Lay counselor training: the comparative effects of three counselor training techniques on reflection of feeling

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Lay counselor training: The comparative effects of three counselor training techniques on reflection of feeling

by

Robert Joseph Dunn

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INTRODUCTION

Counselor educators continually seek more effective methods of training their counselors. Research evidence regarding differential effectiveness of counselor training programs is sparse, and, at best, contradictory and ambiguous (Bellucci, 1972; Chinsky and Rappaport, 1971; Rappaport, Chinsky and Cowen, 1971; Bergin and Garfield, 1971).

Didactic-Academic Training

Traditionally, pre-practicum counselor training is carried out in academic institutions and is largely didactic. The trainee reads and discusses counseling theories, learns assessment techniques, and makes a few rehearsals of counseling by means of roleplayed counseling situations. Truax and Carkhuff (1967) assert that most counseling training programs have overemphasized theory and psychodynamics to the exclusion of teaching trainees how to relate to a client in a warm, helping manner. A number of studies (Feifel and Bells, 1963; Strupp, Wallach, and Wogan, 1964; Lorr, 1965; and Rice, 1965) find that clients do not value elaborate therapist techniques but do value therapist warmth, helpfulness, and caring.

Carkhuff (1968) maintains that traditional academic degree programs in counseling psychology train "discriminators" rather than "communicators" and that gradu-
ate students enrolled in such programs exhibit a decrease in level of therapeutic functioning during the course of their training. The fact that most counseling training programs are in academic institutions has caused selection for such programs to be largely based on academic criteria. Bergin and Solomon (1970) find that empathic skills are not related to intelligence or to performance on the GRE. Melloh (1964) states that accurate empathy is unrelated to practicum grades. Other studies have found that grading is basically unrelated to functioning as a therapist (Kelly and Fiske, 1951; Kelly and Goldberg, 1959; Truax and Carkhuff, 1967). This research underscores the difficulties of evaluating counseling potential or performance by traditional didactic-academic methods.

One theory to account for the high didactic emphasis in most training programs is the concept of the psychologist as a scientist-practitioner. Universities appear to be more concerned with producing prolific researchers than with preparing students to become effective therapists. The academic part of learning often excludes experiential parts of counselor training (Snyder, 1962; Fine, 1966; Weil and Parrish, 1967). Truax and Carkhuff (1967) review several studies concerned with effectiveness of counselor training programs and conclude that current procedures for selection and training of counselors are "indefensible".
Alternatives to the Didactic-Academic Training

Recent years have witnessed a movement in counseling training away from a predominantly didactic-academic model (i.e., training in theories and dynamics) toward a didactic-experiential model (Matarazzo, 1971). Proponents of the newer model are concerned that trainees practice helping behaviors and learn specific verbal and nonverbal skills. While the newer model does not deny the importance of theory, dynamics, and research, it reduces the time the trainee spends in academic concerns. This increases the amount of time the trainee spends taking part in structured counselor-like experiences. These experiences serve to build specific, measurable skills.

This movement is concurrent with the recent increase of counseling research aimed at defining specifically what counselors do and what specific techniques lead to client behavior change (Kiesler, 1971; Bergin, 1971). Matarazzo (1971) states that the two important concerns of counselor educators appear to be selection of psychologically healthy individuals and combined didactic and experiential training for a specific, well-defined role.

The current approach toward an integration of didactic and experiential approaches in training would seem to have a number of advantages. The evaluation of a trainee's behavior
would be based on research proven scales (Truax and Carkhuff, 1967; Ivey, 1971) rather than upon the supervisor's whims and subjective evaluation. This would reduce the problem inherent in selecting and eliminating prospective therapists. It would also tend to lower that barrier to the communication between trainee and supervisor by minimizing the supervisor's role as evaluator. If supervisors were less preoccupied with evaluation and elimination, they could spend more of their time helping the trainee grow as a therapist.

Such training programs seem consistent with what is theoretically assumed and empirically known about an effective therapeutic relationship (Truax and Carkhuff, 1967; Matarazzo, 1971; Ivey, 1971). Training the aspiring counselor in specific skills, and in a logical sequence allows the trainee a chance to develop and master basic relationship skills before being placed into the "hot seat" of actual counseling.

Two specific counselor training techniques which have evolved from this didactic-experiential model are empathy group training and microcounseling.

**Empathy Group Training**

Empathy group training attempts to enhance the giving and receiving of affective communication. This procedure was developed by Truax and Carkhuff (1967). Group training ses-
sessions consist of organized exercises and interactions which serve to facilitate trainees' empathic responses to verbal statements.

Counselor trainees are provided with selected reading focusing on empathy and its importance in helping others. The group members are expected to read this material, and in some cases, are quizzed over it. In addition, during group meetings the trainer presents the trainees with a series of tape recorded statements from a variety of clients. Members listen to the statements and then reformulate verbally the essential communication made by the client, in terms of both the feeling and content of the communication. They learn to concentrate on listening to the meaning of the client's communication and developing facility in verbalizing this meaning.

In sum, this procedure is aimed at sensitizing the beginning counselor to understanding client feelings and communicating this understanding back to the client. There is considerable research (Truax and Carkhuff, 1967; Berenson, Carkhuff, and Myrus, 1966; Truax and Silber, 1965; Carkhuff, 1968; Carkhuff, 1969) which substantiate that empathic skills can be taught by this method.
Microcounseling

Ivey, Normington, Miller, Morrill, and Haase (1968) have introduced a didactic-experiential counselor training technique which they call microcounseling. This method teaches counselor skill behaviors that can be behaviorally defined, described in a written manual, and modeled on videotape. In any given training session, the trainee is only taught one particular skill and is asked to practice that behavior as many times as possible in a short five to ten minute roleplay. Subsequent research (Ivey et al., 1968; Frankel, 1971; Ivey, 1971; Morteland, Phillips, Ivey and Lockhart, 1969; Haase and DiMattia, 1970; Aldridge and Ivey, 1972; Gluckstern, 1972; Belucci, 1972) have supported the effectiveness of microcounseling in teaching a variety of counselor skills. Attending behavior, open-ended questioning, minimal activity responses, paraphrasing, reflection of feeling, and summarization are some of the skills trainees have been taught by means of microcounseling.

These skills are taught by Ivey in the following sequence:

1) Trainee conducts a five minute videotape interview with roleplaying client.
2) Trainee reads a brief behavioral manual about the skill to be learned.
3) Trainee views modeling of skill to be learned and discusses model with trainer.

4) Trainee views his initial videotape and is asked to identify his own use of the specific skill being learned.

5) Trainee recounsels same client.

Certain modifications, deletions, or augmentation are often made with this basic structure. Ivey (1971) states that microcounseling training is adaptable and modifiable to a variety of situations as long as the four basic dimensions of the technique are included in the training. These dimensions are: 1) The counseling skill to be taught is specifically outlined in a written or programmed manual. 2) There is a demonstration of the skill to be taught via videotape modeling. 3) The trainee is given an opportunity to practice the skill in a "life-like" situation. 4) Immediately following the rehearsal of the skill, the trainee is given feedback as to his performance.

Studies (Ivey et al., 1968; Frankel, 1971; Belucci, 1972) suggest that certain counseling skills can be described and taught in specific behavioral terms. Microcounseling appears to be an effective method of teaching basic counseling skills.
Purpose of Study

The present study seeks to determine the differential effectiveness of two didactic-experiential techniques and one didactic-academic technique for training counselors. A wealth of evidence has been cited that shows the didactic-experiential approach to counselor training has certain advantages and perhaps is more effective than the didactic-academic approach. It has not yet been established which didactic-experiential approaches are most effective in teaching certain counselor skills.

The present study attempts to contribute information on the question of differential effectiveness. Two didactic-experiential counselor training techniques and one didactic-academic counselor training technique will be compared in the teaching of a specific counseling skill to lay counselor trainees. The skill to be taught will be reflection of feeling. The three techniques which will be compared are: 1) microcounseling, 2) empathy group training, and 3) a didactic-academic training technique consisting of trainee self-instruction. Both the rate of skill acquisition and the terminal level of skill acquisition will be examined.

Microcounseling and empathy group training appear to be only the vanguard of more didactic-experiential techniques, whose effectiveness may be ranked differentially depending on the specific skill or group of skills to be taught. For ex-
ample, in future studies microcounseling may be shown to be more effective in teaching confrontation, while empathy group training is superior in teaching empathic reflection. Thus, the relative advantages and disadvantages (time, personnel, equipment, etc.) of each technique must be weighed against its researched effectiveness in building a specific counselor skill.

If indeed we are interested in which specific training techniques are effective in developing specific counseling skills, much more research of a comparative nature will be necessary. Hopefully, this study will generate similar research concerned with differential efficacy of counselor training techniques.

**Therapist Interpersonal Skills**

Truax and Mitchell (1971) state that three common characteristics of an effective therapist emerge from even the most divergent theoretical viewpoints: 1) genuineness in therapeutic encounters, 2) positive regard or nonpossessive warmth for the client, 3) accurate empathy with the client. These "necessary and sufficient conditions" for client growth cut across theories of psychotherapy and are utilized in many approaches to behavior change.

A variety of studies (Rogers, 1962; Truax and Carkhuff, 1967; Truax and Wargo, 1969) support the view that accurate
empathy, nonpossessive warmth, and genuineness are related to constructive change in clients. The present study is concerned with teaching counselor trainees one of these basic interpersonal skills - accurate empathy.

Empathy and Reflection of Feeling


Empathy refers to "the counselor's ability to perceive the client's thoughts and feelings and to communicate this perception to the client...the client communicates a thought or feeling to the counselor, who focuses on the essence of the expression and reflects it back to the client in such a way as to sharpen it for him, thus helping to explore it further" (Lewis, 1970).

A distinction is generally made between a therapist's understanding of a client and the quality or quantity of empathic responses that are communicated to the client. Understanding of client may be related to diagnostic accuracy, theoretical expertise, or intellectual ability. Empathic responding, however, seems to be related to the therapist's level of interpersonal functioning.
Thus, while understanding is a precondition for empathic responding, a therapist who has understanding may or may not communicate this to the client. Studies which focus on the therapist's empathic responding to a client (i.e. use of reflection of feeling) are measuring an interpersonal skill of the therapist, not his understanding or cognitive awareness of the client.

Reflection, refers to "the counselor's attempt to feedback to the client the essence of the client's own expressions. The counselor tries to perceive and respond accurately to the thoughts and feelings of the client" (Lewis, 1970). Ivey et al. (1968) state that reflection plays an important part in communicating "empathic understanding" to the client. Phillips and Agnew (1953) state that reflection is definitely a learned clinical skill and is not commonly used in general interpersonal relationships by nonclinically trained, or even highly functioning individuals. Seemingly, if empathy is desired in counselors, reflection of feeling is a skill that should be taught to counselors-in-training.

Reflection of feeling was chosen as the skill to be developed within trainees for the following reasons: 1) It is considered to be an essential counseling skill by a variety of theorists and practitioners. 2) There are several reliable and valid measures concerned with empathic reflection.
3) Counselor trainees usually must be trained in this skill, as it is not generally used by people in interpersonal relationships. 4) Reflection of feeling can be taught by a variety of methods which can then be compared as to their speed and effectiveness. 5) Reflection of feeling presupposes accurate empathy or understanding of the client on the part of the therapist.

Training of Lay Counselors

The present study seeks to teach nonprofessionals the basic counseling skill - reflection of feeling. It has been shown that lay persons can be trained to be warm, empathic facilitators of behavior change. Nonprofessionals, ranging from college students to housewives have been trained to effect constructive client change. Nonprofessionals have worked effectively with hospitalized patients, outpatients, and normals (Appleby, 1963; Glasser, 1965; Carkhuff and Berenson, 1967; Magoon and Golann, 1966; Mendel and Rapport, 1963; Brown, 1965; Zunker and Brown, 1966; Kratochvil, 1968; Haase, DiMattia, and Guttman, 1970; Ivey, 1971).

Lay helpers have been shown to be as effective as professionals in producing certain desired client changes (Anker and Walsh, 1961; Harvey, 1964; Magoon and Golann, 1966; Poser, 1966; Bergin and Solomon, 1970). Carkhuff (1968)
explains this effectiveness by saying that the professional therapist too often uses highly complex cognitive techniques in counseling. He is overly defined and restricted by his professional status and is often preoccupied with theoretical and technique concerns. The professional, frequently, does not evaluate his or her own communications to the client. Conversely, the lay therapist is frequently less concerned with role definition and theoretical underpinnings. Often he or she tries just to "be with" the client and involve himself/herself with the client.

Carkhuff (1968) lists several advantages lay counselors seem to offer over professional counselors. They are: "1) increased ability to enter the milieu of the distressed, 2) ability to establish peer-like relationships with the needy, 3) ability to take an active part in client's total life situation, 4) ability to empathize more effectively with client's life style".

**Trends in Counselor Education**

There are some national trends in counselor education which lend support to the value of the present study to the field of counseling psychology: 1) There is an ever increasing use of lay counselors in the field of counseling psychology. Effective training techniques are needed to meet this need (Truax and Carkhuff, 1967; Sue, 1973). 2) There
is a high demand for psychologists to serve the needs of the community. Professionals could extend the realm of their services by the training and supervision of lay counselors. Supervisors of training need to be aware of differential effectiveness of training techniques (Matarazzo, 1971). 3) There is an increasing desire for specificity in dealing with counseling and counselor training variables. Researchers are interested in seeing which specific training techniques are effective in developing which counseling skills. At present, there is a paucity of research in counseling dealing with the differential effectiveness of techniques (Bergin, 1971; Kiesler, 1971).

Experimental Hypotheses

The present study compares microcounseling, empathy group training, self-instruction and placebo training in the teaching of reflection of feeling. It is hypothesized:

1) Training techniques will be differentially effective in teaching empathic reflection of feeling. That is, after three hours of training, trainees will significantly differ in their ability to reflect client feelings depending upon the training condition by which they were trained.

2) Groups will differ significantly in the speed with which the reflection of feeling skill is acquired over four interviews. That is, the skill acquisition curves will be
significantly different among treatment and control groups.

3) Microcounseling and empathy group training will be more effective than didactic self-instruction in teaching reflection of feeling. That is, after three hours of training, trainees in the microcounseling and empathy group training conditions will be rated significantly better in reflecting feeling than those trainees in the didactic self-instruction condition.

4) Microcounseling and empathy group training will be significantly more effective than placebo training in teaching reflection of feeling. That is, after three hours of training, trainees in the Microcounseling and Empathy Group conditions will be rated significantly more empathic than trainees in the Placebo condition.
METHOD

Subjects: Subjects were female volunteers from Iowa State University sororities. These women had been designated "rush counselors" by their respective sororities and this training was viewed by them as helping them prepare for their jobs as "rush counselors". Subjects were randomly assigned to three treatment groups and two control groups. There were ten subjects in each of the three treatment groups and two control groups. Any volunteer who indicated previous formal training or experience in counseling or participation in volunteer activities related to counseling was excluded.

Treatment Conditions

Microcounseling Condition

There were a total of three hour-long microcounseling training sessions. Training was done in a group setting. In each session the first ten minutes were didactic in nature. First, the trainer discussed the importance of empathic reflection in the counseling relationship. These presentations were derived from the Reflection of Feeling Manual (see Appendix A). For standardization purposes these presentations were given by means of tape recordings. The E was present while the trainees listened to the Reflection of Feeling tapes. Next, trainees read segments from Ivey's Microcounseling Manual (see Appendix B).
The trainees then watched two brief five minute videotaped roleplays. The first tape depicted a counselor doing a poor job of reflecting client feelings; the second tape depicted the same counselor doing an effective job of reflecting client feeling. The trainer narrated the tapes with appropriate comments such as: "poor eye contact with client", "lack of warmth in voice", "good reflection", etc.

During and following the videotape, trainer and trainee discussed the undesirable and ineffective behaviors the "poor counselor" demonstrated. Conversely, the appropriate and desirable behaviors of the effective counselor were outlined. This required about 45 minutes.

Finally, the trainee roleplayed a ten minute audiotaped interview, with a confederate client. This interview was observed by the trainer. The confederate client was trained to play a specific role and to make feeling statements in four areas (see Appendix F). The confederate initiated the interchange by making several statements concerning himself and his problem. Every 20-30 seconds, the confederate paused or asked the counselor a question. The trainee was instructed prior to the session to expect such pauses and questioning from the client. She was further instructed to use these points in the interview to briefly reflect the content and feeling of what the client has been saying. After ten minutes, the trainer terminated the roleplay and the
confederate left. The trainer then gave a brief feedback session to the trainee. The focus of this session was specific behaviors the trainee should concentrate on in reflecting client feelings (Appendix H).

All microcounseling trainees received the same instructions before each roleplayed counseling situation:

You will be playing a helping professional in this roleplay. A client has come to you with a personal difficulty. You can open the roleplay with a brief "what brings you in to see me today". The client will respond with a few statements concerning his problem and basically will take the lead in talking about it. You are expected to listen carefully to what he is saying to you.

From time to time, the client will give you cues or draw you into the conversation with a pause or a question. At these points, communicate to the client that you are indeed paying attention to him and really listening to him. In a statement or two, attempt to feedback to the client the essence of what he has just communicated to you, the content of his statements and more importantly the feelings you sense are behind his statements. Be brief and concise but try to let the client know you are sensitive to his current feelings.

After a few minutes, I will say, "We can stop here" or knock on the door and the roleplay will be over.

This modification of microcounseling included Ivey's four essential dimensions of microcounselings: 1) A specific counseling skill was presented to the trainee in a written manual. 2) There was demonstration of the skill via videotaped modeling. 3) The trainee was given an opportunity to practice the skill in a lifelike counseling situation. 4) The trainee received immediate feedback concerning her performance in the roleplay. This sequence was
repeated twice more for a total of three sessions.

**Empathy Group Training Condition**

There were a total of three hour-long empathy group training sessions. Training was done in a group setting.

The first ten minutes of each session were didactic in nature. The trainer used this time to discuss the importance of empathic reflections in a counseling relationship. These presentations were derived from the Reflection of Feeling Manual (see Appendix A). For standardization purposes these presentations were given by means of tape recordings (same tape as used in Microcounseling condition).

The next ten minutes were spent listening to an audio tape of several selected counseling interchanges. The trainees were asked to listen to each interchange and write down the dominant emotion being expressed by the client. Following each interchange, the trainer called upon certain trainees to say which emotion was being expressed. If the trainee was right in her labeling, she was reinforced verbally. If not, discussion followed in which the trainer stated how he labeled the emotion and why he labeled an emotion in a given way.

For the next 40 minutes trainees paired off and practiced counselor-client roleplays. The trainer designated a given dyad to demonstrate a helper-helpee interchange for the group. The helper (counselor) was instructed to listen
to the helpee (client) statement and reformulate verbally the essential communication made by the helpee, in terms of both the feeling and content of the communication. After each interchange, the trainer gave brief feedback to the helper concerning the facilitative nature of her statements. The trainer systematically designated dyads until all group members had the opportunity to roleplay both helper and helpee at least twice.

Finally, following the group session each trainee roleplayed a ten minute audiotaped interview, with a confederate client. The confederate client was trained to play a specific role and to make feeling statements in four areas (same as in other groups). The confederate initiated the interchange by making several statements concerning himself and his problem. After ten minutes, the trainer terminated the roleplay. The format, procedure, and trainee instructions were the same as those in the Microcounseling condition (see Microcounseling Condition). This sequence was repeated twice more for a total of three sessions.

**Self-Instruction Condition**

There were a total of three hour-long self-instruction sessions. Training was done in a group session. The first ten minutes, the trainer discussed the importance of empathic reflection in the counseling relationship. These presentations were derived from the Reflection of Feeling Manual (see
Appendix A). For standardization purposes these presentation were given by means of tape recordings (same tape as used in Microcounseling and Empathy Group conditions). The trainer was present while the trainees listened to the Reflection of Feeling tapes.

For the next 50 minutes, trainees read excerpts from articles dealing with the subject of empathy and empathic reflection (see Appendix A). These article excerpts ranged from theoretical statements to transcripts of actual counseling interchanges. Trainees were instructed that they would have an opportunity to practice empathic reflection following the reading period.

Finally, the trainees roleplayed a ten minute audiotaped interview with a confederate client. The confederate was trained to play a specific role and to make feeling statements in four areas. The format and procedure of this interview, as well as the instructions to trainees prior to it, were the same as those in the Microcounseling and Empathy Group conditions. The trainer terminated the roleplay after ten minutes. This sequence was repeated twice more for a total of three sessions.

**Placebo Training Condition**

There were a total of three hour-long sessions of the placebo training group. Training was done in a group setting. For 60 minutes trainees read written material about
psychology but unrelated to counseling or interpersonal relating (see Appendix E). Following this, the trainees roleplayed a ten minute audiotaped interview with a confederate client. The confederate client was trained to play a specific role and to make feeling statements in four areas. The format and procedure of this interview was the same as those in the other three conditions. This sequence was repeated twice more for a total of three sessions.

No Treatment Condition

There were 10 Ss assigned to the No Treatment condition. These Ss received no training in counseling skills. They completed one ten minute interview with a confederate client. These interviews were conducted with experienced confederates subsequent to the last training session of the other conditions. The format and procedure of this interview was the same as those in the other treatment conditions.

Trainer

The same trainer conducted all training sessions for all treatment conditions. He had equivalent experience with all forms of training. Several training assistants were utilized in the Microcounseling condition in order to provide immediate feedback to trainees participating in concurrent taped roleplays. Assistants were trained by the trainer prior to the experiment.
Confederate Clients

There were a total of ten confederates. They used standardized scripts in roleplaying the same basic personal difficulty and in touching on similar feelings about their difficulty (see Appendix F). For realism purposes, the confederates were asked to use statements to convey the feelings that they felt natural with or ones they would use. These client statements covered four basic feelings during the course of any given ten minute interview (Appendix F). To insure that specified client feelings were presented to each trainee, after each roleplay the confederate completed the Confederate Checklist (Appendix G). Confederates were trained by watching a stopwatch while roleplaying to estimate when 20-30 seconds had elapsed. This was to insure that all trainees received approximately the same number of opportunities to respond to the client (every 20-30 seconds). Confederate clients were trained on the dependent measures they were to use (T-F Relationship Questionnaire and 1-99 Accurate Empathy Scale) by watching videotaped counseling interchanges, rating them on the dependent measures, and discussing rating criteria with the experimenter. After three hours of training, it was found the clients were in fairly close agreement as to rating criteria.

All confederates were given the same instructions prior to the experiment:
You are to roleplay the client in a brief ten minute roleplay with a counselor-trainee. You are to use the problem area and feeling clusters you were trained on (Appendix F). The trainee will initiate the roleplay by asking "what brings you in today" or some equivalent phrase. You will respond with a few statements concerning your problem and how you feel about it. While you are expected to take the lead in terms of talking about your problem, every 20-30 seconds pause, ask a question, or make an interrogative statement. This will serve to get the counselor to respond to what you've been saying. React to this response as you would in a counseling relationship. If her remark makes you want to explore deeper the statement you just made, do so. If it makes you want to change the subject or ignore your feelings, do so. It is important however that you do two things: 1) draw a response from your counselor every 20-30 seconds and 2) cover the four feeling clusters we outlined during training. After ten minutes, I will say, "We can stop now" or knock on the door and the roleplay will be terminated.

After each trainee, I would like you to do three things: 1) refer to the Confederate Checklist to insure that you indeed did cover the four feeling clusters, 2) rate your counselor on the Relationship Questionnaire, and 3) rate your counselor on the 1-99 Accurate Empathy Semantic Differential.

Confederates will be systematically paired with trainees in a counterbalanced design. This will control for any interaction between skill of confederates in playing a role and skill of the counselor (both of which were expected to increase during the training).

Judges

Judges were advanced graduate students in counseling psychology. Judges had in the past all participated as members of empathy training groups. In addition, judges have lead two or more empathy training groups. Judges were trained to use their dependent measures (1-99 Accurate
Empathy Semantic Differential; Frequency Count of Reflective Statements) by listening to audiotaped counseling interchanges, rating them on their dependent measures, and discussing with the E criteria for ratings. It was found that after four hours of training, raters were in fairly close agreement as to rating criteria. Also, the judges were asked to insure that each tape to which they listened contained the four feeling clusters the clients were expected to convey.

Pre-Measure

Prior to training, each trainee completed a ten minute audiotaped roleplay with a confederate client. These tapes were rated to establish the baseline for trainees' ability to reflect feeling.

Measures

Judges Rating Scales: 1) Modification of Truax and Carkhuff's Accurate Empathy Scale (Frankel, 1971) - This is a 99-point semantic differential concerned with the accuracy and quality of the counselor's reflection of client feeling statements (see Appendix D). Scores on this 1-99 scale were transformed to normal deviates before the ANOVAs were performed on the data. 2) Reflective Statement Frequency Count - Judges counted the number of reflective counselor statements made on each of the ten minute tapes. A
reflective statement was defined as one which at a minimum was interchangeable with the client's statement and at a maximum, caused the client to deeper explore his thoughts or feelings. The number of opportunities each trainee has to respond was controlled by the confederate's structuring of the interview.

Confederate Client Rating Scales: 1) Relationship Questionnaire (Frankel, 1971) - This measure was adapted from Truax's 1963 General Therapeutic Relationship Inventory. It consisted of 20 True-False questions about the counselor's responsiveness to the client. The scores on the items were summed to give an overall rating (see Appendix E).

2) Modified Truax and Carkhuff Accurate Empathy Scale (Frankel, 1971) - This is the same 99-point semantic differential concerned with reflection of feeling that the trainees were rated on by the judges (see Appendix D). Scores on this 1-99 scale were transformed to normal deviates before the ANOVAs were performed on the data.

Overview of Procedure

Figure 1 is a comparison of the training sessions given to the respective treatment and control groups.
Each treatment and control trainee (except for those ten subjects in the post-test only condition) underwent three hours of training or placebo training. See Figure 1. Each trainee conducted four taped ten minute interviews - one prior to training and one after each of three training (placebo) sessions - held on Sunday, Tuesday, and Thursday nights respectively. The post-test only subjects conducted one ten minute interview with experienced confederates the night of the final session.

Tapes of the roleplays were randomly presented to three trained judges who were blind to a given trainee's treatment condition. Judges rated trainees on two dependent measures (see Appendix D). Confederate clients rated trainees on two dependent measures (see Appendices D and E). Confederate clients were also blind to a given subject's treatment condition.

Table 1 is an analysis of the content of each treatment condition's training activities.
Trainees in the Microcounseling, Empathy Group, Self-Instruction, and Placebo conditions all participated in 220 minutes of training activities. Trainees in the No Treatment condition participated in only one ten minute roleplay.
RESULTS

**Inter-Rater Reliability of Judges**

The inter-rater reliability of the three judges on Judges' Frequency Count of Reflective Statements was .870. The inter-rater reliability of the judges on the 1-99 Accurate Empathy Semantic Differential was .850. These results suggest high agreement by raters across trainees and training sessions.

**Pre-Training Comparability of Treatment Conditions**

ANOVA performed on pre-training dependent measures indicated that there were no significant differences among treatment conditions on any of the dependent measures prior to training. (F<1; NS on all measures).

**Hypothesis 1**

It was predicted that treatment condition trainees would significantly differ in their post-training ability to reflect client feelings. This prediction would be reflected in a significant Treatment Condition main effect on ANOVA performed on post-training dependent measures. An ANOVA was performed on each of the four sets of post-training dependent measures. These ANOVAs are reported in Tables 2-5.
The main effect of Treatment Conditions was highly significant \((p<.01)\) in all four ANOVAs. These results indicated that there were significant post-training differences among treatment conditions on all four dependent measures.

Neman-Keuls comparisons were performed on the post-training means of the four dependent measures for all treatment conditions. These results are reported in Tables 6-9.

On this dependent measure, the post-training means for trainees in the Microcounseling and Empathy Group conditions were significantly higher \((p<.01)\) than the post-training means for trainees in the Placebo and No Treatment conditions. Post-training means for Self-Instruction trainees were significantly higher \((p<.01)\) than post-training means of No Treatment Ss, but not significantly higher than post-training means for Placebo condition trainees.
On this dependent measure, post-training means for trainees in the Microcounseling and Empathy Group conditions were significantly higher (p<.01) than the post-training means for trainees in the Placebo and the No Treatment conditions. Post-training means for Self-Instruction trainees were significantly higher (p<.01) than post-training means of No Treatment Ss, but not significantly higher than post-training means of Placebo condition trainees.

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Insert Table 8 About Here
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On this dependent measure, post-training means for trainees in the Microcounseling and Empathy Group conditions were significantly higher (p<.01) than the post-training means for trainees in the Placebo and No Treatment conditions. Post-training means for Self-Instruction trainees were significantly higher (p<.01) than post-training means of No Treatment Ss, and significantly higher (p<.05) than post-training means of Placebo condition trainees.

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Insert Table 9 About Here
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On this dependent measure, post-training means for trainees in the Microcounseling condition were significantly higher (p<.01) than the post-training means for trainees in the Placebo and No Treatment conditions. Post-training means for trainees in the Empathy Group condition were significantly higher (p<.01) than post-training means for Ss in the No Treatment condition and Placebo condition trainees.

Summary of Results Concerning Hypothesis 1

It was found that subsequent to training: 1) There were significant differences on all dependent measures between trainees in both control conditions (Placebo and No Treatment) and trainees in the didactic-experiential conditions, Microcounseling and Empathy Group. 2) There were significant differences on three dependent measures between trainees in the Self-Instruction condition and trainees in the No Treatment condition. 3) There were no significant differences on dependent measures among Microcounseling, Empathy Group, and Self-Instruction trainees. 4) The rank order of post-training treatment condition means was uniform across dependent measures - Microcounseling, followed by Empathy Group, Self-Instruction, Placebo, and No Treatment.

Hypothesis 1 was supported in that there were significant differences in post-training dependent measures among treatment conditions. It would seem that both microcounseling and empathy training are effective methods of
rapidly training lay counselors to reflect feeling.

**Hypothesis 2**

It was predicted that the skill acquisition curves would be significantly different among treatment conditions. That is, trainees in the different treatment conditions would learn reflection of feeling at different rates. This would be reflected in a significant Treatment Condition x Session interaction effect on ANOVAs performed on dependent measures. These ANOVAs are reported in Tables 10-13.

In three of these four ANOVAs, the Treatment Condition x Session interaction was significant at the .01 level. In the fourth, the Treatment Condition x Session interaction was significant at the .05 level. These results indicated that there were significant differences among treatment conditions in the rate of skill acquisition. These findings seem to support hypothesis 2.

A visual presentation of the skill acquisition curves for treatment conditions on the four dependent measures can be seen in Figs. 2-5.
It is noted that Microcounseling and Empathy Group trainees evidenced both the most rapid rate of skill acquisition and the highest level of skill acquisition. Trainees in the Microcounseling and Empathy Group conditions exhibited extremely similar acquisition curves. Microcounseling trainees were rated slightly higher on all dependent measures at all phases of training.

Trainees in the Self-Instruction condition exhibited a skill acquisition curve similar to trainees in the Microcounseling and Empathy Group conditions but the level of skill acquisition was considerably lower, although not significantly lower. All of the above trainee groups showed rapid skill acquisition through the first three sessions followed by a leveling off in skill acquisition between Session 3 and Session 4.

The Placebo condition trainees exhibited a nonsignificant gain in reflection over the course of training. Subsequent to the final session, these trainees were rated significantly lower on dependent measures (p<.01) than were trainees in the Microcounseling and Empathy Group conditions.

From examination of Figs. 2-5, it would seem that trainees in the Microcounseling and Empathy Group conditions
acquired virtually the same level of reflecting skill at very
similar rates of acquisition. Trainees in the Self-
Instruction condition acquired less reflecting skill but at a
rate somewhat similar to trainees in the Microcounseling and
Empathy Group conditions.

The terminal level of skill acquisition for Placebo con-
dition trainees did not differ significantly from Ss in the
No Treatment condition on any of the dependent measures.
These results indicated that trainees who rehearsed the role
of counselor in four roleplays were not rated significantly
higher in reflection of feeling than were trainees who
rehearsed the role of counselor once. Practice alone did not
appear to contribute significantly to trainees' acquisition
of reflecting skill.

Hypothesis 3

It was predicted that microcounseling and empathy group
training would be more effective methods for teaching
reflection of feeling than would self-instruction. That is,
Microcounseling and Empathy Group trainees would be rated
significantly higher than Self-Instruction trainees on post-
training dependent measures. This would be reflected in sig-
nificant differences in post-training means between
Microcounseling and Self-Instruction trainees and between
Empathy Group and Self-Instruction trainees.
Heman-Keuls comparisons of post-training means (see Tables 6-9) found the post-training differences between Microcounseling and Self-Instruction trainees and between Empathy Group and Self-Instruction trainees to be in the predicted direction but statistically nonsignificant. This was found for all dependent measures. These findings fail to support Hypothesis 3.

**Hypothesis 4**

It was predicted that microcounseling and empathy group training would be more effective means of teaching reflection of feeling than would placebo training; self-instruction would not be more effective than placebo training in teaching this skill. This would be reflected in significant post-training differences between Microcounseling and Placebo trainees and between Empathy Group and Placebo trainees. Conversely, there would be no significant post-training differences between Self-Instruction trainees and Placebo trainees.

Neuman-Keuls comparisons of post-training means (see Tables 6-9) found the post-training differences between Microcounseling and Placebo trainees and between Empathy Group and Placebo trainees to be highly significant (p<.01). This was found on all dependent measures. The post-training differences between Self-Instruction and Placebo trainees was significant (p<.05) on one dependent measure and nonsignifi-
cantly on the other three. These findings seem to support Hypothesis 4.

Summary of Results

The present study sought to examine the differential effectiveness of three methods of training lay counselors to reflect client feelings. Following three hours of training, it was found: 1) Trainees in both the Microcounseling and Empathy Group conditions were rated significantly higher in reflecting skill than were trainees in the Placebo and No Treatment conditions. 2) Trainees in the Microcounseling and Empathy Group conditions were not rated significantly different from each other in their ability to reflect feeling. 3) Trainees in the Microcounseling and Empathy Group conditions acquired the reflection skill at a rapid rate, a rate significantly more rapid than trainees in the Placebo condition. 4) The skill acquisition rates of the Microcounseling and Empathy Group trainees were not significantly different from each other.
DISCUSSION

Implications of Study for Counselor Training

The results of this study would seem to have relevant implications for the training of helping personnel. Some major findings and their implications follow:

Both microcounseling and empathy group training are effective methods of training small groups of lay personnel in a basic counseling skill. This finding is consistent with previous research (Truax and Carkhuff, 1967; Truax and Silber, 1966; Berenson, Carkhuff, and Myrus, 1966; Carkhuff, 1968; Ivey, 1971; Gluckstern, 1972; Bellucci, 1972). Both methods require relatively modest amounts of space, money, and trained personnel to implement. They are economical in that training can be done in group settings, rather than individually. It would seem that most counselor-training programs, lay or professional, possess the resources to implement either method of training. The choice of training method may depend upon which method could be implemented with greater ease into existing staff and facilities.

Microcounseling and empathy training do not differ significantly from each other in their effectiveness in teaching reflection of feeling. A pre-experiment review of the literature provided no basis for predicting which of these two training methods would be more effective in teaching this counseling skill. This study was seen as exploratory, in
that it was the first known comparison of these two training methods. While these two methods did not differ significantly in efficacy, it was noted that Microcounseling trainees were rated higher than Empathy Group trainees on all dependent measures at all phases of training. The overall direction of this data and the small N involved in the present study would suggest this area of differential effectiveness should be investigated further.

Reflection of feeling can be learned by lay personnel in relatively short periods of time. This would seem to support the idea that lay personnel can be trained successfully in certain basic counseling skills (Carkhuff, 1958; Carkhuff and Berenson, 1967; Kratochivil, 1968; Haase, DiMattia and Guttman, 1970; Ivey, 1971; Bergin and Solomon, 1970). The ability of lay personnel to quickly and effectively learn basic counseling skills coupled with their ability to work with a variety of populations (Appleby, 1963; Glasser, 1965; Magoon and Golann, 1966) suggests that lay personnel, properly trained by helping professionals, may take on an ever-increasing role in the extension of psychotherapeutic services (Sue, 1973; Truax and Carkhuff, 1967; Glasser, 1965; Zunker and Brown, 1966).

Self-Instruction trainees improved considerably in their reflecting skill over the course of training. This result suggests that highly motivated trainees provided with well-
written manuals and opportunities to practice what they read may acquire positive gains in counseling skills. This finding is not supportive of the didactic-experiential advocates (Truax and Carkhuff, 1967; Carkhuff, 1968; Weil and Parrish, 1967) who maintain that predominantly academic training leads to a decrease in level of therapeutic functioning. This finding, however, must be tempered by the fact that post-training skill ratings of Self-Instruction trainees were not significantly higher than those of Placebo trainees.

It would seem that in training helping personnel, self-instruction could be utilized in two ways: a) As the Sole Means of Training - In situations where lack of trained personnel, equipment, or other factors preclude comprehensive supervised training, self-instruction, utilizing well-written manuals, may be a viable training alternative. b) In Combination with Supervised Experiential Forms of Training - Both microcounseling and empathy training place reliance on didactic instructions. Self-instruction seems to be an economical means of learning the written or taped material needed to prepare trainees for their counseling-like experiences. This marriage of didactic and experiential methods of training seems to be most desirable (Matarazzo, 1971; Ivey, 1971).
Placebo trainees, after four roleplays as a counselor, were not rated significantly higher at reflecting feeling than were No Treatment trainees, who received only one such roleplay opportunity. Over the course of four interviews, practice alone did not appear to contribute significantly to the trainees' skill acquisition. In other words, just "playing counselor", without benefit of training, was not enough to cause a growth in therapeutic skills. Supervisor instruction and feedback seem essential to learning counseling skills, even if such trainer-trainee interaction is in the form of programmed manuals. This finding supports the very existence of counselor training programs. It implies that people who desire to become behavior change agents do need supervision and training in order to develop counseling skills (Rogers, 1957; Lewis, 1970; Brammer and Shostrom, 1966; Ivey, 1971). It would also seem to be supportive of attempts to study the efficacy of various counselor-training methods.

The same 1-99 Accurate Empathy Semantic Differential was used by both judges and confederate clients. Judges rated trainees lower than did confederate clients. Both judges and confederates received the same amount and type of training in using this dependent measure. While the difference in rating was not statistically significant, it was consistent over trainees and training sessions. Two explanations for this
discrepancy in rating seem possible: 1) Judges were more advanced in their graduate training than were the confederate clients and may have been more critical of beginners' performances. 2) Judges listened to audiotaped recordings of trainee interviews, while clients received "live" audio and visual input from the trainees. Many counselor skills seem to have both verbal and nonverbal components (Truax and Carkhuff, 1967; Carkhuff, 1968; Brammer and Shostrom, 1968; Ivey, 1971). It is possible that the higher confederate ratings were due to nonverbal components of accurate empathy which the judges could not perceive on audiotaped recordings. It would seem that supervisors and researchers who only "hear" counseling trainees are not getting a complete representation of the trainees' skill level. Videotaped or live observation would provide a more accurate representation of a counselor-trainee's skill acquisition, and consequently, better measurement of a trainee's therapeutic skills.

Trainees in Microcounseling, Empathy Group, and Self-Instruction conditions all evidenced considerable skill acquisition through the first three skill measurements, followed by a leveling off of skill acquisition. More Ss, tested over a greater number of training sessions, would be needed to confirm these skill acquisition rates. However, one could hypothesize that with effective training methods, two hours of intensive training is sufficient to produce sub-
stantial acquisition of reflecting skill by counselor trainees. This could be of benefit to helping professionals with large training commitments and a limited amount of available training hours. In planning lay counselor training programs, it may be sufficient to devote relatively few hours to reflection of feeling. Training could progress quickly to teaching trainees how to integrate reflection with other counseling skills.

Limitations in time, money, and personnel placed limitations on the scope of the present study. Future studies which attempt to deal with differential efficacy of counselor training methods would hopefully employ: 1) a large N, 2) several equivalently trained group leaders, each of whom would train under all treatment conditions, and 3) videotaping of all roleplayed interviews.

Implications of Study for Models of Counselor Training

Microcounseling and empathy group training are techniques representative of the didactic-experiential model of counselor training. Self-instruction is a technique representative of the didactic-academic model of counselor training. The present study would seem to have relevant implications to the issue of which of these two training models is more effective. Some findings of the study and their implications for these counselor training models follow:
Two didactic-experiential methods of training, microcounseling and empathy group training, were found to be effective means of teaching lay personnel reflection of feeling. This result would suggest that the didactic-experiential model of training can be the source of effective counselor-education techniques. This is consistent with previous research (Truax and Carkhuff, 1967; Matarazzo, 1971; Ivey, 1971; Bellucci, 1972).

Two different didactic-experiential methods were found to be effective means of training. This would indicate that trainers can use various combinations of didactic and experiential training activities and still effect significant trainee skill acquisition. Therefore, the didactic-experiential model does not appear to be a rigid model offering only one means of training. It would seem many counselor training methods could be evolved from its framework.

The superiority of the didactic-experiential model over the didactic-academic model was neither confirmed nor denied by the results of the present study. Didactic-experiential trainees were rated significantly higher on post-training reflection than were Placebo trainees. Didactic-academic trainees were not rated significantly higher than Placebo trainees on post-training reflection. This finding would tend to support the didactic-experiential model of training.
However, didactic-experiential trainees were not rated significantly higher on reflection than were didactic-academic trainees. This researcher feels the inconclusiveness of these results could be attributed to either of two reasons.

1) There were several constraining limitations placed on the present study. The small number of trainees, the use of only one trainer, the use of only two didactic-experiential and one didactic-academic training method, the high motivation level of trainees, the short duration of training, the measures involved may all have contributed to the failure of the study to discriminate the differential efficacy of one counselor training model over the other.

2) The categorization of counselor training techniques as didactic-experiential or didactic-academic is extremely arbitrary. In reality, even the most "experiential" of counselor training programs utilize "academic" instructional methods in the form of written manuals, trainee self-instruction, and supervisory interaction (Ivey, 1971; Truax and Carkhuff, 1967). Conversely, even academically-oriented training programs afford roleplay "experiences" to counselor trainees. It would seem that all current counselor training methods are a combination of academics and experience. The labeling of methods as "academic" or "experiential" may have outlived its usefulness as a meaningful distinction of models of counselor training. Rather than categorizing training methods as "aca-
"academic" or "experiential", counselor educators could better spend their time researching which combinations of academic and experiential activities are most effective in the skill training of counselors.

Self-Instruction trainees improved their reflecting skill over the course of training. Self-instruction was viewed as a predominantly academic form of training. It would appear that traditional academic training activities can not be summarily dismissed as harmful or destructive to counselor trainees (Truax and Carkhuff, 1967). Each academic and each experiential training activity, and any combination thereof, must be judged on its research effectiveness.

More studies examining the differential effectiveness of counselor training methods should be done. Only systematic and repeated research will determine which training methods are most effective in training helping personnel. The present study can hopefully be viewed as part of a continuing self-examination by counselors of their own training methods.
REFERENCES


Haase, R. and DiMattia, D. Application of the microcounseling paradigm to the training of support personnel in counseling. *Counselor Education and Supervision*, 1970 (Fall), 12(1), 16-22.


Harvey, L. The use of nonprofessional auxiliary counselors in staffing a counseling service. *Journal of Counseling Psychology*, 1964, 11, 348-351.


Sue, Stanley. Training of "third world" students to function as counselors. *Journal of Counseling Psychology*, 1973, 20, 73-78.


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APPENDIX A

Reflection of Feeling Manual

This was a manual of 26 pages read by trainees in the Self-Instruction condition. It was composed of readings, counselor-client scripts, and problems dealing with empathy and reflection of feeling. Some of the authors drawn upon in this manual are Rogers, Truax, Carkhuff, Lewis, Brammer, and Shostrom.

The following is a representative sample of readings in the Reflection of Feeling Manual.

The Accurately Empathic Therapist

The central ingredient of the psychotherapeutic process appears to be the therapist's ability to perceive and communicate, accurately and with sensitivity, the feelings of the patient and the meaning of those feelings. By communicating "I am with you" and "I can accurately sense the world as you construe it," in a manner that fully acknowledges feelings and experiences, he facilitates the patient's movement toward a deeper self-awareness and knowledge of his own feelings and experiences and their import.

At the higher levels of accurate empathy, the therapist unerringly responds to the client's full range of feelings in their exact intensity, whether he communicates this in the form of "reflection of feeling," "depth reflections," or sensitive "interpretations". The therapist's sensitive matching of his own communication to the intensity of feelings experienced by the client means that his verbal responses will often be more intense than the patient's, because the client may not be able immediately to verbalize the depth and intensity of his anger, despair, or aloneness. At the highest levels of accurate empathy, the therapist's response expands the patient's verbal, gestural and content hints into full-blown, sensitive, but still tentative verbalizations of feelings or experiences. The deeply empathic counselor or therapist is completely attuned to the client's shifting emotional content, and thus senses the major strands of the client's experiences, which he reflects in both his vocal tones and the content of what he
In the words of Rogers and Truax, "To sense the client's bewilderment, anger, love or fear as if it were the therapist's (own) feeling is the critical perceptive aspect of empathic understanding. To communicate this perception in language attuned to the client that allows him more clearly to sense and formulate his feelings is the essence of the communicative aspect of accurate empathy."

When a child tells us, "The teacher spanked me," we do not have to ask him for more details. Nor do we need to say, "What did you do to deserve it? If your teacher spanked you, you must have done something. What did you do?" We don't even have to say, "Oh, I am so sorry." We need to show him that we understand his pain and embarrassment and feelings of revenge. How do we know what he feels? We look at him and listen to him, and we also draw on our own emotional experiences. We know what a child must feel when he is shamed in public in the presence of peers. We so phrase our words that the child knows we understand what he has gone through. Any of the following statements would serve well:

"It must have been terribly embarrassing."
"It must have made you furious."
"You must have hated the teacher at that moment."
"It must have hurt your feelings terribly."
"It was a bad day for you."

A child's strong feelings do not disappear when he is told, "It is not nice to feel that way," or when the parent tries to convince him that he, "has no reason to feel that way." Strong feelings do not vanish by being banished. They do diminish in intensity and lose their sharp edges when the listener accepts them with sympathy and understanding. This is true for adults, as well as children.
APPENDIX B
Ivey's Manual for Reflection of Feeling

The following is a representative example of Ivey's Reflection of Feeling Manual.

Reflection of feeling presupposes attending behavior. Good attending behavior demonstrates to the client that you respect him as a person and that you are interested in what he has to say. By utilizing attending behavior to enhance the client's self-respect and to establish a secure atmosphere, the interviewer facilitates free expression of whatever is on the client's mind.

The following are the three primary types of activities which best characterize good attending behavior:
1. The interviewer should be physically relaxed and seated in a natural posture. If the interviewer is comfortable, he is better able to listen to the person with whom he is talking. Also, if the interviewer is relaxed physically, his posture and his movements will be natural, thus enhancing his own sense of well-being. This sense of comfortableness better enables the interviewer to attend to and to communicate with the client.
2. The interviewer should initiate and maintain eye contact with the interviewee. However, eye contact can be overdone. A varied use of eye contact is most effective, as staring fixedly or with undue intensity usually makes the client uneasy. If you are going to listen to someone, look at them.
3. The final characteristic of good attending behavior is the interviewer's use of comments which follow directly from what the interviewee is saying. By directing one's comments and questions to the topics provided by the client, one not only helps him develop an area of discussion, but reinforces the client's free expression, resulting in more spontaneity and animation in the client's talking.
4. Try to minimize physical movement or any physical activity that might be distracting to the client.
5. Facial expressions should represent how the client's statements and behaviors are affecting you. They should be appropriate to the emotional level of the interchange. A frozen smile or a wooden face does not represent appropriate feeling.

In summary, the interviewer's goal is to listen attentively and to communicate this attentiveness through a relaxed posture, use of varied eye contact, and verbal responses which indicate to the client that he is attempting to understand what the client is communicating. Specific behaviors which may be utilized are the following: 1. Relax
physically, feel the presence of the chair as you are sitting on it. Let your posture be comfortable and your movements natural. For example, if you usually move and gesture a good deal, feel free to do so at this time. Be aware that an overabundance of movement may distract the client from an interchange.

2. Use of eye contact by looking at the person with whom you are talking.

3. Follow what the other person is saying by taking your cues from him. Do not jump from subject to subject or interrupt him. If you cannot think of anything to say, go back to something the client said earlier in the conversation and ask him a question about that. There is no need to talk about yourself or your opinions when you are attending.

4. If you feel your facial expressions following the mood of the conversation this is good. Don't attempt to force your face to smile or frown.

5. Let your voice be natural and conversational.

A final point is to respect yourself and the other person. Ask questions or make comments about things that interest and seem relevant to you. If you are truly interested in what is being said, attending behavior follows automatically. But, remember, the more interested you are, the harder it sometimes becomes to keep yourself quiet and listen to the other person.
APPENDIX C
Placebo Manual

This was a manual of 40 pages composed of excerpts from the book - *Interaction: Readings in Humanistic Psychology*. The readings had nothing to do with counseling or counseling skills.

The following is a representative excerpt from the Placebo Manual:

Clinical practice and the behavioral sciences alike have typically focused on the pathological in their studies of personality and behavior dynamics. While much of crucial importance remains to be learned, there is an abundant empirical knowledge and an impressive body of theory concerning the deviant and the diseased, the anxious and the neurotic, the disturbed and the maladjusted. In contrast, there is little information and even less conceptual clarity about the nature of psychological normality. Indeed, there are even those who argue that there is no such thing as a normal man. there are only those who manage their interpersonal relationships in such a way that others are strongly motivated to avoid them, even by committing them to a mental hospital or a prison, as opposed to those who do not incite such degrees of social ostracism.

This argument has two characteristics. First, it disposes of the issue by simply distributing people along a dimension of pathology. All men are a little queer, but some are much more so than others. Second, it has affinities with the two major ideas that have been brought to bear on the question of what constitutes normal or abnormal behavior: the statistical conception of the usual or the average and the notion of cultural relativism. If pathology is conceived as the extent to which one is tolerated by one's fellows, then any individual can theoretically be described in terms of some index number that reflects the degree of acceptability accorded him. The resulting distribution would effectively amount to an ordering of people from the least to the most pathological. Similarly, if the position on such a continuum are thought of as functions of one's acceptance or avoidance by others, then they can only be defined by reference to some group. The implications here are twofold. First, the conception of pathology is necessarily relativistic, varying from group to group or culture to culture. Second, the
degree of pathology is defined as the obverse of the degree of conformity to group norms. The more one's behavior conforms to the standards of the group, the less one is likely to be subject to social avoidance whereas the more one's behavior deviates from the rules, the greater is the probability of ostracism to the point of institutional commitment.
Accurate Empathy Semantic Differential

**Confederate's Instructions:**
Below you will find a 1-99 scale. Indicate in the appropriate space below where your counselor rated on this scale in terms of accurately and empathically reflecting the feelings you imparted to her in the roleplay.

**Judge's Instructions:**
Below you will find a 1-99 scale. Indicate in the appropriate space where the counselor whose tape you just listened to rated in terms of accurately and empathically reflecting the feelings of the client in the roleplay.

Use the following guidelines for making your ratings:

**score of 1:**
The counselor was extremely inaccurate in reflecting empathically my (the client's) feelings and at times worked against my (the client's) exploring myself (himself) deeper. Even my (the client's) obvious feelings were responded to inaccurately or ignored. Her behaviors (mannerisms, bored voice, inappropriate statements) were distracting and almost always unhelpful in terms of letting me (the client) know she was trying to see my side of the problem.

**score of 50:**
The counselor was sometimes accurate in reflecting empathically my (the client's) feelings and helping me (the client) explore myself (himself) further. Just as often, however, she was inaccurate in reflecting my (the client's) feelings or ignored them. Her behaviors (voice, verbal statements, mannerisms) were sometimes helpful, sometimes not.

**score of 99:**
The counselor was extremely accurate in reflecting empathically my (the client's) feelings. Her reflections enabled me (the client) to more get in touch and explore my feelings and problem. The counselor was always accurate toward my (the client's) obvious feelings and unerringly accurate toward my deep feelings. She was in touch with both
the content and feelings of what I (the client) was expressing. Her behaviors were almost always helpful.

( ) = Judge's Version

On a 1-99 scale, I would rate my counselor, _____________

Trainee _____________
Roleplay  1  2  3  4

or

__________ Confederate

or

__________ Judge
APPENDIX E

Relationship Questionnaire
(Truax, 1968)

The following statements are to be answered true or false. Answer them as they pertain to the counselor you just saw and how she responded to you and the feelings you expressed. (Answers eliciting a positive score are shown below).

T 1. The counselor understands me
F 2. The counselor may understand me but she does not know how I feel.
F 3. She often misunderstands what I am trying to say.
F 4. She usually is not very interested in what I have to say.
F 5. She ignores some of my feelings.
T 6. Sometimes she is so much "with me", in my feelings that I am not at all distracted by her presence.
T 7. Even when I can't say what I mean, she knows how I feel.
T 8. She seems to follow almost every feeling I have while I am with her.
T 9. She usually uses just the right words when she tries to understand how I am feeling.
T 10. She really listens to everything I say.
T 11. Sometimes she is so much "with me" that with only the slightest hint she is able to accurately sense some of my deepest feelings.
T 12. Whatever she says usually fits right in with what I am feeling.
F 13. She gives me advice, when I want her to see how I'm feeling.
F 14. She sometimes cuts me off abruptly just when I am leading up to something very important to me.
F 15. When she sees me she seems to be "just doing a job".
F 16. She is really a cold fish.
T 17. She really wants to understand me, I can tell by the way she asks questions.
T 18. She treats me like a person.
F 19. She seems to be bored by a good deal of what I talk about.
F 20. She probably laughs about the things I have said to her.
APPENDIX F

Script (Confederate)

You are to roleplay a college student who is having hassles with your girlfriend. You and she had a blow-up recently and she said she didn't want to see you again. You walked out of her apartment after calling her a few names. You haven't seen her since. The basis of her distress is that "she can't seem to talk with you anymore". You and she don't seem to be communicating about anything. She maintains you are "taking her for granted".

Within the space of the ten-minute roleplay, I want you to impart four feeling clusters to the counselor. By feeling clusters, I mean 3-4 statements in succession which have the same general feeling behind them.

Example

<table>
<thead>
<tr>
<th>Feeling Cluster</th>
<th>Possible Statements</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anger</td>
<td>&quot;She has no right no boss me around.&quot;</td>
</tr>
<tr>
<td></td>
<td>&quot;She thinks she's so God-darn smart.&quot;</td>
</tr>
<tr>
<td></td>
<td>I really think she played me for a dupe.&quot;</td>
</tr>
</tbody>
</table>

After each feeling cluster, give the counselor a chance to respond by pausing or asking a question such as "What do you think?" or "Am I right?".

The four feeling clusters I want you to communicate to the counselor are:

<table>
<thead>
<tr>
<th>Feeling Cluster</th>
<th>How it relates to this situation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anger</td>
<td>I'm angry at this girl for hassling me and behaving like this.</td>
</tr>
<tr>
<td>Confusion</td>
<td>I don't know what to do. I don't know whether to see her or not. Is the problem really with me?</td>
</tr>
<tr>
<td>Depression</td>
<td>I really feel down. There's just nothing to be happy about.</td>
</tr>
</tbody>
</table>
The thought of never seeing her again is terribly depressing.

Love
I really love her. I care for her.
I really don't want to hurt her.
She means so much to me.

The exact statements you use are up to you. Use ones that seem natural for you. The order the clusters are presented does not have to be the same every time.

In sum, be as spontaneous and responsive to the counselor as possible. However make sure you time yourself so that you can cover all four feeling clusters in ten minutes.
APPENDIX G

Confederate Checklist

Trainee__________________________

Roleplay 1 2 3 4

With this trainee, I communicated the following feeling clusters:

___ 1) Anger at girlfriend.

___ 2) Confusion and bewilderment at what to do next

___ 3) Depression at present situation and for future

___ 4) Love of girlfriend
APPENDIX H
Feedback Sheet for Microcounseling Trainees

(Discuss each point briefly with trainee)

1. Trainee was physically relaxed and seated in a natural position.
2. Trainee initiated and maintained substantial eye contact with client.
3. Trainee used statements which followed directly from what the client was saying.
4. Trainee was relatively free of distracting mannerisms.
5. Trainee used a variety of appropriate facial expressions.
6. Trainee's voice quality and tempo indicated a desire to listen and attend to the client.
7. Trainee reflected the manner (how) the client was communicating. ("You seem to be depressed/hesitant happy, etc." "You are having trouble talking about it.") This was done both verbally, keying on client statements and nonverbally, keying on facial expressions, body movements, etc.
8. Trainee by reflection of feeling facilitated client's movement toward deeper exploration of problem and self.
<table>
<thead>
<tr>
<th>Training activities</th>
<th>Minutes of training</th>
</tr>
</thead>
<tbody>
<tr>
<td>Readings on empathy and reflection</td>
<td>Micro.</td>
</tr>
<tr>
<td></td>
<td>30</td>
</tr>
<tr>
<td>Videotape model observations and discussion</td>
<td>135</td>
</tr>
<tr>
<td>Roleplay with group members and feedback</td>
<td>0</td>
</tr>
<tr>
<td>Feelings discrimination</td>
<td>0</td>
</tr>
<tr>
<td>Roleplay with confederate</td>
<td>40</td>
</tr>
<tr>
<td>Feedback on roleplay with confederate</td>
<td>15</td>
</tr>
<tr>
<td>Unrelated readings</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>220</td>
</tr>
</tbody>
</table>
TABLE 2

Summary of Analysis of Variance of Post-Training Scores on Confederate Client Relationship Questionnaire.

<table>
<thead>
<tr>
<th>Source</th>
<th>df</th>
<th>MS</th>
<th>F</th>
</tr>
</thead>
<tbody>
<tr>
<td>Treatment conditions</td>
<td>4</td>
<td>146.749</td>
<td>16.067**</td>
</tr>
<tr>
<td>Error</td>
<td>45</td>
<td>9.133</td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>49</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**p<.01.

TABLE 3


<table>
<thead>
<tr>
<th>Source</th>
<th>df</th>
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<th>F</th>
</tr>
</thead>
<tbody>
<tr>
<td>Treatment conditions</td>
<td>4</td>
<td>3.034</td>
<td>12.086**</td>
</tr>
<tr>
<td>Error</td>
<td>45</td>
<td>0.251</td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>49</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**p<.01.
**TABLE 4**


<table>
<thead>
<tr>
<th>Source</th>
<th>df</th>
<th>MS</th>
<th>F</th>
</tr>
</thead>
<tbody>
<tr>
<td>Treatment conditions (A)</td>
<td>4</td>
<td>7.240</td>
<td>8.993**</td>
</tr>
<tr>
<td>Subjects/Treatment conditions (B)</td>
<td>45</td>
<td>0.805</td>
<td></td>
</tr>
<tr>
<td>Judges (C)</td>
<td>8</td>
<td>0.51</td>
<td>0.983 (NS)</td>
</tr>
<tr>
<td>AxC</td>
<td>8</td>
<td>0.025</td>
<td>0.488 (NS)</td>
</tr>
<tr>
<td>Error</td>
<td>90</td>
<td>0.051</td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>149</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**p<.01.

**TABLE 5**

Summary of Analysis of Variance of Post-Training Scores on Judges' Frequency Count of Reflective Statements.

<table>
<thead>
<tr>
<th>Source</th>
<th>df</th>
<th>MS</th>
<th>F</th>
</tr>
</thead>
<tbody>
<tr>
<td>Treatment conditions (A)</td>
<td>4</td>
<td>446.165</td>
<td>9.258**</td>
</tr>
<tr>
<td>Subjects/Treatment conditions (B)</td>
<td>45</td>
<td>48.193</td>
<td></td>
</tr>
<tr>
<td>Judges (C)</td>
<td>2</td>
<td>0.487</td>
<td>0.256 (NS)</td>
</tr>
<tr>
<td>AxC</td>
<td>8</td>
<td>0.737</td>
<td>0.387 (NS)</td>
</tr>
<tr>
<td>Error</td>
<td>90</td>
<td>1.902</td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>149</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**p<.01.
TABLE 6
Newman-Keuls Comparisons of Post-Training Means on Confederate Clients' Relationship Questionnaire.

<table>
<thead>
<tr>
<th></th>
<th>Mean</th>
<th>Micro</th>
<th>Emp.</th>
<th>Self-Inst.</th>
<th>Placebo</th>
<th>NT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Micro.</td>
<td>16.50</td>
<td>NS</td>
<td>NS</td>
<td>6.70**</td>
<td>8.40**</td>
<td></td>
</tr>
<tr>
<td>Emp.</td>
<td>16.20</td>
<td>NS</td>
<td>NS</td>
<td>6.40**</td>
<td>8.10**</td>
<td></td>
</tr>
<tr>
<td>Self-Inst.</td>
<td>13.70</td>
<td></td>
<td></td>
<td></td>
<td>5.60**</td>
<td></td>
</tr>
<tr>
<td>Placebo</td>
<td>9.80</td>
<td></td>
<td></td>
<td></td>
<td>NS</td>
<td></td>
</tr>
<tr>
<td>NT</td>
<td>8.10</td>
<td></td>
<td></td>
<td></td>
<td>NS</td>
<td></td>
</tr>
</tbody>
</table>

**p<.01.

TABLE 7

<table>
<thead>
<tr>
<th></th>
<th>Mean</th>
<th>Micro</th>
<th>Emp.</th>
<th>Self-Inst.</th>
<th>Placebo</th>
<th>NT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Micro.</td>
<td>3.24</td>
<td>NS</td>
<td>NS</td>
<td>0.99**</td>
<td>1.25**</td>
<td></td>
</tr>
<tr>
<td>Emp.</td>
<td>3.16</td>
<td>NS</td>
<td>NS</td>
<td>0.91**</td>
<td>1.17**</td>
<td></td>
</tr>
<tr>
<td>Self-Inst.</td>
<td>2.79</td>
<td></td>
<td></td>
<td></td>
<td>0.80**</td>
<td></td>
</tr>
<tr>
<td>Placebo</td>
<td>2.25</td>
<td></td>
<td></td>
<td></td>
<td>NS</td>
<td></td>
</tr>
<tr>
<td>NT</td>
<td>1.99</td>
<td></td>
<td></td>
<td></td>
<td>NS</td>
<td></td>
</tr>
</tbody>
</table>

**p<.01.
### TABLE 8
Newman-Keuls Comparisons of Post-Training Means on Judges' Frequency Count of Reflective Statements.

<table>
<thead>
<tr>
<th></th>
<th>Mean</th>
<th>Micro.</th>
<th>Emp.</th>
<th>Self-Inst.</th>
<th>Placebo</th>
<th>NT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Micro.</td>
<td>16.77</td>
<td>NS</td>
<td>NS</td>
<td>7.53**</td>
<td>8.73**</td>
<td></td>
</tr>
<tr>
<td>Emp.</td>
<td>15.13</td>
<td>NS</td>
<td>NS</td>
<td>5.90**</td>
<td>7.53**</td>
<td></td>
</tr>
<tr>
<td>Self-Inst.</td>
<td>14.50</td>
<td></td>
<td></td>
<td>5.27*</td>
<td>6.47**</td>
<td></td>
</tr>
<tr>
<td>Placebo</td>
<td>9.23</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>NS</td>
</tr>
<tr>
<td>NT</td>
<td>8.03</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*p<.05.

**p<.01.

### TABLE 9

<table>
<thead>
<tr>
<th></th>
<th>Mean</th>
<th>Micro.</th>
<th>Emp.</th>
<th>Self-Inst.</th>
<th>Placebo</th>
<th>NT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Micro.</td>
<td>3.02</td>
<td>NS</td>
<td>NS</td>
<td>0.93**</td>
<td>1.07**</td>
<td></td>
</tr>
<tr>
<td>Emp.</td>
<td>2.97</td>
<td>NS</td>
<td>NS</td>
<td>0.87**</td>
<td>1.02**</td>
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<tr>
<td>Self-Inst.</td>
<td>2.42</td>
<td></td>
<td></td>
<td>NS</td>
<td>NS</td>
<td></td>
</tr>
<tr>
<td>Placebo</td>
<td>2.10</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>NT</td>
<td>1.95</td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

**p<.01.
### TABLE 10

Summary of Analysis of Variance Scores on Confederate Client Relationship Questionnaire.

<table>
<thead>
<tr>
<th>Source</th>
<th>df</th>
<th>MS</th>
<th>F</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Between Ss</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Treatment conditions (A)</td>
<td>3</td>
<td>217.423</td>
<td>6.732**</td>
</tr>
<tr>
<td>Subjects/Treatment conditions</td>
<td>36</td>
<td>32.298</td>
<td></td>
</tr>
<tr>
<td><strong>Within Ss</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sessions (B)</td>
<td>3</td>
<td>283.873</td>
<td>44.408**</td>
</tr>
<tr>
<td>AxB</td>
<td>9</td>
<td>16.584</td>
<td>2.887*</td>
</tr>
<tr>
<td>Error</td>
<td>108</td>
<td>5.744</td>
<td></td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td></td>
<td>159</td>
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</tr>
</tbody>
</table>

*p<.05.

**p<.01.

### TABLE 11

Summary of Analysis of Variance Scores on Confederate Client 1-99 Accurate Empathy Semantic Differential.

<table>
<thead>
<tr>
<th>Source</th>
<th>df</th>
<th>MS</th>
<th>F</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Between Ss</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Treatment conditions (A)</td>
<td>3</td>
<td>3.754</td>
<td>5.176**</td>
</tr>
<tr>
<td>Subjects/Treatment conditions</td>
<td>36</td>
<td>0.725</td>
<td></td>
</tr>
<tr>
<td><strong>Within Ss</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sessions (B)</td>
<td>3</td>
<td>5.162</td>
<td>50.998**</td>
</tr>
<tr>
<td>AxB</td>
<td>9</td>
<td>0.469</td>
<td>4.638**</td>
</tr>
<tr>
<td>Error</td>
<td>108</td>
<td>0.101</td>
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</tr>
<tr>
<td><strong>Total</strong></td>
<td></td>
<td>159</td>
<td></td>
</tr>
</tbody>
</table>

**p<.01.
TABLE 12
Summary of Analysis of Variance Scores on Judges' 1-99 Accurate Empathy Semantic Differential.

<table>
<thead>
<tr>
<th>Source</th>
<th>df</th>
<th>MS</th>
<th>F</th>
</tr>
</thead>
<tbody>
<tr>
<td>Between Ss</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Treatment conditions (A)</td>
<td>3</td>
<td>10.496</td>
<td>4.096*</td>
</tr>
<tr>
<td>Subjects/Treatment conditions</td>
<td>36</td>
<td>2.562</td>
<td></td>
</tr>
<tr>
<td>Within Ss</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sessions (B)</td>
<td>3</td>
<td>11.013</td>
<td>41.145**</td>
</tr>
<tr>
<td>AxB</td>
<td>9</td>
<td>1.404</td>
<td>5.244**</td>
</tr>
<tr>
<td>BxSs/G</td>
<td>108</td>
<td>0.267</td>
<td></td>
</tr>
<tr>
<td>Judges (C)</td>
<td>2</td>
<td>0.173</td>
<td>4.131*</td>
</tr>
<tr>
<td>AxC</td>
<td>6</td>
<td>0.044</td>
<td>1.040 (NS)</td>
</tr>
<tr>
<td>CxSs/G</td>
<td>72</td>
<td>0.042</td>
<td></td>
</tr>
<tr>
<td>BxC</td>
<td>6</td>
<td>0.046</td>
<td>0.929 (NS)</td>
</tr>
<tr>
<td>AxBxC</td>
<td>18</td>
<td>0.017</td>
<td>0.352 (NS)</td>
</tr>
<tr>
<td>Error</td>
<td>216</td>
<td>0.047</td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>479</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*p<.05.

**p<.01.
TABLE 13

Summary of Analysis of Variance Scores on Judges' Frequency Count of Reflective Statements.

<table>
<thead>
<tr>
<th>Source</th>
<th>df</th>
<th>MS</th>
<th>F</th>
</tr>
</thead>
<tbody>
<tr>
<td>Between Ss</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Treatment conditions (A)</td>
<td>3</td>
<td>573.896</td>
<td>4.423*</td>
</tr>
<tr>
<td>Subjects/Treatment conditions</td>
<td>36</td>
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<tr>
<td>Within Ss</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sessions (B)</td>
<td>3</td>
<td>1497.939</td>
<td>80.162**</td>
</tr>
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<td>AxB</td>
<td>9</td>
<td>151.439</td>
<td>8.104**</td>
</tr>
<tr>
<td>BxSs/G</td>
<td>108</td>
<td>18.686</td>
<td></td>
</tr>
<tr>
<td>Judges (C)</td>
<td>2</td>
<td>3.508</td>
<td>2.805 (NS)</td>
</tr>
<tr>
<td>AxC</td>
<td>6</td>
<td>1.060</td>
<td>0.855 (NS)</td>
</tr>
<tr>
<td>CxSs/G</td>
<td>72</td>
<td>1.251</td>
<td></td>
</tr>
<tr>
<td>BxC</td>
<td>6</td>
<td>2.806</td>
<td>1.637 (NS)</td>
</tr>
<tr>
<td>AxBxC</td>
<td>18</td>
<td>1.492</td>
<td>0.871 (NS)</td>
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<tr>
<td>Error</td>
<td>216</td>
<td>1.714</td>
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<tr>
<td>Total</td>
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</tbody>
</table>

*p<.05.

**p<.01.
<table>
<thead>
<tr>
<th>Microcounseling Condition</th>
<th>10 minutes</th>
<th>45 minutes</th>
<th>10 minutes</th>
<th>5 minutes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Taped Instructions</td>
<td></td>
<td>Video-tape Modeling</td>
<td>Roleplay</td>
<td>Feedback</td>
</tr>
<tr>
<td>on Empathy &amp;</td>
<td></td>
<td>of Skill and</td>
<td>with</td>
<td></td>
</tr>
<tr>
<td>Ivey's Manuel</td>
<td></td>
<td>Discussion of Model</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Empathy Group Training Condition</th>
<th>10 minutes</th>
<th>10 minutes</th>
<th>40 minutes</th>
<th>10 minutes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Taped Instructions on Empathy</td>
<td></td>
<td>Discrimination Training</td>
<td>Dyadic Roleplay</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Learning to Interchanges</td>
<td>with</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Label Emotions &amp; Feedback</td>
<td>Confederate</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Self-Instruction Condition</th>
<th>10 minutes</th>
<th>50 minutes</th>
<th>10 minutes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Taped Instructions on Empathy</td>
<td></td>
<td>Read Reflection of Feeling Manual</td>
<td>Roleplay with Confederate</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Placebo Condition</th>
<th>60 minutes</th>
<th>10 minutes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Read Placebo Manual</td>
<td></td>
<td>Roleplay with Confederate</td>
</tr>
</tbody>
</table>

Figure 1. Comparison of Content of Treatment Conditions:
Training Session
Figure 2. Treatment Condition x Session Interaction for Judge's 1-99 Accurate Empathy Scale
Figure 3. Treatment Condition x Session Interaction for Judge's Frequency Count of Reflective Statements
Figure 4. Treatment Condition x Session Interaction for Confederate Client's Relationship Questionnaire
Figure 5. Treatment Condition x Session Interaction for Confederate Client's 1-99 Accurate Empathy Scale