Scott Alexander Kaplan  

A thesis submitted to the graduate faculty  
in partial fulfillment of the requirements for the degree of  

MASTER OF SCIENCE  

Major: Psychology  

Program of Study Committee:  
David Vogel, Major Professor  
Douglas Gentile, Major Professor  
Mindy Ji Song  

Iowa State University  
Ames, Iowa  
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This is to certify that the master’s thesis of

Scott Alexander Kaplan

has met the thesis requirements of Iowa State University

Signatures have been redacted for privacy
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ABSTRACT

Television portrayals of contemporary professional roles may be contributing to a misinformed, unfavorable public perception of the mental health care services and the professionals in the field. The present study examined the relationship between exposure to television programs depicting psychologists and mental health care services, and the association between those images and public perceptions of psychologists. Path analytic results indicated that exposure to television shows known to portray mental health professionals significantly predicted viewer perceptions of psychologists. Furthermore, exposure to soap operas predicted viewer perceptions of psychologists’ personal attributes and attitudes towards seeking mental health services to a stronger degree than any other type of programming.
INTRODUCTION

Historically, there has been considerable interest in determining the degree to which television informs the public about health related issues and its influence on a person’s construction of reality (Potter & Chang, 1990). There are serious implications associated with the accuracy of health-related television messages, most notably when people are using television as their only form of information. Prevention techniques for AIDS (condoms, HIV testing, clean needle programs), treatments for Cancer (lumpectomies and mastectomies), education of STDs and many mental illnesses such as gambling addiction are still relatively unknown or misunderstood in the mainstream public (Nelkin, 1996). As a result, an important question for the health care profession must be raised; “Where are people getting their information about mental health related services?”

Recently, a survey by the National Health Council revealed that around the turn of the twentieth century, more people turned to television as their primary source of medical/health information (40%) than to physicians (36%; Chory-Assad & Tamborini, 2003). Seventy-six percent of the respondents reported having taken advice offered in a news story they heard or read (Chory-Assad & Tamborini, 2003). Overall, respondents cited television news magazines as the most credible source of health news (Chory-Assad & Tamborini, 2003). Although there are differences between health care provided by physicians and health care provided by psychologists, in both cases, people are turning to professionals to help them manage issues related to health. Not surprisingly, according to a study from Australian and New Zealand Journal of Psychiatry, the media have been shown to be the public’s most important source of information about mental illness (Borinstein, 1992), and these sources are generally very negative and inaccurate (Philo, 1994).
Television has the ability to reach mass quantities of viewers in a quick amount of time. Its influence is transmitted more efficiently than word of mouth, flyers, brochures, and most other information outlets. However, there is a paucity of research examining the frequency, accuracy, and degree of influence offered about psychology and mental health content on television. The present study addresses this problem by measuring the association between television exposure to shows known to portray psychologists and viewer perceptions of psychologists. We measured the extent to which the relation between television exposure and viewer perceptions predicts an individual's willingness to seek mental health services. We also examined the perceived accuracy of psychologist portrayals. Finally, we investigated how exposure to different programming types (i.e., soap opera, talk show, situational comedy, and drama) contributes to viewer perceptions of psychologist attributes.

The Influence of Television on Constructions of Reality

It has long been established and is generally agreed upon in media literature that television can have a significant influence over a person's social construction of reality (Potter, 1993). Within mass media studies, the theory was initially called the cultivation hypothesis (Potter & Chang, 1990). The cultivation hypothesis was developed by George Gerbner in 1969 and it predicts a positive relation between amount of television exposure and evidence of norms, values, conceptions of reality, attitudes, thoughts, and beliefs. Cultivation effects are any changes in beliefs, attitudes, and values that are associated with exposure to images and messages from the mass media. It posits that more frequent viewers of television will be more likely to believe the real world is similar to how it is portrayed on television than less frequent viewers.
Numerous studies have shown that frequent viewers of television are more likely to perceive the real world as it appears on television (Potter, 1993). The cultivation hypothesis has been specifically tested in a range of television contexts with a variety of samples. A majority of these studies have corroborated the theory. These studies have shown cultivation effects in relation to racism (e.g., Gerbner, Gross, Morgan, & Signorielli, 1982; Morgan, 1986), alienation (e.g., Morgan), gender stereotypes (Gross & Jeffries-Fox, 1978), anti-social behavior (Greenberg, 1980; Potter & Ware, 1987), marriage (Segrin & Nabi, 2002), physicians (Chory-Assad & Tamborini, 2001; Pfau, Mullen, & Garrow, 1995), and attorneys (Pfau, Mullen, Diedrich, & Garrow, 1995). Specifically, exposure to television's recurrent patterns of images shapes viewer perceptions of reality towards these issues and groups.

Of particular interest for the present study is research that has examined characters in professional roles on television. For instance, Pfau, Mullen, and Garrow (1995) showed that viewing physicians’ positive depictions on a prime time fictional series where physicians were featured as main characters was generally associated with positive overall perceptions of doctors. This is consistent with how physicians have been portrayed historically (Gerbner, Gross, Morgan, & Signorielli, 1981). However, upon closer inspection, Pfau, Mullen, and Garrow revealed that viewing more fictional prime-time medical programs was associated with lower specific perceptions of physicians’ ethical character. Chory-Assad and Tamborini (2001) replicated the Pfau, Mullen, and Garrow study and found that exposure to television's portrayals of physicians was found to shape viewer perceptions and expectations about doctors and the health care system.

According to Pfau, Mullen, and Garrow (1995), Pfau, Mullen, Diedrich, and Garrow (1995), and Chory-Assad and Tamborini (2001), recent portrayals of physicians and
attorneys on television have been increasingly inaccurate and more negative. For example, a study by Chory-Assad and Tamborini (2001) found that contemporary prime-time television fictional series, as compared to the 1992 television series originally investigated by Pfau, Mullen, and Garrow portray physicians as being less competent and less physically attractive, having less regard for others, less interpersonal style, less power, and being lower in ethical character. As mentioned previously, this has been a change from the positive portrayals of physicians in the past (Gerbner et al., 1981). In light of the National Health Council’s 1998 findings that people receive 40% of their health care related information from television, these findings are alarming. One must reasonably consider the consequences of such portrayals. Frequently inaccurate or constantly changing messages being sent to viewers could have detrimental implications on viewer perceptions of the medical field and willingness to seek medical help, just like negative portrayals have negatively affected perceptions of other occupation groups and professional roles (Gerbner et al., 1981; Pfau, Mullen, Diedrich, & Garrow, 1995).

Absent from the previous list of populations sampled are psychologists and issues surrounding mental health care. In the context of counseling experiences, cultivation theory suggests that in portraying satirical, idealized, or exaggerated images of psychologists, the media may be cultivating unrealistic beliefs about what the counseling experience should be like (Gerbner, 1969). For example, a potential client who perceives psychologists as “omniscient” on television might decide to see one assuming that the psychologist will undoubtedly solve all their problems. When they enter counseling and realize that problems often do not go away immediately, they may feel let down by the psychologist and possibly the field as a whole. These expectations may result in a lack of trust, willingness, obedience,
compliance, satisfaction, and ultimately the success of the counseling process. Alternatively, a negative television portrayal could preclude an individual from seeking professional mental health services altogether. The exposure to negative television portrayals could lead to the individual to perceive psychologists as unethical, incompetent, unpleasant, cold, or indecisive, adding to feelings of helplessness, isolation, or frustration with the mental health care field.

Misperceptions influenced by negative or inaccurate portrayals may stigmatize the pursuit of professional help and lower viewers' help-seeking attitudes. The negative perceptions of psychologists' attributes may then lead to increased anxiety about seeking help and predispose the recipient to reject it (Johannsen, 1969). Thus, negative television portrayals may lead to negative perceptions of psychologists' attributes which in turn lead to the increased stigma attached to seeking or receiving professional mental health services and decreased attitudes towards the services which can impede actual willingness to seek help (Byrne, 1997; Corrigan & Penn, 1999; Crisp, Gelde, Rix, Meltzer, & Rowlands, 2000; Smith, 2002; Socall & Holtgraves, 1992; Wahl & Lefkowits, 1989).

It is imperative that research address the potential disconnect between television images of psychologists and reality. Despite the media serving as the public's most important source of information about mental illness (Borinstein, 1992), few published studies in recent times have analyzed television psychologists, the therapeutic process, or examined cultivation effects influenced by television psychologists. In order to examine the messages being conveyed on television, there is a need to analyze the productions themselves and viewer perceptions. The present study takes a first step by examining the influence of
television viewing on perceptions of psychologists, attitudes towards help seeking behaviors, and intent to seek psychological services.

Issues in Examining the Cultivation Hypothesis and Help-Seeking

As stated earlier, the cultivation hypothesis posits that more frequent viewers of television will be more likely to believe the real world is similar to how it is portrayed on television than less frequent viewers. Television has the potential to become a vital source of secondary socialization. The Cultural Indicator Theory was popularized by George Gerbner in 1969 with his article entitled “Towards Cultural Indicators: The Analysis of Mass Mediated Public Message Systems.” Cultivation theorists distinguish between ‘first order’ effects (general beliefs about the everyday world, such as about the effectiveness of therapy) and ‘second order’ effects (specific attitudes, such as towards therapists in general).

One assumption grounded in this cultivation theory is that television is a world of uniform messages, where it does not matter what a person watches, only how much they watch (Potter, 1993). As a result, researchers have often used ‘total amount of television exposure’ to operationalize television exposure when testing the cultivation hypothesis. Researchers then use that measure to examine the relationship between television exposure and viewer perceptions of reality. This assumption, however, does not allow for differences across shows, genres, or individual viewers. It also leaves out any other moderating variables that could potentially interact with total television exposure.

A second assumption of this theory is that viewing is non-selective. Gerbner, Gross, Signorielli, Morgan, and Jackson-Beeck (1979) state: “television audiences (unlike those for other media) view largely nonselectively and by the clock rather than by the program. Television viewing is ritual, almost like religion, except that it is attended to more regularly”
(p. 180). Gerbner et al. also state, that "except for rare and freakish viewing patterns, those who watch three or more hours of prime time (television) see much of the same mix of basic dramatic ingredients, whether they say they prefer comedy, crime or news" (p. 180). These two assumptions presume that the world presented on television is relatively uniform across programs and time, and that some portrayals are repeated so often and across so many channels that viewers will start to believe they accurately represent the real world.

Whereas these assumptions may have fit the theory well decades ago when television programming was more limited, times are changing. Cable television has revolutionized the way that people watch television today (Potter, 1993). Due to advances in cable programming, there is an increase in program diversity, number of shows broadcasted, and channels offered. Moreover, people now use VCRs and modern day inventions such as Tivo to intentionally select what shows to watch. It seems unlikely that the only important difference among viewers is how much total time they spend watching all television shows, where messages are uniform and viewed non-selectively.

Recent research on specific content viewing suggests that total television exposure is not as strong a predictor of individuals' beliefs about real life as is exposure to specific program types (Hawkins & Pingree, 1981; Potter 1993; Potter & Chang, 1990; Segrin & Nabi, 2002). Potter and Chang (1990) conducted a study to assess whether total television exposure or program type dominance best operationalizes television exposure. Program type dominance is defined by dividing the amount of hours spent watching a specific genre of television programming by the total hours of viewing television. If all programs displayed the same uniform message and type of programming did not matter, then genre-specific television exposure measures such as program type dominance would not be any better at
predicting cultivation than total exposure. This was not the case however. Results revealed program type dominance as a better predictor of cultivation effects (Potter & Chang).

Furthermore, an examination of the occupational characters of specific genres of programming suggests that perceptions of psychologists may be differentially influenced by certain genres. For example, the soap opera genre is a fictional television genre that tends to feature health topics and health care professionals quite often (Cassata, Skill, & Boadu, 1979; Gerbner et al., 1981; Katzman, 1972; Rondina, Cassata, & Skill, 1983; Turow & Coe, 1985). In addition, soap opera viewing has been associated with health-related perceptions, such as the show General Hospital (Snyder & Rouse, 1995). Soap operas have a tradition of depicting doctors as sexier, more stylish, and more attractive than all other genres portraying doctors (Chory-Assad & Tamborini, 2001). Since they employ hired actors and actresses for those roles, they become more sexualized and plots often have those professional characters taking part in unethical behavior for entertainment value. Given the sensationalized aspects of soap opera programming, this genre is of particular interest for the present study.

The genre-specific measure of exposure also has limitations, however. Although it was a better predictor of cultivation than a global measure of exposure, it is still relatively weak (Potter, 1993). People who are selective in their viewing may differ in reasons behind their viewing selections. It may not be a genre division, but rather a show division, or loyalty to certain actors and actresses. As a result, our research expanded on the two methods receiving the most empirical attention, uniform television exposure and program type dominance. We examined three methods of measuring program type dominance and two methods of measuring uniform television exposure to see which method or methods are significantly associated with the perceptions of psychologists’ attributes (i.e., cultivation
effects). The three separate methods measuring program type dominance are mean genre exposure, genre-specific frequency ratios, and genre-specific time ratios. The two separate methods measuring uniform television exposure are total weekly hours of television exposure and totals shows exposure (of shows sampled in the present study).

We expanded program type dominance to include three independent methods aimed at comparing predictive capabilities based on differences in how they are unitized. A genre-specific ratio unitized by hours is more specific and consistent with units in the traditional total weekly hours method, whereas a genre-specific ratio unitized by mean frequencies is more global, nominal, and robust. Mean exposure was added to the study as an alternative statistical method to measure genre-specific frequency ratios. We simply took the mean frequency from each show in a given genre rather than the sum of show frequencies in the frequency ratio method. Due to the lack of modern empirical support for uniform television exposure as it is traditionally measured and the changing patterns of television viewing, we expect one of the program type dominance methods to operationalize contemporary viewing habits more accurately.

Another consideration in examining the degree of influence that television has on the viewers' construction of reality is the interaction it may have with an individuals' previous experience with the respective professional role they are viewing on television. It is likely that direct or indirect experience interacts with the portrayal of an occupational role on television to help construct viewer perceptions of reality. In a study by Chory-Assad and Tamborini (2003), direct and indirect experience with physicians was found to be the strongest predictor of perceptions of physicians; stronger than media influences. The present study integrated these findings and utilized experience as an independent variable,
operationalized as “counseling familiarity”. High awareness included having seen a psychologist directly or indirectly hearing about the counseling process through family or friends. Low awareness included having taken a college level psychology course or having no experience with psychology or counseling at all.

Current Study

The current climate surrounding medical and mental health care, physicians and psychologists, the public’s increased dependence on television for health information, and television’s influence on the health related perceptions of this public (Nelkin, 1996) together warrant examining the relation between television viewing and perceptions of psychologists. However, a literature review found no published research examining the media’s influence on willingness to seek professional help to date. Therefore, the present study measured the strength of the relation between exposure to types of television programming and viewer perception of psychologists, and in turn measured the extent to which that relation between television exposure and psychologist perceptions predicts an individual’s willingness to seek mental health services.

Hypotheses

H1: The frequency of exposure to television shows known to portray psychologists, as measured by program type dominance methods, will be significantly associated with perceptions of psychologists’ attributes and subsequent help-seeking attitudes and intentions (i.e., evidence for the cultivation effects of the media).

H2: Television exposure will significantly predict individuals’ willingness to seek professional mental health services through perceived attributes of psychologists and participants’ attitude towards professional mental health services. Thus, cultivation effects
will have both direct and indirect effects on an individuals' willingness to seek help (see Figure 1).

H3: Furthermore, since soap operas specifically feature health topics and health care professionals, we expect that more frequent viewing of soap operas compared to comedy, talk show, and drama programming will have a significantly stronger association with perceptions of psychologists’ attributes and subsequent help-seeking attitudes and intentions. 

H4: We also expect that those viewers who have low counseling familiarity will have significantly stronger cultivation effects due to television exposure than compared to viewers with high counseling familiarity.
METHODS

Participants

Participants were 136 individuals living in Iowa, of which 124 provided demographic information of gender, age, and race/ethnicity. Data for gender are as follows: 59% female and 41% male [the state population is 51% female and 49% male]. Data for age are as follows: 14.5% of the participants were between the ages of 18-29, 13% were between the ages of 30-39, 17% were between the ages of 40-49, 19% were between the ages of 50-59, 20% were between the ages of 60-69, and 16% were 70 or older. Data for race/ethnicity are as follows: 92% White/Caucasian, 5% Black or African American, 2% Hispanic-Latino, and 2% Multi-racial [the state population is 94% White/Caucasian, 2.2% Black or African American, 4% Hispanic-Latino, 1% Multi-racial] (U.S. Census Bureau, 2004).

Procedures

To obtain a power of .8 or higher, a power analysis was performed using an estimated effect size of .2 and an alpha of .05. From “G Power,” an online power calculator, we found 199 participants were needed to obtain a power of .8. . To reach this number of participants, phone numbers were randomly identified from an online 2004-2005 phone directory of the residents in the state of Iowa. The residential directory was found through the Ames Public Library website (www.amespublic.library.org). From November 15, 2004 to May 31, 2005, a telephone survey was conducted in which 252 individuals were contacted and 136 of these individuals agreed to participate in the study (a 54% response rate). Of these, 12 interviews were incomplete due to sporadic participant attrition, therefore data analyses varied in their sample size.
Two undergraduate team members and the principal investigator conducted the phone interviews. Interviewers received approximately four hours of training. They partook in live practice calls to non-participants and were given written instructions on how to proceed with the interview. Interviewers were instructed to say, “Hi (participant name), I’m calling from Iowa State University as part of a research study. This call is not intended to sell you anything at all. If you have a brief moment, I would like to ask you some questions about the study.” Only respondents who were 18 or older at the time of phone call were interviewed. No participants were dropped because of this selection guideline. Interviewers gathered relevant participant demographic information, programming preferences and viewing habits, perceptions of psychologist demographics in terms of gender, age, socio-economic status, and ethnicity, and perceptions of psychologist personal and professional attributes. Participants were also asked for their opinion regarding how psychologists are portrayed on television. Additionally, they were asked about their personal familiarity with the counseling process and the field of psychology.

Measures

Perceptions of Psychologists Personal and Professional Attributes

Perceptions of psychologists’ personal and professional attributes were assessed using the coding scheme employed in Pfau, Mullen, and Garrow’s (1995) content analysis study. According to Pfau, Mullen, and Garrow personal and professional attributes were conceptually derived from past surveys of the public perceptions of physicians, past studies of perceptions of personality traits of professional roles in prime-time television, and general research on personality (Pfau, Mullen, & Garrow). The measure was derived from a principle components factor analysis. Results yielded six factors that accounted for 66% of
total variance. There were 24 items in the factor structure. The six factors were Competence, Ethical Character, Regard for Others, Physical Attractiveness, Interpersonal Style, and Power. The six factors are coded on a Likert scale from one to seven, with one being the lowest rating and seven being the highest. The individual items that make up each scale are as follows: Competence: unqualified/qualified, unintelligent/intelligent, and incompetent/competent; Ethical Character: selfish/unselfish, bad/good, dishonest/honest, immoral/moral, wrong/right, and improper/proper; Regard for Others: uncaring/caring, cold/warm, and unfriendly/friendly; Physical Attractiveness: unattractive/attractive, plain/stylish, and unsexy/sexy; Interpersonal Style: irritable/good-natured, gloomy/cheerful, unpleasant/pleasant, nervous/poised, tense/relaxed, and anxious/calm; and Power: poor/wealthy, low/high status, and weak/strong.

The six factors were evaluated for internal reliability with Cronbach’s coefficient alpha (Cronbach, 1951). The alpha reliability ratings of the factors in Pfau, Mullen, and Garrow’s (1995) study were: Competence, .87; Ethical Character, .85; Regard for Others, .88; Physical Attractiveness, .83; Interpersonal Style, .87; and Power, .69 (Pfau, Mullen, & Garrow). No validity coefficients were provided.

We dropped the bad/good item and right/wrong item from Ethical Character because they were too vague and broad. We did not use the Power scale because it consisted of the item (weak/strong), which our research team believed would elicit confusion and questions from phone survey participants. In an attempt to clarify the trait, we first changed the item to physically strong/physically weak and also considered mentally strong/mentally weak. Physically strong/physically weak resulted in an unacceptable internal consistency reliability rating of .15. Mentally strong/mentally weak was rendered vague and became a separate
item labeled strong-minded/weak-minded to be included in a newly added Decision-Making Skills scale.

Ultimately, we added three items to those from Pfau, Mullen, and Garrow's 1995 study, intended to capture the uniqueness of mental health providers and the mental health care field. Strong-minded/weak-minded became one of three items which constituted our Decision Making Skills scale. The Decision Making Skills scale included new items of indecisive/indecisive, weak-minded/strong-minded, and confident/diffident. Finally, we did not use the Interpersonal Style scale as did Pfau, Mullen, and Garrow. We believed gloomy/cheerful and unpleasant/pleasant were conceptually similar, and that nervous/poised, tense/relaxed, and anxious/calm were conceptually similar. As a result, we split them into two separate scales. Without the interpersonal style split, internal consistency was .63, which we believed could be improved. Reliability ratings for unpleasant/pleasant and gloomy/cheerful were acceptable (.72) and became its' own scale. Reliability ratings for a scale including nervous/poised, tense/relaxed, and anxious/calm was found to be unacceptably low (.49). Irritable/good-natured was believed to be too vague for participants in the phone survey, therefore this item was dropped. Internal consistencies for attribute scales in the current sample were: Competence, .76; Ethical Character, .68; Regard for Others, .80; Physical Attractiveness, .71; Pleasant and Cheerful, .72; and Decision-Making Skills, .69.

In the present study, respondents were asked to rate real-life psychologists using a four-point semantic differential scale. We used a four-point scale instead of a seven-point scale because we believed that in a phone survey it would be difficult for participants to remember each of the seven ratings offered by the interviewer. Ratings were labeled (1) very
[personality characteristic], (2) rather [personality characteristic], (3) rather [opposite of the personality characteristic], and (4) very [opposite of the personality characteristic]. For example, for the characteristic of selfishness ratings would be (1) very selfish, (2) rather selfish, (3) rather unselfish, or (4) very unselfish.

Television Exposure

To measure television viewing habits, total television exposure and specific television programming preferences were assessed. Respondents were asked to indicate the number of hours watched during weekdays and weekends, ranging from 6am to noon, noon to 6pm, 6pm to midnight, and midnight to 6am (Gentile & Walsh, 2002; Shrum, Wyer, & O’Guinn, 1998). These data were added up to create an “average TV viewing hours/week” variable.

Next, they were provided a list of 12 shows known to occasionally portray psychologists and asked how often they watch those shows. The list of shows known to occasionally portray psychologists was derived via recommendations from the APA division 46 Media Psychology listserv in addition to the research teams’ previous knowledge. Program types were divided into four genres including fictional drama, talk shows, situational comedies, and soap operas. Each genre consisted of three shows. The genre and list of shows fitting the label are as follows: fictional drama (Sopranos, CSI: Miami, Law and Order: SVU), talk shows (Dr. Phil, Oprah, Montel Williams), situational comedies (Mad About You, Frasier, Growing Pains), and soap operas (Passions, Young and the Restless, and Bold and the Beautiful). With the exception of Sopranos (HBO), Growing Pains (ABC Family), and Mad About You (Lifetime), all programs air on basic television. No movies, sports, reality-based television shows, special presentations, news, or game shows were included in the sample. Seven of the 12 shows were one hour in length.
The frequency of watching was charted according to eight categories which included: every day, almost every day, about two to three times a week, about once a week, a couple times a month, about once a month, I almost never watch this show, and I never watch this show. These categories were then assigned numbers from one to eight with eight being the most frequent ("every day") and one being the least frequent ("I never watch this show"). These numbers were assigned in order to transform qualitative frequencies into quantitative values used for statistical purposes. We created frequency ratios for each genre of programming by dividing the sum of frequencies for each three shows within a specific genre by the sum of frequencies for all twelve shows in the sample.

Recent research on specific content viewing suggests total television exposure is not as strong a predictor of individuals’ beliefs about real life as is exposure to specific program types (Hawkins & Pingree, 1981; Potter 1993; Potter & Chang, 1990; Segrin & Nabi, 2002). Overall, the five methods of measuring television exposure were: genre-specific time ratio (with hours as units), genre-specific frequency ratio (nominal units), mean genre exposure (nominal units), total shows exposure (nominal units), and total weekly hours (with hours as units).

In the present study, total weekly hours was measured by taking the sum of weekday and weekend hours provided by each respondent. This was our first uniform television exposure method. Since there were not survey items asking for genre-specific hours viewed per week, individual show frequencies were summed instead. The frequencies were measured in nominal units such as “once a week” or “almost never”. There were eight nominal units. Each was assigned a number (one through eight). These artificial numbers were summed to create a total frequency for each of the four genres. Next, those genre
frequency sums (of assigned numbers) were summed to create a total frequency sum for all twelve shows in the sample. This is how we operationalized total shows exposure, which was our second uniform television exposure method.

Program type dominance methods were measured by dividing the amount of hours spent watching a specific genre of television programming by the total number of hours a week exposed to non-specific television programming. Again, there were not survey items asking for genre-specific hours viewed per week, therefore individual show frequencies were summed. Each genre frequency sum was divided by the total frequency sum for all twelve shows to give us a genre-specific frequency ratio. This ratio was then multiplied by total hours of television viewed in a week to create a genre-specific time ratio, which was unitized by hours. Mean genre exposure was measured by taking the mean of each genre frequency sum and dividing that by the mean of the total frequency for all twelve shows. It is similar in concept, but statistically different than the frequency ratio method.

Attitudes Towards Seeking Professional Help

Attitudes toward seeking professional help were measured with the Attitudes Toward Seeking Professional Psychological Help Scale (ATSPPHS, Fischer & Farina, 1995). This is a shortened 10-item revision of the original 29-item measure (ATSPPHS, Fischer & Turner, 1970), consisting of items such as "If I believed I was having a mental breakdown, my first inclination would be to get professional attention." Items are rated from (1) disagree to (4) agree with five items reversed scored so that higher scores reflect more positive attitudes. The revised and original scales are strongly correlated ($r = .87$) suggesting that they are tapping similar constructs (Fischer & Farina, 1995). Given the similarity between versions of the ATSPPHS, the revised version was used in the present study to reduce respondent
burden. The revised scale correlates with previous use of professional help for a problem ($r = .39$), and the one-month test-retest ($r = .80$) and the internal consistency ($r = .84$) reliabilities have been found to be adequate. For the current study, the internal consistency of the measure was .83. Fischer and Farina have successfully used the measure to differentiate between college students with serious emotional or personal problems who did seek counseling and those with comparable problems who did not. Vogel and Wester (2003) showed that the scale has a positive association with intentions to seek counseling for psychological and interpersonal concerns ($r = .56$), and correlates negatively with public stigmas ($r = -.31$).

**Demographics and Familiarity with Counseling**

Factors such as demographic characteristics and direct experience with the given topic are likely to produce variations in cultivation patterns (Gerbner, Gross, Morgan, & Signorielli, 1994; Potter, 1993). These factors were assessed and included in the data analysis. The demographic characteristics included participant age, sex, and ethnicity, which have been shown to be associated with health-related outcomes and knowledge (Freimuth, 1990). Participants were also asked if they had “taken a college level psych course”; “talked with close friends or family”; “seen a psychologist”; or “were familiar with the counseling process or with psychologists.”
RESULTS

Descriptive Statistics

*Television Exposure*

Participants’ total weekly viewing across genres ranged from 0 to 36 hours, with participants’ mean number of total viewing hours at 9.57 hours per week. Table 1 presents descriptive statistics on the amount and type of television viewing.

*Perceptions of Psychologists’ Personal and Professional Attributes*

Participants perceived psychologists rather positively in terms of the majority of the personal and professional attributes. The means and standard deviations of these ratings can be viewed in Table 2. All results from paired sample t-tests of personal and professional attributes consisted of p-values at or below the .05 level. Physical appearance, had the lowest mean rating (M = 2.36, SD = .57) and was significantly lower than all other attributes. Competence, had the highest mean rating (M = 3.29, SD = .50) and was significantly higher than all other attributes.

Participants’ perceptions of practicing psychologists’ age and gender did not match the counterpart state demographic data. In terms of age, the breakdown of percentages for licensed Iowan psychologists is displayed next to participants’ perceptions in Table 3. In terms of sex, the breakdown of percentages of licensed Iowan psychologists is displayed next to participants’ perceptions in Table 4. Perceptions of race and ethnicity matched the demographic data for practicing psychologists in Iowa rather well. The only considerable discrepancy existed in the percentage of participants who believed most practicing psychologists were white. Participants’ perceptions of practicing psychologists’ demographic ethnicity as well as actual percentages from demographic data are displayed in Table 5.
Additional questions pertaining to how realistic the psychologists on television are portrayed, how positively they are portrayed, and how helpful they are portrayed was also examined. Psychologists were believed to be portrayed in relatively mixed in terms of how realistic/unrealistic, positive/negative, and helpful/hurtful they are portrayed on television. The frequency statistics for portrayal ratings can be seen in Table 6.

*Background Characteristics*

In responding to the question assessing familiarity with the counseling process and with psychologists, approximately 43% of the participants reported taking a college level psych course, 54% reported having talked with close friends or family about their experiences with psychologists, 19% admitted having seen a psychologist personally, and 76% declared themselves familiar with the counseling process or with psychologists.

Direct and indirect experience constituted the high counseling familiarity group. Participants who have taken a college course or reported having no familiarity with the counseling process constituted the low counseling familiarity group. With 95% confidence, our results indicate that there is a statistically significant mean difference between those with high counseling familiarity and those who have low counseling familiarity when comparing mean attitudes towards seeking professional mental health services. The low counseling familiarity group mean was 25.35, which was lower than the high counseling familiarity group mean of 30.55. The between-group mean difference of -5.2 fell within the range of the 95% confidence interval [-7.37, -3.02].

*Cultivation Effects*

Hypothesis 1 stated that the frequency of viewing of television shows known to portray psychologists, as measured by program type dominance methods, would be
associated with perceptions of psychologists' personal and professional attributes and subsequent help-seeking attitudes and intentions (i.e., evidence for the cultivation effects of the media). Each of the three program type dominance methods revealed significant associations between television exposure variables and cultivation effects, with p-values at or below the .05 level. Total shows exposure also revealed significant associations between television exposure and personal attributes, with p-values at or below the .05 level. Total weekly hours did not result in any associations with cultivation effects.

Specific television exposure correlates are as follows: drama exposure correlated with decision making skills ($r = .23, p < .05$); soap opera exposure correlated with physical appearance ($r = -.21, p < .05$), pleasant/cheerful ($r = -.28, p < .01$), competence ($-.24, p < .01$), and attitude towards seeking professional mental health services ($r = -.19, p < .05$); total shows exposure correlated with decision making skills ($r = .21, p < .05$).

Hypothesis two asserted that television exposure will significantly predict individuals' willingness to seek professional mental health services through perceived attributes of psychologists and participants' attitude towards professional mental health services. Television exposure was measured with five methods: genre-specific time ratio (see figure 1), genre-specific frequency ratio (see figure 2), mean genre exposure (see figure 3), total shows exposure (see figure 4), and total weekly hours (see figure 5).

Results show that the time ratio model (figure 1) accounted for 56% of the variance ($R^2 = .56, p < .001$). Within the model, exposure to soap opera programming predicted physical appearance ($\beta = -.21, p = .05$), competence ($\beta = -.35, p < .05$), and the pleasant/cheerful ($\beta = -.36, p < .05$) dimensions. Of those attributes, pleasant/cheerful positively predicted attitude towards seeking professional mental health services ($\beta = .20, p <$
.10). In addition, soap opera exposure negatively predicted attitude towards seeking professional mental health services ($\beta = -0.21, p < .05$). Attitude towards seeking professional mental health services in turn positively predicted willingness to seek help ($\beta = 0.72, p < .05$).

The frequency ratio model (figure 2) accounted for 55% of the variance ($R^2 = 0.55, p < .001$) and resulted in one statistically significant predictive relationship between television exposure and the pleasant/cheerful ($\beta = -0.21, p < .05$) dimension. Neither pleasant/cheerful, nor any perceived psychologist attributes were found to be predictive of attitudes towards seeking mental health services or willingness to seek help. However, soap opera exposure negatively predicted attitude towards seeking professional mental health services ($\beta = -0.20, p < .05$) and talk show exposure positively predicted willingness to seek help ($\beta = 0.18, p < .05$). Attitude towards seeking professional mental health services in turn positively predicted willingness to seek help ($\beta = 0.74, p < .05$).

The mean exposure model (figure 3) accounted for 55% of the variance ($R^2 = 0.55, p < .001$) and resulted in three statistically significant associations between television exposure and personal and professional attributes. Soap opera exposure negatively predicted physical appearance ($\beta = -0.23, p > .05$) and pleasant/cheerful ($\beta = -0.28, p < .05$). Drama exposure positively predicted decision making skills ($\beta = 0.20, p < .05$). Pleasant/cheerful positively predicted attitude towards seeking professional mental health services ($\beta = 0.26, p < .05$). Attitude towards seeking professional mental health services in turn positively predicted willingness to seek help ($\beta = 0.74, p < .05$).

In regards to the uniform television exposure models, total shows exposure (figure 4) was the only method of measurement that accounted for any variance. This model accounted 53% of the variance ($R^2 = 0.53, p < .001$) and resulted in two significant associations between
television exposure and cultivation effects. Total shows exposure positively predicted decision-making skills ($\beta = .20, p < .05$) and pleasant/cheerful ($\beta = -.18, p < .05$). In turn, pleasant/cheerful positively predicted attitude towards seeking professional mental health services ($\beta = .28, p < .05$). Attitude towards seeking professional mental health services in turn positively predicted willingness to seek help ($\beta = .74, p < .05$). The total weekly hours model (figure 5) accounted for 53% of the variance ($R^2 = .53, p < .001$). However, this model did not reveal any statistically significant associations with p-values at or below the .05 level.

Taken together, time ratio, mean exposure, frequency ratio models, and total shows exposure offer support for Hypothesis 3. Hypothesis 3 stated that specific genre of programming (soap operas) would result in stronger cultivation effects. Three of the five path models we ran path analyses for specifically examined different types of programming. These were frequency ratio, time ratio, and mean exposure. Soap opera exposure significantly correlated with physical appearance ($r = -.21, p < .05$), pleasant/cheerful ($r = -.28, p < .01$), competence ($r = -.24, p < .01$), and attitude towards seeking professional mental health services ($r = -.19, p < .05$).

Results revealed that soap opera programming was also the most predictive of all types of programming. Exposure to soap operas emerged as the strongest predictor of perceptions of psychologist attributes under each measurement model. Under the time ratio method, soap opera exposure significantly predicted dimensions of physical appearance ($\beta = -.21$), competence ($\beta = -.35$), and pleasant/cheerful ($\beta = -.36$) in a negative direction. Under the frequency ratio method, it significantly predicted the pleasant/cheerful dimension ($\beta = -.21$) in a negative direction. Under the mean exposure method, it significantly predicted with
the physical appearance ($\beta = -0.23$) and pleasant/cheerful ($\beta = -0.28$) dimensions in negative
directions. It should be noted that each association between exposure to the soap opera type
of programming and psychologists’ personal attributes resulted in a negative predictive
relationship. The only other type of programming to result in a statistically significant
relationship was drama programming. Under the mean exposure method, drama exposure
significantly predicted decision making skills in a positive direction ($\beta = 0.20$, $p < 0.05$).
Furthermore, two of the three models (frequency ratio and time ratio methods) revealed a
direct negative relationship between soap opera exposure and attitude towards professional
mental health services, with p-values at or below the 0.05 level.

Taking background information of the participant into consideration, hypothesis 4
examined the relationship between counseling familiarity and cultivation effects. Counseling
familiarity significantly correlated with attitudes towards seeking professional mental health
services ($r = 0.40$, $p < 0.01$). Under the category of counseling familiarity, “having talked with
friends or family” (indirect experience) positively predicted attitudes towards seeking
professional mental health services ($\beta = 0.32$, $p < 0.01$); “having seen a psychologist” (direct
experience) positively predicted attitudes towards seeking professional mental health services
($\beta = 0.27$, $p < 0.01$); and no counseling familiarity negatively predicted attitudes towards
seeking professional mental health services ($\beta = -0.29$, $p < 0.01$). Attitudes in turn positively
predicted willingness to seek help if needed ($\beta = 0.70$, $p < 0.01$).

In further exploratory analyses, we investigated whether the relationship between
television exposure and cultivation effects was influenced by counseling familiarity.
Essentially, we tested for any interaction between counseling familiarity and television
exposure. After splitting the data into separate path analysis models for high and low
awareness using the genre-specific time ratio method of measurement, a picture emerged where both high and low awareness showed significant associations with cultivation effects. Results suggested there was a difference between groups in cultivated perceptions of psychologists’ personal attributes and cultivated attitudes towards seeking professional mental health services.

The low awareness group had greater significant associations to attitudes towards seeking professional mental health services, which were statistically significant at the $p < .05$ level. No significant associations were found for the low awareness group with psychologists’ personal attributes. A positive predictive relationship did emerge between females with low counseling familiarity and attitudes towards seeking professional mental health services ($\beta = .41$). Moreover, low counseling familiarity viewers’ exposure to soap opera programming known to portray psychologists negatively predicted attitudes towards seeking professional mental health services ($\beta = -.38$). Exposure to comedy programming known to portray psychologists positively predicted attitudes towards seeking professional mental health services ($\beta = .44$).

The high awareness group had greater significant associations with psychologists’ personal and professional attributes, which were statistically significant at the $p < .05$ level. However, no significant associations were found for the high awareness group with attitudes towards mental health services. Specifically, for the high awareness viewers, exposure to soap opera programming known to portray psychologists negatively predicted physical appearance ($\beta = -.33$), competence ($\beta = -.46$), and pleasant/cheerful ($\beta = -.44$). These betas found under the genre-specific time ratio measurement method were consistently higher than betas found in models where counseling familiarity was not split into high and low groups.
Table 1

*Descriptive Statistics for the Television Viewing Measure*

<table>
<thead>
<tr>
<th>Genre</th>
<th>Mean</th>
<th>Standard Deviation</th>
<th>Min</th>
<th>Max</th>
</tr>
</thead>
<tbody>
<tr>
<td>Talk Show</td>
<td>2.49</td>
<td>1.52</td>
<td>1.00</td>
<td>7.33</td>
</tr>
<tr>
<td>Drama</td>
<td>2.25</td>
<td>1.31</td>
<td>1.00</td>
<td>6.00</td>
</tr>
<tr>
<td>Soap Opera</td>
<td>1.55</td>
<td>1.14</td>
<td>1.00</td>
<td>6.33</td>
</tr>
<tr>
<td>Comedy</td>
<td>1.36</td>
<td>.68</td>
<td>1.00</td>
<td>4.67</td>
</tr>
</tbody>
</table>

*Note.* Units for all table statistics are numbers (1-8) artificially assigned according to qualitative frequency labels provided on the survey. The frequency was charted according to eight categories that include: every day (8), almost every day (7), about two to three times a week (6), about once a week (5), a couple times a month (4), about once a month (3), I almost never watch this show (2), and I never watch this show (1).

^aN = 124.
Table 2

 Means and Standard Deviations for Perceptions of Psychologists' Personal Attributes

<table>
<thead>
<tr>
<th>Psychologist Characteristic</th>
<th>N</th>
<th>Mean</th>
<th>Standard deviation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Competence</td>
<td>127</td>
<td>3.29</td>
<td>.50</td>
</tr>
<tr>
<td>Decision Making Skills</td>
<td>125</td>
<td>3.20</td>
<td>.47</td>
</tr>
<tr>
<td>Ethical Character</td>
<td>129</td>
<td>3.01</td>
<td>.43</td>
</tr>
<tr>
<td>Regard For Others</td>
<td>127</td>
<td>2.99</td>
<td>.51</td>
</tr>
<tr>
<td>Pleasant and Cheerful</td>
<td>127</td>
<td>2.93</td>
<td>.55</td>
</tr>
<tr>
<td>Physical Appearance</td>
<td>127</td>
<td>2.36</td>
<td>.57</td>
</tr>
</tbody>
</table>

*Note. Participants were asked to rate real life psychologists using a 4-point semantic differential scale. Ratings were labeled “very negative (1), rather negative (2), rather positive (3), very positive (4)”.

*Different sample sizes due to incomplete surveys.
Table 3

*Participants' Perceptions of Practicing Psychologists' Age*

<table>
<thead>
<tr>
<th>Age</th>
<th>Perceived</th>
<th>Actual</th>
<th>Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>18-29</td>
<td>5.9</td>
<td>2.9</td>
<td>+2.9</td>
</tr>
<tr>
<td>30-39</td>
<td>30.4</td>
<td>13.0</td>
<td>+17.4</td>
</tr>
<tr>
<td>40-49</td>
<td>50.4</td>
<td>21.7</td>
<td>+28.7</td>
</tr>
<tr>
<td>50-59</td>
<td>11.1</td>
<td>47.8</td>
<td>-36.7</td>
</tr>
<tr>
<td>60-69</td>
<td>2.2</td>
<td>14.6</td>
<td>-12.4</td>
</tr>
<tr>
<td>Don't Know</td>
<td>.7</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Note. “Don’t Know” was not on the list of answers provided in the survey. The numerical values represent percentages of psychologists within each age group.

¹*N = 136. ²Values derived from the present sample of participants from Iowa households.

³Values derived from a sample of 176 licensed psychologists in Iowa. Sample obtained from the Iowa Board of Psychology Examiners (2004).
Table 4

*Participants' Perceptions of Practicing Psychologists' Sex*

<table>
<thead>
<tr>
<th>Sex</th>
<th>Perceived</th>
<th>Actual</th>
<th>Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>43.4</td>
<td>44</td>
<td>-0.6</td>
</tr>
<tr>
<td>Female</td>
<td>10.3</td>
<td>56</td>
<td>-45.7</td>
</tr>
<tr>
<td>Equally</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>represented</td>
<td>46.3</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*Note.* Numerical values represent percentages of psychologists within each age group.

*N = 136. Values derived from the present sample of participants from Iowa households.

Values derived from an online survey system used by the APA Practice Directorate (2003) sample of 241 licensed psychologists in the United States.
Table 5

*Participants’ Perceptions of Practicing Psychologists’ Race/Ethnicity*

<table>
<thead>
<tr>
<th>Race/Ethnicity</th>
<th>Perceived</th>
<th>Actual</th>
<th>Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Native American</td>
<td>2.2</td>
<td>1.5</td>
<td>+.7</td>
</tr>
<tr>
<td>Black/African American</td>
<td>1.5</td>
<td>1.5</td>
<td>0</td>
</tr>
<tr>
<td>Asian-Pacific Islander</td>
<td>2.2</td>
<td>1.3</td>
<td>+.9</td>
</tr>
<tr>
<td>White/Caucasian</td>
<td>77.6</td>
<td>94.5</td>
<td>-16.9</td>
</tr>
<tr>
<td>Multi-Racial</td>
<td>12.7</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hispanic/Latino</td>
<td>0.0</td>
<td>1.2</td>
<td>-1.2</td>
</tr>
<tr>
<td>Other</td>
<td>.7</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Don’t Know</td>
<td>3.0</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*Note.* “Don’t Know” was not on the list of answers provided. Actual percentages obtained from a sample of 176 licensed psychologists in Iowa.

\(^1N = 134.\) \(^2\)Values derived from the present sample of participants from Iowa households.

\(^3\)Values derived from a sample of 176 licensed psychologists in Iowa. Sample obtained from the Iowa Board of Psychology Examiners (2004).
Table 6

*Frequency Statistics of Participants’ Perceptions of Psychologists’ Television Portrayals*

<table>
<thead>
<tr>
<th>Portrayal</th>
<th>Percent</th>
<th>Portrayal</th>
<th>Percent</th>
<th>Portrayal</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Realistic</td>
<td>17.7</td>
<td>Positively</td>
<td>14.5</td>
<td>Helpful</td>
<td>21.8</td>
</tr>
<tr>
<td>Unrealistic</td>
<td>20.2</td>
<td>Negatively</td>
<td>16.9</td>
<td>Hurtful</td>
<td>4.0</td>
</tr>
<tr>
<td>Both</td>
<td>58.9</td>
<td>Mixed</td>
<td>65.3</td>
<td>Neither</td>
<td>1.6</td>
</tr>
<tr>
<td>Don’t Know</td>
<td>3.2</td>
<td>Both</td>
<td>3.2</td>
<td>Both</td>
<td>72.6</td>
</tr>
</tbody>
</table>

*Note.* Survey questions were 1) “Overall, do you think television portrays psychologists realistically, unrealistically, or both?” 2) “Overall, do you think television portrays psychologists positively, negatively, mixed, or both?” 3) “Overall, do you think television portrays psychologists as helpful, as hurtful, neither, or both helpful and hurtful?”

\(^1N = 124.\)
Table 7

*Predictive Nature of Direct and Indirect Experience on Attitudes Towards Seeking Professional Mental Health Services*

<table>
<thead>
<tr>
<th>Measurement Model</th>
<th>Direct</th>
<th>Indirect</th>
</tr>
</thead>
<tbody>
<tr>
<td>Genre-specific time ratio</td>
<td>.21*</td>
<td>.32*</td>
</tr>
<tr>
<td>Genre-specific frequency ratio</td>
<td>.20*</td>
<td>.32*</td>
</tr>
<tr>
<td>Mean exposure</td>
<td>.20*</td>
<td>.30*</td>
</tr>
<tr>
<td>Total weekly hours</td>
<td>.21*</td>
<td>.30*</td>
</tr>
<tr>
<td>Total shows exposure</td>
<td>.19*</td>
<td>.30*</td>
</tr>
</tbody>
</table>

*Note.* Values represent beta coefficients between direct or indirect experience with the counseling process and attitudes towards seeking professional mental health services.

*p < .05.*
Figure 1. Genre-Specific Time Ratio Model (Program Type Dominance Method)

Note. $N = 123$. *$p < .10$. **$p < .05$. 

Figure 2. Genre-Specific Frequency Ratio Model (Program Type Dominance Method)

Note. N = 123. *p < .10. **p < .05.
Figure 3. Mean Exposure Model (Program Type Dominance Method)

Note. $N = 123$. *$p < .10$. **$p < .05$. 

Figure 4. Total Shows Exposure Model (Uniform Television Exposure Method)

Note. N = 123. *p < .10. **p < .05.
Figure 5. Total Weekly Hours Model (Uniform Television Exposure Method)

Note. N = 123. *p < .10. **p < .05.
DISCUSSION

In line with previous research conducted by Pfau, Mullen, and Garrow (1995) and Chory-Assad and Tamborini (2001), the present study explored the possibility that television portrayals of contemporary professional roles may be contributing to a misinformed, unfavorable public perception of the mental health care services and the professionals in the field. Substituting mental health professionals in place of physicians, findings from the present study support such a claim. Our results indicate that more frequent exposure to television shows known to portray mental health professionals significantly predicts viewer perceptions of psychologists.

The present study examined the relationship between exposure to television programs depicting psychologists and mental health care services, and the association between those images and public perceptions. We were testing to see if viewers’ social construction of reality was influenced by what they viewed on television. Interestingly, participants perceive psychologists to be male more often than female, primarily in the 40-49 range, and predominantly white (78%), with the next closest specific race as a tie between Native-American and Asian (2%). Perceptions were predominantly inaccurate for age and gender, and there was an underestimate of the percentage of white psychologists for ethnicity/race. In reality, Iowa licensed psychologists are close to equally represented by gender, older than perceived, and more white than perceived.

Viewers also seem to believe they are receiving mixed messages about psychologists from the media, which is indicative of the very concern that incited this line of research. The majority of participants find psychologist portrayals to be both realistic and unrealistic, with a slight skew towards unrealistic portrayals. Television psychologists are found to be mixed
in terms of positive and negative portrayals, again with a slight skew towards negative portrayals when perceptions were not mixed. Finally, the majority of overall perceptions found psychologists to be simultaneously portrayed as helpful and hurtful, with a slight skew towards being helpful.

As revealed from data, about 22% of participants in our sample perceived psychologists as purely helpful and not hurtful. There is an interesting comparison to be made with data from recent outcome research, which suggests approximately 80% of clients benefit significantly from counseling or psychotherapy (Gabbard & Lazar, 1997; Lambart & Ogles, 2004). The discrepancy between statistics should tell us something about the differences between those who have counseling experience and the layperson. Those who are not familiar with the counseling process are left to rely on potentially inaccurate sources of information to make their perceptions. In terms of realism, being depicted in a positive or negative light, and helpfulness, it appears as though most viewers perceive psychologist portrayals as partly unrealistic, inaccurate, negative, and hurtful to others. There is another part of the perception where psychologists are depicted as realistic, accurate, helpful, and positive but the overall message was not one of accuracy or positivity.

Building on Pfau, Mullen, and Garrow’s (1995) study looking at specific cultivated perceptions of physicians’ attributes of character, interpersonal style, physical attractiveness, power, competence, and regard for others, the present study looked at similar attributes. Survey results of Iowa residents found reliability within six attributes of television psychologists including Competence, Ethical character, Regard for Others, Physical Attractiveness, Pleasant and Cheerful, and Decision Making Skills. Of those six, television
exposure seemed to correlate with and predict perceptions of psychologists’ competence, physical appearance, pleasant and cheerful dimension, and decision-making skills.

The concept of internalization and the associated notions of primary and secondary socialization (Berger & Luckman, 1967) offer a useful explanation for the way people form perceptions of their environment, and the role that television plays in this process. It appears as though viewers were being socialized by portrayals of psychologists on television. We specifically postulated that television images provide a salient and influential source of secondary socialization to “more frequent viewers”. Instead of assuming that individuals partake in non-selective viewing of uniform messages however, it was our contention that genre-specific viewing was more predictive of viewer perceptions of psychologists. Therefore, program type dominance was hypothesized to be a more accurate, revealing way to measure the potential socialization than total television exposure. Each of the three genre-specific methods found associations between television exposure and cultivation effects. Most of the cultivation effects were found between television exposure and psychologists’ personal or professional attributes. Our hypothesis was supported and is consistent with other research that has found similar results (Hawkins & Pingree, 1981; Potter 1993; Potter & Chang, 1990; Segrin & Nabi, 2002).

We operationalized television exposure by the traditional measure of total weekly hours viewed and tested it against four other methods of measurement. It was interesting to note that our study found the traditional method of measuring total television exposure to be entirely ineffective. It did not predict any cultivation effects. Genre-specific time ratio, one of three other program type dominance methods, was shown to particularly useful in predicting viewer perceptions of psychologists. These findings offer further support to the
growing body of cultivation research against total television exposure as the most effective method to measure media influence. The mean exposure method (in nominal units) was shown to be the second most useful predictor of cultivation effects.

It appears as though exposure to soap operas predicted cultivation effects to a stronger degree and under more models than any other type of programming. This was evident across each of the three genre-specific television exposure methods of measurement. More frequent exposure to soap opera programming known to portray psychologists was negatively predictive of viewer perceptions of psychologists’ attributes, such as pleasant/cheerful, physical attractiveness, and competence. The only other genre of programming predictive of cultivation effects was drama programming, which was positively associated with viewer perceptions of psychologist personal and professional attributes, such as decision making skills. Future studies will want to examine each personal trait making up those attribute dimensions, such as pleasant, cheerful, competent, intelligent, qualified, stylish, sexy, and attractive.

Regarding television viewing data, participants’ mean viewing (in nominal units) was the greatest in talk shows, then drama, followed by soap operas, and then situational comedy (in order of highest to lowest means). The mean amount of hours watched weekly was 9.57. In analyzing this data, we must take the time of day that calls were made into account. Most calls were made in the daytime, which tends to air more talk shows and soap operas. Also, it seems that comedies may have obtained the lowest mean due to the fact that two of the three shows sampled air on cable rather than public broadcasting.

The fact that exposure to soap operas obtained the greatest predictive power, yet was the second least frequently viewed genre of programming is quite alarming and attests to the
influential potency that mental health professionals have on viewer perceptions in soap opera programming. This line of reasoning leads one to question whether certain genres such as soap operas may be more uniform in their messages and psychologist portrayals, thus potentially enhancing the potency of influence on viewers. Conversely, some genres consist of programs that may be more distinct from one another such as dramas, therefore potentially rendering individual shows more influential than whole genres.

After finding a strong association between television exposure to shows known to portray psychologists and viewer perceptions of psychologists, we measured the extent to which those relations were predictive of an individual’s willingness to seek mental health services. Although this relationship was not direct, it was mediated by attitudes towards seeking professional mental health services. Specifically, exposure to soap operas was positively predictive of the pleasant/cheerful dimension, and pleasant/cheerful was found to positively predict attitudes towards seeking professional mental health services. The relationship showed up in several different methods of measuring television exposure (the program type dominance and total shows models). Therefore, results reveal a significant, negative relationship between viewers’ exposure to soap operas and their perceptions of psychologists along the pleasant/cheerful dimension, which then positively predicted their attitudes towards seeking professional mental health services and ultimately provided a strong positive association with individuals’ willingness to seek help.

Our data suggest that counseling familiarity may be moderating the relationship between television exposure and cultivation effects. High counseling familiarity (direct personal experience with psychologists and/or indirect knowledge of the counseling process) seemed to interact with television exposure to influence viewer perceptions of psychologists’
personal attributes. Low counseling familiarity (having only taken a college course or no
direct or indirect experience) seemed to interact with television exposure to influence
attitudes towards seeking professional mental health services. An analysis of television
exposure and public’s perception of physicians by Chory-Assad and Tamborini (2003) found
direct experience as being the strongest predictor of public perceptions. Taken together,
there seems to be support for the importance that previous experience with members of a
professional occupation has on cultivated perceptions. The statistical analyses in the present
study were not valid enough to draw any firm conclusions regarding then moderating role of
counseling familiarity, however clear differences in the categories of cultivation effects
found for each group suggest that a level of moderation may exist. Future studies should
more stringently test counseling familiarity as an important moderating variable.

Shrum’s (1995, 2001) heuristic processing model offers one possible explanation for
the observed cultivation effects regarding perceptions of psychologists’ personal attributes.
The primary assumption is that these perceptions of psychologists’ attributes are based off
the portrayals that people view on television and can be understood in terms of the cognitive
strategies people use in perceiving that reality. The belief, value, or attitude that is cultivated
depends on an individuals’ use of heuristics, simple decision rules that require minimal
cognitive effort. Whereas thoughtful, extensive searches of information from long-term
memory would likely refute some of the more vivid, acute images depicted on television,
Shrum asserts that individuals use shortcuts instead, thus rendering television portrayals of
psychologists influentially paramount to accuracy goals. The result becomes beliefs about
psychologists that are similar to how they are portrayed on television. One such heuristic
that may explain cultivation effects observed in this study is the accessibility bias.
An accessibility bias is said to occur when information that more easily comes to mind is used disproportionately or unjustifiably in making judgments (Shrum, 1995). Accessibility is the ease with which information is recalled from memory (Higgins & King, 1981), and is a function, in part, of the frequency and recency with which the information is activated in one’s mind, and of the vividness and distinctiveness of the information. Because television exposure is related to the encoding and activation of information stored in memory, information concerning topics that occur on television, such as psychologists, should be more accessible for heavy versus light television viewers, and for those with low versus high counseling familiarity, all other things being equal (Shrum, 1995, 2001). Because heavy viewers are exposed to more relevant television images, the given information should be activated more frequently and recently in their minds than in those light television viewers, thereby increasing accessibility (Chory-Assad & Tamborini, 2003). Accessibility is also higher among heavy viewers because the activated information tends to be vivid and distinct, due to television’s dramatic, fast-paced, and exciting formats (Shrum, 1995, 2001). If future research would analyze the content and attributes ascribed to portrayals of psychologists, we could draw hypotheses and then test the association between those attributes and viewers accessibility of images consistent with those portrayals.

There has not been much of a focus on television psychologists in the past. A few studies have looked at psychologists in the movies (Schneider, 1981; Signorielli, 1986) and only recently have creators increased their use of psychologists as main characters on television. With that trend comes a need for psychology to test the effects those character portrayals have on viewers. As mentioned previously, in order to learn more about the messages being portrayed on television, there is a need to analyze the productions themselves.
portrayals have on viewers. As mentioned previously, in order to learn more about the messages being portrayed on television, there is a need to analyze the productions themselves and viewer perceptions. The present study took a first step by examining viewer perceptions and shows known to portray psychologists, but those shows were limited to talk shows, situational comedies, drama, and soap opera programming. If exposure to television known to portray psychologists in spring 2004 leads to a clearly delineated influence on attitudes and subsequently, willingness to seek help, it will be important to keep measuring the effects from contemporary programming. As was the case for physician shows, psychologists are increasingly receiving more airtime in the media and their portrayals are likely to be constantly changing, according to what elicits ratings. Further studies replicating, expanding, and updating the results from the present study are needed.

Specifically, further studies should explore reality-based programs on public network television as well as cable television. “Breaking Bonaduce” on VH1 hosts Dr. Garry B. Corgiat in a professional role. VH1 is known to represent pop-culture and target teenagers, who may be particularly impressionable given their probable lack of counseling familiarity. With present data indicating a higher likelihood that television exposure will predict cultivation effects for those with low counseling familiarity, specifically on attitudes towards mental health services, television shows targeting teenagers should warrant special attention. Reality programming airs a number other shows hosting psychologists in the cast as well. There is also a need to analyze news programming, which often airs 30-second clips or sound-bites of “expert” psychologist/psychiatrist analysis. If an “expert” is providing negative or inaccurate messages, these messages need to be addressed and promulgated. It will be useful to sample shows from cable networks dedicated to medicine
and health such as Americas Health Network and The Learning Channel. Some public broadcast services give airtime to mental health professionals as well. Each of these networks and the shows they air should be investigated, as should the relationships between exposure to these mental health professional images and perceptions of psychologists. Finally, we must consider the influence of movies on viewer perceptions. Movies, due to their length, production costs, and memorable qualities may be more accessible and more vivid than television episodes that air once a day or once a week.

Moreover, future research on television’s portrayals of and effects of exposure to psychologists and professional mental health services will benefit by examining psychologists in their professional lives, in addition to their personal lives. It is possible that because reality-based programs typically portray mental health professionals in real life situations, being interviewed or speaking directly to an audience, they would tend to focus on public behavior and professional practice, rather than on psychologists’ personal lives and feelings (Chory-Assad & Tamborini, 2003). If this were found to be, then perceptions of psychologists’ personal attributes, such as regard for others or pleasant/cheerful, may not be related to exposure to this reality programming. It may be that different programs and/or genres influence perceptions differently and it will be useful to identify which, both programs and genres, have positive and negative effects. Even more specifically, it will be helpful to analyze those programs at a micro level and investigate what kind of scenes tend to have the most influence. Perhaps some scenes have a greater socialization influence and are more accessible in our memories than others.

Our data had limitations, however. First, there may have been self-presentation biases causing hesitation or manipulation on behalf of the participants to reveal having seen
a psychologist themselves. Participants may have been reluctant to answer questions in a certain manner or with a certain response. Second, the way we measured counseling familiarity may have been too simple and may be detracting from the complexity of this important variable. Chory-Assad and Tamborini (2003) found frequency of visits and time since last visit as a variable that significantly predicted perception of physicians. We believe these variables would have a significant influence in our model as well and should be tested in future studies of perceptions of psychologists. Finally, while we did assess the direct and indirect personal experience, future researchers might also want to further control for, or compare, long term socialization via media influences versus long term socialization via direct experiences.

Researchers should consider longitudinal media effects that may be influencing perceptions of psychologists. The present study only looked at current viewing habits. Past news stories, past viewing habits, and full length motion pictures could be influencing viewers’ perceptions of psychologists. According to the heuristic process model’s explanation, one such heuristic that may explain cultivation effects is the accessibility bias. That said, an accessibility bias might be more prominent with full length motion pictures than half-hour or hour-long television shows. People commonly view movies multiple times. The images might be more vivid, thus more accessible in their memories, which might promote stronger socialization and cultivation effects. In comparison, individuals often only view television episodes once.

The present study was also limited by a few methodological concerns. The first concern is that we failed to meet the number of participants necessary to obtain a power of .8 or higher. Results from our power analysis indicated that one hundred ninety nine
participants were needed and our sample of completed surveys consisted of one hundred fourteen participants. The second concern is that the present study is correlational and does not draw any causal relationships between variables. Therefore, future studies would add to the literature by conducting experimental studies aimed at testing specific genres or specific shows to see the extent to which they influence individual's perceptions of psychologists or attitudes towards seeking professional mental health services. Future research would benefit by experimentally testing the attitudinal effects of exposure to a single show episode, repeated exposure to single episodes at one point in time, repeated exposure to single show episodes at multiple points in time, multiple genre-specific show episodes at one point in time, multiple genre-specific show episodes at multiple points in time, and repeated genre-specific exposure over longer periods of time.

Another methodological limitation regards the way we measured genre-specific time ratio. Our measurement took a genre-specific frequency ratio of genre-specific exposure to uniform exposure and multiplied that number (unitized by an artificial number) by total weekly hours. In multiplying genre-specific frequency ratio by total hours, we made an assumption that participants' total television exposure consisted of only the four genres in this study. Future research using genre-specific time ratio as a method to measure television exposure should offer television exposure variables that include more genres and collect data on genre-specific hours viewed. Moreover, the genres only included the three shows in our sample, therefore were not all inclusive and results indicating genre-specific exposure as influential neglected potential other confounding television influences. Genres in this study were made up of shows only known to occasionally portray psychologists. Finally, the present study is somewhat limited in terms of external validity. The survey was taken from
a sample of Iowa residents and the shows sampled were in spring 2004. Regional programming may have had an influence as well. Given the year and regional constraints, differences in cultivation effects may be found in different regions and over time. However, given the wealth of research on cultivation effects, it does seem probable that television exposure will predict cultivation effects for years to come. This research design is easily replicated for researchers to employ around the United States and global world.

The present cultivation effect findings highlight the necessity for research aimed at measuring televisions’ direct or indirect impact on individuals in need of professional mental health services. It also warrants a closer examination of shows known to portray psychologists. Identifying the circumstances under which television programming is associated with perceptions of psychologists is significantly valuable to media scholars and mental health care professionals alike. Cultivation research on attorneys and physicians have both found personal experience to interact with television exposure in influencing viewers’ perception of each respective field of professionals (Bennack, 1983; Hans & Dee, 1991; Macaulay, 1986; Pfau, Mullen, & Garrow, 1995). Our society must consider the possibility that negative, inaccurate portrayals of television psychologists may be contributing to an unfavorable public perception of psychologists.

A misinformed public could have serious indirect or direct implications on people’s mental health. Clinical pathologies, disorder symptoms, and even everyday stressors require timely attention before they run the risk of occupational or social impairment. If people are not seeking help when they need it because of what they have seen on television, the adequacy and faith in mental health care is at risk. On the other hand, misinformation may entice people to seek help when they do not need it, placing an unnecessary financial and
mental strain on individuals and the system. The consequences are too serious to ignore and while television airs new plots and new characters daily, researchers should be analyzing the content and assessing the effects on viewers. We hope the predictive nature of television exposure found in this study serves as a useful impetus for further research in this area.
Hi (...), I’m calling from Iowa State University as a part of a research study. This call’s not intended to sell you anything at all. If you have a brief moment, I would like to ask you some questions about the study.

NO: (Your judgment: When would be a better time for me to call again?) Ok thanks for your time.
If asked how long it will take: It will take about 10 minutes.
If asked for more details about the study: It’s about the portrayal of Media Psychologists and how that effects a person’s willingness to seek help. (If people’s perceptions are at all related to TV’s portrayals, it may have drastic implications on an individual’s willingness to seek help when needed.)

YES: Ok great! We’re only looking for your opinions regarding psychologists, so there’s no right and wrong answers. Any of your best guesses will be very helpful ok? Let’s begin,

(Don’t say “number one, two, three…etc”)
1) Would you say most practicing psychologists are: □ male □ female or □ are equally represented?
2) Would you say the average age of practicing psychologists is from □18 to 29 □ 30 to 39
□ 40 to 49 □ 50 to 59 □ 60 to 69 or □ 70 and older DON’T READ (□ don’t know)?
3) Ok, what do you think is the race and ethnicity of most practicing psychologists? □ African American, □ Asian-Pacific Islander, □ Hispanic/Latino, □ Native American, □ White, □ Multi-racial, or □ Other, (□ don’t know)?

Ok, now I’m going to read you a series of questions that attempt to describe characteristics of practicing psychologists:

4) Ok, how selfish or unselfish in their personal lives AND professional lives do you see therapists? (very selfish, rather selfish, rather unselfish, or very unselfish) ...........................................
5) How honest or dishonest do you see therapists as behaving in practice AND in their personal lives? (very dishonest, rather dishonest, rather honest, very honest)...............................
6) Next, how moral or immoral do you see therapists as behaving in practice AND in their personal lives? (very immoral, rather immoral, rather moral, very moral)............................
7) (Read slowly to give them time to catch onto the change in thought patterns) Now I want you to think in terms of interpersonal behavior…How proper or improper do you see therapists as behaving in practice OR their personal lives? .................................................................
8) Pleasant or unpleasant? (very unpleasant, rather unpleasant, rather pleasant, very pleasant).................................................................
9) Cheerful or gloomy? (very gloomy, rather gloomy, rather cheerful, very cheerful).............
10) How **good-natured** or irritable do you think therapists are when communicating in their personal AND professional lives? (very irritable, rather irritable, rather good-natured, very good-natured) .........................................................

11) When you think about a therapist in professional sessions OR in their personal lives, how **nervous** or poised do you view them? (very nervous, rather nervous, rather poised, very poised) .................................................................

12) When you think about a therapist in professional sessions OR in their personal lives, how **tense** or relaxed do you view them? (very tense, rather tense, rather relaxed, very relaxed) ..............................................................................

13) When you think about a therapist in professional sessions OR in their personal lives, how **calm** or anxious do you view them? (very anxious, rather anxious, rather calm, very calm) ..............................................................................

14) How **competent** or incompetent do you see therapists as being? (very incompetent, rather incompetent, rather competent, very competent) .................................................................

15) **Intelligent** or unintelligent? (very unintelligent, rather unintelligent, rather intelligent, very intelligent) ..............................................................................

16) Qualified or unqualified? (very unqualified, rather unqualified, rather qualified, very qualified) ..............................................................................

17) Caring or uncaring? (very uncaring, rather uncaring, rather caring, very caring) .................

18) **Warm** or cold? (very cold, rather cold, rather warm, very warm) ........................................

19) How **friendly** or unfriendly do you see therapists as being in practice or personal lives? (very unfriendly, rather unfriendly, rather friendly, very friendly) .................

20) How **wealthy** or poor financially do you see therapists as being? (very poor, rather poor, rather wealthy, very wealthy) ..............................................................................

21) How **weak** or strong physically do you see therapists as being? (very weak, rather weak, rather strong, very strong) ..............................................................................

22) How **weak** or strong mentally do you see therapists as being? (very weak, rather weak, rather strong, very strong) ..............................................................................

23) The first question is, “How physically **attractive** or unattractive do you think therapists are in general? Are they very unattractive, rather unattractive, rather attractive and very attractive?” .................................................................

24) Next question: “Do you see therapists as **plain** or stylish in their wardrobe? Are they very plain, rather plain, rather stylish or very stylish?” ..............................................................................

25) Ok, How **sexy** or unsexy in appearance AND behavior do you see therapists as being? (READ FOR OLD PEOPLE WHO ARE SHY) very unsexy, rather unsexy, rather sexy or very sexy? ............................... 

26) (slowly) Ok, now when you envision a therapist in professional sessions or in their personal lives, how do you think they typically use humor? 
  - Do you think the humor is typically directed at themselves or psychologists in general OR 
  - Do you think humor is typically directed at people or situations other than psychologists, OR 
  - Do you think that psychologists rarely use humor? 

27) When using humor, do you think therapists make **appropriate** or **inappropriate** jokes in terms of individual and cultural respect? (very inappropriate, rather inappropriate, rather appropriate, very appropriate) .................................................................

28) When humor is being attempted, do you find therapists **funny** or **not funny**? (not funny, not very funny, rather funny, very funny) ..............................................................................
29) When therapists make decisions in session, do you perceive them to be **decisive** or **indecisive**?
(very indecisive, rather indecisive, rather decisive, very decisive) ............................................

30) When thinking about the overall character of therapists in professional sessions and in their personal lives, do you perceive them to be **weak-minded** or **strong-minded**? (very weak-minded, rather weak-minded, rather strong-minded, very strong-minded) ............................................

31) How **confident** or **diffident** do you believe most therapists are in making decisions in professional sessions? (very diffident, rather diffident, rather confident, very confident) ...

Ok, now I’m going to read a series of statements and I’d like you to tell me whether you disagree, partly disagree, partly agree, or agree with each statement.

32.) The 1st one is...If I were experiencing a serious emotional crisis at this point in my life. I would be confident that I could find relief in psychotherapy. Would you say you disagree, partly disagree, partly agree, or agree?
D PD PA A

33) The next statement is...If I believed I was having a mental breakdown, my first inclination would be to get professional attention. Would you say you disagree, partly disagree, partly agree, or agree?
D PD PA A

34) Ok...The idea of talking about problems with a psychologist strikes me as a poor way to get rid of emotional conflicts. (disagree, partly disagree, partly agree, or agree?)
D PD PA A

35) There is something admirable in the attitude of a person who is willing to cope with his or her conflicts and fears without receiving professional help (disagree, partly disagree, partly agree, or agree?).
D PD PA A

36) I would want to get psychological help if I were worried or upset for a long period of time (disagree, partly disagree, partly agree, or agree?).
D PD PA A

37) I might want to have psychological counseling in the future if needed (disagree, partly disagree, partly agree, or agree?).
D PD PA A

38) A person with an emotional problem is not likely to solve it alone. He or she is likely to solve it with professional help (disagree, partly disagree, partly agree, or agree?).
D PD PA A

39) Considering the time and expense involved in psychotherapy, it would have doubtful value for a person like me (disagree, partly disagree, partly agree or agree)
D PD PA A

40) A person should work out his or her own problems; getting psychological counseling would be a last resort (disagree, partly disagree, partly agree, or agree?)
D PD PA A
41) Personal and emotional troubles, like many things, tend to work out by themselves (disagree, partly disagree, partly agree, or agree?)

D PD PA A

Ok great. Now for the next series of statements it's similar but slightly different. Like the previous series, I'm going to read the statement aloud. Please listen to the statement and this time when you state your rating, choose between strongly disagree, disagree, agree, and strongly agree ok?

42) The first statement is: Seeing a psychologist for emotional or interpersonal problems carries social stigma.
(Do you strongly disagree, disagree, agree, or strongly agree?) SD D A SA

43) The next statement is...It is a sign of personal weakness or inadequacy to see a psychologist for emotional or interpersonal problems.
(Do you strongly disagree, disagree, agree, or strongly agree?) SD D A SA

44) Ok...People will see a person in a less favorable way if they come to know that he/she has seen a psychologist.
(Do you strongly disagree, disagree, agree, or strongly agree?) SD D A SA

45) It is advisable for a person to hide from people that he/she has seen a psychologist.
(Do you strongly disagree, disagree, agree, or strongly agree?) SD D A SA

46) People tend to like less those who are receiving professional psychological help.
(Do you strongly disagree, disagree, agree, or strongly agree?) SD D A SA

Ok the next few questions are pertaining to the amount of TV you watch during the day. I'm going to give you a list of time ranges and you tell me how many hours you watch TV during that time span.

47) On a typical week day (Monday-Friday), how many hours do you watch TV between 6am and noon ______, ok, noon and 6pm ______, alright, 6pm and midnight ______, and finally midnight and 6am __________

48) On a typical weekend day (Saturday and Sunday), how many hours do you watch TV between 6am and noon ______, ok, noon and 6pm ______, alright, 6pm and midnight ______, and finally midnight and 6am __________
Ok great, now I’m going to read you a list of shows and based on the options I give you, you tell me how often you watch these shows

<table>
<thead>
<tr>
<th>Show</th>
<th>Every Day</th>
<th>Almost Every Day</th>
<th>About 2-3 Times a Week</th>
<th>About Once a Week</th>
<th>About a Couple Times a Month</th>
<th>About Once a Month</th>
<th>I Almost Never Watch This Show</th>
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</table>
60) Ok, the last show is Passions; every day, almost every day, about 2 to 3 times a week, about once a week, a couple times a month, about once a month, I almost never watch this show or I never watch this show?

☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐

The next series of questions is going to ask for your opinion about how television portrays psychologists:

61) Overall, do you think television portrays psychologists: ☐ Realistically or ☐ Unrealistically or ☐ both DON'T READ (☐ Doesn't know)

62) Overall, do you think television portray psychologists: ☐ Positively or ☐ Negatively or ☐ Mixed DON'T READ (☐ Doesn't Know)

63) Overall, do you think television portray psychologists:
☐ As helpful, ☐ As hurtful, ☐ Neither, or ☐ Both helpful and hurtful

DON'T READ (☐ Doesn't Know)

64) Where do you think people get the majority of their mental health care information?

65) What is your opinion regarding the accuracy of the portrayals of television psychologists?

66) What, if anything, do you think TV could do to improve the image of psychologists on television?

Great! We’re almost done! Before I let you go, I just want to get you’re a couple of facts about you.

67) Age: “Is your age between…”
☐ 18 and 29 ☐ 30 and 39 ☐ 40 and 49 ☐ 50 and 59 ☐ 60 and 69 or ☐ over 69
68) What is your ethnic background?

☑ White ☐ African American ☐ Hispanic/Latino
☑ Asian ☐ Native American ☐ Multiracial ☐ Other

69) How familiar are you with the counseling process with psychologists? Have you:

☑ taken a college level psych course,
☑ talked with close friends or family about their experiences with psychologists
☑ seen a psychologist yourself, or
☑ are you not familiar with the counseling process with psychologists?

70) (don’t ask) Gender: ☑ Male ☐ Female

Thank you very much for taking your time to participate (sir/ma’am). Your data will be very useful in our research study. If you have any questions please contact the principal investigator Scott Kaplan at 515-294-5143. Ok, Thank you very much. Bye bye.
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