

THE EFFECTS OF CLIENT SEX, COUNSELOR SEX,
AND TYPE OF CLIENT PROBLEM
ON HIGH SCHOOL COUNSELOR FACILITATIVE RESPONSIVENESS
AND DESIRE TO CONTINUE A COUNSELING RELATIONSHIP

BY

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by

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BOUND 1,

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Abstract of Dissertation Presented to the Graduate Council
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By

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Investigations of counselor attitudes toward and treatment of female and male clients consistently have revealed differences and biases according to client sex, including a somewhat negative view of females. Evidence was needed to determine if these biased attitudes resulted in differences of counseling treatment and, if so, to identify the differences in treatment.

Subjects for this investigation were 159 female and 248 male high school counselors employed during 1979-1980 in Colorado public high schools. Each counselor responded to either the female or male client version of one of six simulated client profiles. Profiles included one of six client statements relating to assertiveness, emotionality, grief, independence, non-traditional career choice, or rationality. Counselors rank ordered six counselor responses

according to their perceived helpfulness to the client. Responses were designed to represent the levels of responsiveness according to Wittmer and Myrick's Continuum of Facilitative Responses, (Joe Wittmer and Robert D. Myrick, Facilitative Teaching: Theory and Practice. Santa Monica: Goodyear Publishing Company, Inc., 1974, p. 55). Counselors rated their desire to continue a counseling relationship with the client described in the profile on a five-point Likert type scale. Differences in counselor first choice responses on the basis of client and counselor sex and type of client problem were compared, using a three factor analysis of variance design. Differences in counselor rankings of responses and in ratings of counselor desire to continue a counseling relationship were presented in the form of descriptive matrices.

Contrary to earlier investigations, the high school counselors in this study did not respond to clients according to sex stereotypes except when clients expressed a non-traditional career choice. In addition, counselors indicated their desire to continue a counseling relationship with female and male clients regardless of the type of problem. More specifically, the following conclusions were drawn:

1. The counselors in this study responded with significantly higher facilitative responsiveness to client statements of assertiveness, emotionality, and independence than to client statements of a non-traditional career choice.
2. The counselors responded with essentially the same

facilitative responsiveness to female clients as to male clients.

3. The female counselors responded to clients with essentially the same facilitative responsiveness as male counselors.
4. The counselors in this study tended to respond to clients with relatively low facilitative responsiveness on all simulated profiles.
5. The counselors ranked responses in a way that did not resemble the theoretically correct rankings. Rankings appeared to have been affected by client sex, counselor sex, and client problem.
6. Both counselor sex and client problem seemed to affect counselor ratings of their desire to continue a counseling relationship.
7. Counselors in this study tended to desire to continue a counseling relationship with all clients, regardless of the type of problem.
8. Counselors most desired to continue a counseling relationship with clients who made statements of a non-traditional career choice. However, counselors were significantly less facilitative with those clients than with clients who made statements of assertiveness, emotionality, and independence.
9. Counselors indicated greater desire to continue a counseling relationship with both female and male clients who expressed female sex stereotyped counseling problems.

10. Counselors indicated less desire to continue a counseling relationship with both female and male clients who expressed male sex stereotyped counseling problems.

CHAPTER I
INTRODUCTION

Rationale

Beliefs about, attitudes toward, and counseling treatment of female and male clients by professional counselors are frequent subjects of investigation in contemporary counseling literature. The results of these investigations consistently reveal differences and biases in counseling treatment according to client sex (Chesler, 1972; Fabrikant, 1974; Abramowitz, 1977). The identification of specific differences in treatment, as well as the effects on clients, particularly using high school counselors as subjects, is explored minimally in the literature (McEwen, 1975).

The counseling profession's interest in examining sex biases within itself parallels the interest of most major American institutions during the last ten years in taking steps to equalize all facets of individual institutional operation. Changes relative to assumptions about, and policies relating to women's roles, are occurring in education, politics, religion, business and finance, and health. Some specific changes are Title IX, affirmative action employment practices, ordination of women, changes in social security and credit laws, maternity leave and benefits, the ratification of state equal rights amendments, and the ratification of the federal Equal Rights Amendment in 34 states. These changes demonstrate

that, on a daily basis, American institutions are making and reacting to radical changes in laws and regulations designed to equalize opportunities for both women and men. The necessity for changing many state and federal laws validates the contention that biases do exist. These changes, however, do not necessarily imply attitudinal changes among citizens toward the roles of women and men; but they do seem to indicate that the issue of sex bias in our society is no longer hypothetical, but is recognized as being very real, especially in the legal sense.

It seems logical that counselors, as members of our society, would possess the same cultural stereotypes and prejudices as American society in general. Also, it seems logical to conclude that counselors might treat women and men differently, both as clients and as colleagues (Feidel, 1970; Guttman, 1972; Katrin, 1976; Gardner, 1971).

Chesler (1972) found, in her study of National Institute of Mental Health statistics for the years 1960-1968, and also among studies of small psychiatric populations, that a greater proportion of females than males become psychiatric patients and stay in treatment for a longer period of time. Fabrikant (1974) studied therapists and their clients and found that female patients stayed significantly longer in therapy than males. Brandon (1972), in a review of psychiatric practices, concluded that women were more likely than men to (1) be admitted to psychiatric hospitals, (2) stay longer in hospitals, (3) be referred to a psychiatrist, and (4) be defined by therapists as ill or suicidal. Brandon reported that

United Kingdom doctors were consulted for psychoneurotic disorders three times more often by women than by men.

Why are women defined by counselors as more ill and more in need of therapy than are men? What are counselor attitudes toward the women they see as clients? In many instances, counselors both demand a woman's adherence to a stereotyped role and, at the same time, evaluate as unhealthy the behaviors of that role. Broverman, Broverman, Clarkson, Rosenkrantz, and Vogel (1970) found that mental health clinicians agreed strongly on the behaviors and attributes characterizing a healthy man, a healthy woman, or a healthy adult. The clinicians rated behaviors and characteristics judged healthy for an adult (and thus reflecting the ideal standard of health) to be the same as those judged healthy for men. Behaviors and characteristics judged healthy for women were distinctly different and significantly less healthy than those of men and adults. Slechta (1971) interviewed a small sample of professional counselors who maintained that they did not ascribe to sex role differences and found marked similarities between the terms they used to describe the "typical" woman and terms used to describe neurotic symptoms. Neulinger, Schillinger, Stein, and Welkowitz (1970) found that 114 therapists, in describing the optimally integrated person, used sex stereotyped qualities such as dominant and achieving to describe mental health in men and nurturance and abasement to describe mental health in women. In a survey of mental health workers, Fabrikant, Landau, and Rollenhagen (1972), and Fabrikant (1974) found their subjects' views of women were negative when subjects

were asked to use an adjective check list to select adjectives describing females and males.

From a review of the literature, it would seem that counselors have a different view of the nature and needs of women and men in therapy, and a negative view of women in general. It seems inevitable that counselors will convey personal attitudes and biases to their clients during the therapy session. Oliver (1975), McEwen (1975), and Tanney and Birk (1976), in their reviews of research in counseling women, concluded that both female and male counselors exhibit differential counseling responses based on client sex and respond negatively to female and male clients who exhibit non-traditional behaviors and life choices.

Facilitative conditions of accurate empathy, genuineness, and unconditional positive regard have been documented as being not only conducive to, but also essential for, optimum personal and psychological growth within a client (Carkhuff & Berenson, 1967). Because these conditions stress honesty and authenticity on the part of the counselor, it appears likely that sexist attitudes of counselors will be communicated during therapy and will affect the therapy process. Research is limited on the specific effects of sexist thinking on the facilitative process and on the therapeutic effects of such counseling, particularly when high school counselors are used as subjects.

Petro and Hansen (1977) found that both female and male high school counselors demonstrated more empathy when responding to case studies of females. Donahue and Costar (1977) found that high school counselors, when given case studies of females and males, chose

occupations for girls that (1) paid less, (2) required less pre-requisite education, and (3) were more closely supervised. The authors concluded that counselors found it socially acceptable for girls to have an education as long as they stayed in dependent, supervised roles. Olesker and Balter (1972) and Hill (1975) found that counselors showed more empathy when judging people of the same sex than when judging people of the other sex. Hill, Tanney, Leonard, and Reiss (1977) found that counselors' reactions to female clients varied according to counselor sex and type of client problem. Similarly, Stewart (1977) found that counselor empathy seemed to be influenced by the content and affect of client statements and was different for female and male clients. Thomas and Stewart (1971) found that, although female counselors gave higher acceptance scores to both non-conforming and conforming clients, counselors regardless of sex rated conforming goals as more appropriate than non-conforming goals for females.

More information is needed on how counselor sex bias influences the actual counseling process, particularly the facilitativeness of responses. Accurate information is needed so that bias can be measured accurately, and methods to eliminate it be developed.

Need for the Study

Because the majority of the research to date has focused on clinical or university counselors as subjects, it seemed important to utilize high school counselors as subjects to determine what sex biases might be present (McEwen, 1975). Secondly, because the research in which high school counselors are used as subjects

generally examines sex bias in career counseling, it was important to determine in what other ways sex bias is manifested (Donahue & Costar, 1977; Thomas & Stewart, 1971). Finally, it was the investigator's opinion that high school counselors have opportunities for significantly more association with more persons (nearly all students who attend high school) than counselors within any clinical or post-secondary educational setting; therefore; it was vital to identify high school counselor biases. Additionally, because there is research evidence that counselors do not respond as positively toward clients who exhibit non-traditional behaviors and life choices, it was important to determine to what degree this behavior exists among high school counselors (Oliver, 1975; McEwen, 1975; Tanney & Birk, 1976; Haccoun, Allen, & Fader, 1976). It was felt, too, that results may have implications for counseling practice and counselor preparation, as well as for future research.

Purpose of the Study

The purpose of the study was to identify the differences in levels of facilitative responses by high school counselors to female and male high school clients expressing specific counseling problems. A second purpose was to identify high school counselor desire to continue a counseling relationship with female and male clients who express specific counseling problems. More specifically, an attempt was made to answer the following questions:

1. Is the facilitative responsiveness of high school counselors affected by the sex of their high school clients?

2. Is the facilitative responsiveness of high school counselors affected by the sex of the counselor?
3. Is the facilitative responsiveness of high school counselors affected by the nature of their high school clients' problems?
4. On the average, do the rankings of counselor responses to female clients resemble the theoretically correct rankings for specific counseling problems?
5. On the average, do the rankings of counselor responses to male clients resemble the theoretically correct rankings for specific counseling problems?
6. Are counselor ratings of their desire to continue the counseling relationship with female clients affected by the sex of the counselor or by the nature of the client's counseling problem?
7. Are counselor ratings of their desire to continue the counseling relationship with male clients affected by the sex of the counselor or by the nature of the client's counseling problem?

Procedure

The effects of client sex, counselor sex, and client problem on the facilitative responsiveness of counselors was studied. Six simulated profiles were developed upon which client sex was manipulated. All public high school counselors in Colorado were invited to participate in this study by rank-ordering given counselor responses to simulated client profiles. Each counselor also was asked to rate her/his desire to continue the counseling relationship with the client described in the simulated profile by indicating

the degree of desire to continue on a five-point Likert scale (Appendix B).

Subjects' rankings of responses were rated according to their levels of facilitation, using the Continuum of Facilitative Responses (Wittmer & Myrick, 1974, p. 55) (Appendix A). Differences in first choice responses were tested, using a three-factor analysis of variance design and the .10 level of significance (Winer, 1971). In addition, rankings were tabulated in descriptive matrices, and mean rankings were reported. Ratings from the Desire to Continue the Counseling Relationship Scale were tabulated in descriptive matrices, and mean ratings were reported. For the purpose of describing demographically the final sample, personal and professional data were gathered on the subjects (Appendix D).

Definition of Terms

Sexism: the assumption that traits and capacities are determined by sex and that the sexes differ decisively from one another, usually coupled with the belief in the inherent superiority of the male sex over the female sex (Gardner, 1971, p. 710).

Sex role (stereotype): the group of traits and capacities generally agreed upon as appropriate for one sex to display, but not appropriate for the other sex to display. A sex role stereotype is a rigid belief that traits, characteristics, and behaviors generally associated with one sex are rarely or never appropriate for the other sex (Stewart, 1977, p. 7).

Facilitative response: a response given a client by a counselor which to a greater or lesser degree moves the client toward behaviors which enhance her/his personal and psychological growth. Facilitative responses were defined operationally by ratings on the Continuum of Facilitative Responses (Appendix A).

Desire to Continue the Counseling Relationship: a measure of a counselor's personal preference and wish to work further with a client. The desire reflects the counselor's wish rather than the client's need. The operational definition consisted of ratings on a five-point Likert-type scale with "1" defined as "strongly desire not to continue," and "5" defined as "strongly desire to continue" (Appendix B).

Content categories: Content categories refer to the six types of simulated client statements contained in the profiles in this investigation. The six content categories were defined as follows (English & English, 1970):

1. Assertiveness: a client behavior in which the client stands up for her/his legitimate interpersonal rights in such a way the the rights of others are not violated.
2. Emotionality: a client behavior characterized by the client's sensitivity to the feelings and experiences of self and others.
3. Grief: a client behavior characterized by feelings of severe sadness, sense of loss and mourning, or sorrow over a real life loss.

4. Independence: a client behavior characterized by self-reliance, individualism, and autonomy, and accompanied by such action.
5. Non-traditional career choice: a client behavior characterized by consideration and/or actual choice of a career atypical of the client's sex role.
6. Rationality: a client behavior characterized by logical and systematic thinking, and a focus on the cognitive rather than the emotional decision making processes.

Delimitations and Limitations

The investigator chose to delimit the study in various ways. Each delimitation limited the possible conclusions and generalizations that could be made from the results of the study. Delimitations and the consequent limitations were as follows:

1. The Continuum of Facilitative Responses, although designed from documented knowledge about facilitative process, lacks reliability and validity studies when used to evaluate counselor facilitative responsiveness. Therefore, raters were used to evaluate responses for plausibility and authenticity as counselor responses and for accuracy of intended content.
2. The Continuum of Facilitative Responses is grounded in client-centered, Rogerian theory. The continuum was chosen because of the amount of research conducted on client-centered, Rogerian techniques, and because no alternative theory has been developed which might be more appropriate in counseling women.

3. The Desire to Continue the Counseling Relationship Scale was developed specifically for this research. Although it lacked reliability and validity studies, it was designed as a Likert scale.
4. Of the many ways of examining the effects of sex biased attitudes on the counseling process, this study was designed to examine only counselor facilitative responsiveness and desire to continue the counseling relationship. Therefore, it was not possible to generalize results of this study to effects of sex bias on other components of the counseling process.
5. Subjects were three or four year public high school counselors and were expected to vary widely in age, years of experience, and professional preparation.
6. Because subjects were from the state of Colorado, results were most applicable to Colorado. The further away from the population, the less generalizable the results.

Summary

Increasing numbers of studies of counselor attitudes toward the women and men with whom they counsel reveal the existence of stereotyped beliefs about the nature of women and men and about the different definitions of mental health for each. Evidence of biased beliefs made it logical to assume that counselors might convey their biases to clients during counseling sessions, and that female and male clients might receive differing treatment during counseling.

This study attempted to measure possible differences in high school counselor facilitative responsiveness and desire to

continue the counseling relationship based on client sex, counselor sex, and client problem. High school counselors were mailed simulated profiles of high school students and were asked to rank order given counselor responses. Differences in first choice responses were tested, using analysis of variance techniques. Counselor rankings of responses were tabulated in descriptive matrices. Counselor ratings of their desire to continue the counseling relationship were tabulated in descriptive matrices.

CHAPTER II REVIEW OF LITERATURE

This chapter summarizes the available research results on the prevalence of sexism and stereotyped beliefs about sex roles in society and within the counseling profession. Research is reviewed on sexism confronting the young, cultural sex role stereotypes, psychological effects of sexism, sexism in counseling theory and practice, and six specific counseling problems. The chapter also includes research on the facilitative conditions, their nature and effectiveness, as well as the influence of sexist thinking and beliefs on the delivery of therapeutic conditions.

Sexism Confronting the Young

Evidence of the success with which adults transmit sexual stereotypes to their children is apparent when the concepts held by children as young as pre-school age are examined. Kuhn, Nash, and Bruckner (1978) studied the sex role concepts of children, ages two and three, through a series of time-spaced interviews and story completions. Interviews were time-spaced in recognition of the short attention spans of children and in order to eliminate the children's fatigue. Analysis of the children's responses to questions and to story completions revealed that they possessed substantial knowledge of appropriate sex role behavior prevailing in our culture. The children demonstrated their knowledge by assigning stereotyped roles to the female and

male characters in the stories. Another finding revealed that as children began to recognize their gender as a permanent, unchangeable facet of themselves, they began to value positively this aspect of self (their sex) and to devalue what they perceived as not self (the other sex). Findings of research, discussed later, seem to indicate that a change in this process occurs as children enter school. Boys continue to value their own sex, while girls begin to learn to devalue the female sex, but to value the male sex.

Parents are the primary reinforcers of behavior which is deemed appropriate for young children to display. Fagot (1978) studied the influence of the sex of a toddler on the parental reactions to that toddler. Toddler children and their parents were observed interacting within their own homes. Forty-six different child behaviors were studied, as were the parental reactions to each behavior when displayed by both girls and boys. Nineteen possible parent reactions were identified prior to the observations and were categorized as either positive, negative, or neutral. Child behaviors were categorized as sex preferred, that is, for which sex the behavior is deemed appropriate. Female sex preferred behaviors included play dolls, ask for help, and dress up. Male sex preferred behaviors included play with blocks, manipulate objects, and play with transportation toys.

Results of observations revealed that parents reacted significantly more favorably to a child when the child engaged in same sex preferred behavior, and were more likely to give a negative response to cross sex preferred behaviors. Girls were given more

negative responses by parents when they engaged in large, motor activities, and more positive responses when they engaged in adult oriented, dependent behavior. Fagot concluded that parents allowed boys to explore objects and learn about their environment with less chance of criticism than they allowed girls these behaviors. Girls, on the other hand, were given more positive feedback when they asked for help or tried to help adults with a task, while boys were discouraged from asking for help.

Many additional reinforcers of sex stereotyped behavior are encountered by children when they enter the educational system. Reinforcement comes in the form of differing teacher treatment of girls and boys, textbook content, school staffing patterns, and opportunities. Feminist groups and parent groups in many cities have analyzed the content of current textbooks at all grade levels and have generally agreed on the sexism evident within the books. The manner in which girls and boys are portrayed, their appropriate activities, and their potential as adults and young adults are patterned after sex role stereotypes. Boys are portrayed as active doers and helpers, while girls are portrayed as passive watchers and helpees (Sadker, Sadker, & Simon, 1973). These textbooks teach children that it is the role of boys and men to lead, make decisions, be inventive, and to test themselves in dangerous situations. It is the role of girls and women to follow, carry out decisions made for them, and to watch and applaud inventive and brave boys and men.

Stereotyped roles are further imprinted on the minds of children when they observe the staffing patterns of the school which they attend. Sixty-seven percent of their teachers are women--those who follow and carry out administrative decisions; 79% of elementary and 97% of secondary school principals, and 99% of school superintendents are men--those who lead and make decisions (Sadker et al., 1973).

As children are taught that girls and boys are quite different in their capabilities and in their expected behavior, they begin to regard the differences as qualities with either positive or negative value (Koblinsky, Cruse, & Sugawara, 1978). Specifically, children begin to feel that characteristics ascribed to males are positive and more desirable, while characteristics ascribed to females are negative and less desirable. In a study of elementary children, lists of stereotypic items were generated by one group of fifth graders and used in stories given another group of fifth graders to read (Koblinsky et al., 1978). Both masculine sex typed and feminine sex typed characteristics were used in describing both females and males. When questioned later on story content, both male and female children remembered more of the masculine sex typed characteristics of male characters and more of the feminine sex typed characteristics of female characters. All subjects were found to be unlikely to remember feminine traits of male characters. It was concluded that children used sex role stereotypes as an organizational framework in their reading comprehension. The ease with which children rejected atypical traits of both sexes was evident.

The preceding studies seem to indicate that children, at a young age, exhibit knowledge of sex role stereotypes which have been taught and reinforced by their parents and educators. In addition to their having the ability to identify appropriate sex typed behaviors, young people experience a gradual decline in their regard for female behavior and a parallel increase in their regard for male behavior. Do similar attitudes and beliefs exist among adults?

Cultural Sex Role Stereotypes

Fernberger (1948) identified a persistence among college students to maintain stereotypes concerning sex differences, even after he lectured to 271 undergraduates and graduate students that the assertion of sex differences was generally unproven in experimental research. A few days after the lecture he gave the students a series of sentences with the sex of the subject of the sentence omitted, and asked the students to fill in the blank with "male" or "female." Student responses indicated a high degree of stereotyped beliefs about women and men. Men were described by students as more intelligent, more crude, more dependent, and possessing an all around superiority. Women were described as talking too much, less passionate, more sensitive, and not liking to fight.

Sherriffs and Jarrett (1953) asked college students to classify 58 adjectives as distinctly male or distinctly female and found agreement between men and women, both with respect to behaviors and characteristics which they imputed to females and males, as well as to the values they placed on these qualities. The authors concluded:

There are very few behaviors and attributes not uniformly ascribed by both men and women to one or the other of the sexes. It would seem virtually no behavior or quality escapes inclusion in either a male or female "stereotype" and that these stereotypes are the same whether held by men or women. (p. 161)

Further evidence of stereotypes held by the population and of the differential evaluation of males and females was reported by McKee and Sherriffs (1957). They instructed 178 undergraduates to "indicate a position which most clearly describes your view of the relative over-all worth, or merit of men and women." Over 50% of the males and nearly 70% of the females responded that men are somewhat to greatly superior to women. This finding illustrated that significantly more subjects thought more highly of males than of females and that women thought very poorly of themselves. McKee and Sherriffs commented on this finding: "The content of the self conceptions of men and women will very likely reflect the differences in the esteem with which the two sexes are regarded" (p. 371).

Firm beliefs about sex appropriate behavior and traits were further illustrated by Sherriffs and McKee (1957). They instructed female and male undergraduates in an introduction to psychology course at the University of California to check adjectives from Sarbin's Adjective Check List of 200 adjectives which were "in general true of men" and also those "in general true of women." Favorable adjectives assigned significantly more often to men by both men and women were grouped according to similar meaning. The first grouping of adjectives included easy-going, informal, and frank, and seemed to imply a straightforward, extroverted social

style. The second grouping included thorough, industrious, steady, logical, and sharp witted, and seemed to portray rational competence and overall ability. The third grouping included ambitious, courageous, dominant, independent, and dynamic, and seemed to portray energy, action, and effectiveness.

Unfavorable adjectives assigned significantly more often to men by both men and women seemed to be mild extremes of the favorable adjectives and included boastful, stubborn, restless, and mischievous. Overall, men were described by both females and males in a positive way as competent, intelligent, stable, but also somewhat cold human beings.

Favorable adjectives assigned significantly more often to women by both women and men were grouped according to similar meaning. The first grouping of adjectives included poised, well-mannered, and modest, and seemed to emphasize social propriety and graciousness. The second grouping included gentle, kind, understanding, and sentimental, and implied warmth and caring. The third grouping included artistic, religious, and dreamy, and alluded to a spirituality.

As with men, the unfavorable adjectives ascribed to women were related to the favorable, although many of the unfavorable adjectives listed, particularly those listed by women, indicated relatively "neurotic" behavior due to excessive emotionality. Those unfavorable adjectives included submissive, touchy, fearful, emotional, confused, and anxious.

In a similar study, Rosenkrantz, Vogel, Bee, Broverman, and Broverman (1968) utilized a questionnaire with 122 bipolar items to determine how college students described a typical adult male, a typical adult female, and themselves. One pole for each of the 122 items had previously been defined by students as "socially desirable." Results of student responses confirmed not only that sex role stereotypes were clearly defined, but also that the roles were held in complete agreement by females and males. Both females and males agreed that more characteristics and behaviors stereotypically associated with men were socially desirable than characteristics associated with women. The final finding: self concepts of women and men were very similar to their respective stereotypes, that is, women held negative values of their worth relative to men.

It seems logical that decision making in the business and industrial world would be in accordance with sex stereotypes held by the general public (Dipboye, Arvey, & Terpstra, 1977). Rosen and Jerdee (1974) explored the influence of sex role stereotypes on the personnel decisions of bank supervisors. A total of 95 bank supervisors attending a summer institute were predicted to make administrative decisions in which sex role stereotypes would work to the disadvantage of women in banking. Administrative decisions made by the supervisors, based on hypothetical case studies of female and male bank employees, indicated that discrimination against women was pervasive. Bias was demonstrated

in every situation including promotion, professional development, and supervisory opportunities. Furthermore, in situations where the desirability or appropriateness of particular administrative decisions was not clear, the subjects depended on preconceived stereotypes to make those decisions. They relied on their own prejudices and/or widely held societal expectations; they did not base decisions on the merits of the individual.

It is clear that very distinct sex role stereotypes do exist among adults. In addition, both women and men consistently, and nearly unanimously, agree on the content of those stereotypes. The male stereotype is one of independence, rational competence, and strength, while the female stereotype is one of dependence, social competence, and irrational emotionality. Both women and men view the male stereotype as positive, relative to the negative and virtually neurotic female stereotype. How do these beliefs and rigid stereotypes affect the self concepts of women and men? Are there measurable psychological consequences to women and to men from this dichotomous thinking?

The Psychological Effects of Sexism

The negative valuation of the female stereotype was mentioned briefly in the previous two sections (Koblinsky et al., 1978; McKee & Sherriffs, 1957; Rosenkrantz et al., 1968). An additional component of the research conducted by Sherriffs and McKee (1957) consisted of instructing the undergraduates to check off each

adjective from Sarbin's adjective check list that they felt to be descriptive of themselves.

The most noticeable characteristic of the lists of adjectives ascribed to self significantly more often by men and women was a large discrepancy in the numbers of adjectives selected by women and men. Men selected 10 positive adjectives and only three negative adjectives. Women generated a list of 21 positive adjectives and 19 negative adjectives. Men described themselves favorably as aggressive, rugged, self confident, and wise, and unfavorably as absentminded, quarrelsome, and stern. Women described themselves favorably as generous, honest, kind, poised, sincere, and tactful. Equally as often, women described themselves unfavorably as confused, excitable, immature, meek, submissive, and undependable. The negative view women had of themselves was clearly evident.

Related conclusions were reached when McKee and Sherriffs (1959) asked a new group of undergraduates to check adjectives describing "what you'd ideally like to be like," "how you really are," "your ideal woman or man," and "how you think the ideal woman or man would be described by the opposite sex." Male undergraduates selected a larger number of favorable adjectives than did female undergraduates when describing what the other sex wanted in an ideal mate. Women chose a larger number of unfavorable adjectives than men to describe their real self. Women believed men wanted them to possess favorable feminine characteristics to a much greater degree than favorable masculine characteristics. Men believed women wanted their ideal

man to exemplify masculinity, "but also much that society alleges to be feminine" (McKee & Sherriffs, 1959, p. 360).

Several conclusions emerged from these findings. Apparently, women and men in this study felt that men had more freedom in the characteristics they were allowed to possess, that is, men were and believed they were allowed to have both favorable male and favorable female characteristics. Conversely, appropriate female characteristics were strictly defined. They not only included a large number of unfavorable female characteristics, but also excluded favorable male characteristics. This narrow definition of females was illustrated further by the fact that males used none of the following adjectives to describe their ideal woman: aggressive, daring, dominant, forceful, and rugged.

One must wonder what are the consequences to women of maintaining their inferiority by denying within themselves any characteristics which might be defined as "masculine." Intellectual development has been found to be one area of female development that is hindered by conforming to social sex role expectations. Baruch (1974) conducted several longitudinal studies of gain and loss in children's intelligence. She found that the children of both sexes who were least likely to gain in intelligence with a concurrent gain in chronological age were those highest in the trait of "femininity," as measured by psychological tests. Those children most likely to gain in intelligence, with a concurrent gain in chronological age, were those highest in "emotional independence."

While emotional independence is a trait encouraged in boys, it is neither approved of or encouraged in girls. Consequently, Baruch found that girls and boys with average intelligence continued to gain in intelligence with age, as did bright boys. Only bright girls became "less bright," or significantly slowed in intellectual development, with age. Baruch (1974) stated that bright girls are not encouraged to be emotionally independent or to fulfill their intellectual potential, for if they develop a high degree of competence, they risk being considered masculine. If girls do not develop the competence of which they are capable, they meet one female sex role criterion. But, girls learn to devalue themselves by denying the competence they possess. Low self esteem is related to perceiving oneself as having "feminine" characteristics such as non-competence and passivity (Baruch, 1974; Williams & King, 1976). High self esteem is related to perceiving oneself as having "masculine" traits, such as competence and ability.

Parental reinforcement during early childhood promotes the development of independence which provides the basis for achievement motivation. The behaviors of boys which parents tend to reinforce lead directly to the development of independence. Girls, on the other hand, are reinforced for dependent behavior which destines them to minimal motivation to achieve. Females are taught to view their esteem according to "affiliation achievement." They learn to value themselves not for what they accomplish or for the progress they have made, but from whom they have gained approval and affection (Levine, Kamin, & Levine, 1974).

Frankel (1974) studied the relationship between achievement and self concept by instructing 97 female undergraduates and alumni of Northwestern University and of Lake Forest College to use the semantic differential to describe themselves, and to describe women in general. Responses of subjects led to the conclusion that non-goal oriented women have lower self concepts and view themselves as less dynamic and active. Goal oriented women have higher self concepts, senses of self worth, and view themselves as more dynamic and active. Furthermore, a positive self concept, in conjunction with non-traditional attitudes regarding femininity and appropriate sex role behavior, is significantly related to achievement and goal oriented behavior. Likewise, a negative self concept, in conjunction with traditional attitudes regarding femininity and appropriate sex role behavior, is significantly related to non-goal oriented behavior. It would appear that in order for women to hold themselves in higher regard, they must, to some degree, develop more of their intellectual potential and incorporate certain "masculine" sex role traits, such as independence and achievement, into their own sex role (Williams & King, 1976).

Although it is clear that achievement is related to positive self concepts in both females and males, girls and women exhibit significant internal and external resistance to situations in which they must compete with males. Horner (1969) and Lavach and Lanier (1975) have identified a "motive to avoid success" (M-s) among girls and women when in competitive situations with males.

Lavach and Lanier instructed high achieving black and white girls in grades seven to 10 to create imaginative stories after giving them Thematic Apperception Test cues of competitive situations. Analysis of the girls' stories, in which success for female characters would involve direct competition with males, revealed a strong motive among subjects to avoid success for their female characters. Adolescent girls seem to anticipate many negative consequences from their success in relation to boys. Although high achieving girls understood and accepted the importance of doing well in school, many felt success in school would bring negative personal and social consequences, and therefore avoided success when in competition with boys. Lavach and Lanier concluded that the M-s is not a desire to fail, not a seeking of failure because of expected positive consequences from failure, but an inhibition of achievement directed behaviors by the expectation of negative social consequences.

In research with college women possessing high intellectual ability, Horner (1969) identified the same motive to avoid success. In a test situation, two-thirds of the male subjects performed better when in competition with females than they performed when alone. In contrast, two-thirds of the female subjects performed worse when in competition with males than they performed when alone. In addition, significantly higher test anxiety scores for women than for men were recorded during the competitive situation. Horner concluded that women will demonstrate their intellectual

potential fully only when not in competition with men. It appears that reinforcement for competitiveness and achievement that men receive as they grow up serves them well in the competitive circumstances of adult life.

Miller and Mothner (1971) have compared the attitudes toward women in our society to characteristics of other unequal relationships throughout history. They describe the characteristics of the "dominant" and "subordinate" groups according to who has the power. They also describe predictable patterns of behavior for both groups and state that "all relationships that are irrationally unequal share characteristics that lead to profound psychological results" (p. 768).

The authors assert that the dominants:

1. are tied to and need the subordinates.
2. negatively label the less powerful group, or sometimes elevate the subordinates (e.g., "no woman can be trusted," or "thank heaven for little girls").
3. obscure the true nature of the unequal relationship by rationalizing or employing false explanations for the relationship (e.g., "women are meant to be passive, submissive, and docile" and therefore secondary).

The less powerful group, or the subordinates, on the other hand:

1. are tied to and need the dominant group.
2. are concerned with their survival and consequently avoid direct resistance to any destructive treatment. (Consequences

to women of any resistance can be economic hardship, social ostracism, or psychological isolation.)

3. absorb many of the untruths told by the dominants (e.g., believe in and perform appropriate sex role behavior).

It seems clear that the unequal relationship between men and women in our society has historical precedent, and that interaction among unequals follows a predictable pattern. Both the more powerful dominants (males) and the less powerful subordinates (females) lose much in the inequitable arrangement. According to Miller and Mothner, males tend to lose their humanness and compassion, while defending their beliefs and behavior at all costs. Females, while living in dissonance between what feels healthy and what they know to be socially acceptable, fear retribution for any efforts toward creating a more fulfilling existence and more equal relationship. Heide (1971) summarized the dilemma:

If it is good for men to be curious, independent, problem solving, policy making, and adventurous, it is good for people; if it is good for women to be sensitive, compassionate, caring, patient, and intuitive, it is good for people. (p. 9)

Where do counselors and the counseling profession belong in these patterns of beliefs and interaction? Do they too accept, and therefore promote, harmful sex stereotypes?

Sexism in Counseling Theory and Practice

Examination of the existence of sexist psychological theory, counselor preparation, and counseling practice has occurred only in recent years. Regan (1975) reviewed the report of the American Psychological Association (APA) Task Force on Sex Bias and Sex

Bias and Sex Role Stereotyping in Psychotherapeutic Practice. Two thousand female therapists were asked to identify areas of sex bias within the profession. The therapists drew their conclusions from the experiences of female clients who were dissatisfied with their former therapists. Clients reported that their former therapists tended to promote traditional sex roles despite the client's expressed desire to change. Therapists accomplished this by

advocating marriage or perfecting the role of wife, deprecating the importance of a woman's career, and using a woman's attitude toward child bearing and child rearing as an index of her emotional maturity. (Regan, 1975, p. 186)

In a follow-up report, the National Advisory Council on Women's Educational Programs (1977) identified three important areas of bias: (1) the expectations for women and devaluation of women by their therapists, (2) the sexist interpretation and use of psychoanalytic concepts by therapists, and (3) the response to women clients as sex objects, including the seduction of female clients by male therapists.

Prior to APA's enumeration of biases within the counseling profession, Chesler (1972) described several basic premises she felt were shared by most practicing clinicians: (1) only men could be mentally healthy, due to the existence of a double standard of mental health and treatment for women and men; (2) women needed to be mothers, and children needed exclusive female parenting. Consequently, mothers were responsible for child behavior problems such as neurosis and criminality; and (3) inappropriate or socially acceptable sexual behavior was always female initiated, that is,

incest was a result of a female child's seduction of her male parent, and prostitution was a woman's aggressive revenge.

It seems logical that counselors, as members of our sexist society, will share similar sex role stereotypes and biased beliefs. Evidence validating this assertion was demonstrated by Broverman, Broverman, Clarkson, Rosenkrantz, and Vogel (1970). A sex role stereotype questionnaire was used which consisted of 122 bipolar items, with one pole of each item characterized as typically masculine, the other as typically feminine (Rosenkrantz et al., 1968). Thirty-eight of the items classified in previous research as "stereotypic" were used in the present study. On 27 of the 38 stereotypic items, the masculine pole was judged to be more socially desirable (male-valued), and on the remaining 11 stereotypic traits, the feminine pole was the more socially desirable (female-valued).

Seventy-nine clinicians, 33 female and 46 male, were given the 122-item questionnaire with one of three sets of instructions. Clinicians were to describe a healthy, mature, socially competent adult (sex unspecified), man, or woman, by marking the appropriate end of the pole. Only the stereotypic items which represented highly consensual differences between women and men, as perceived by lay people, were analyzed.

Several results were obtained. First, male clinicians and female clinicians responded consistently in the same way. Second, clinicians as a group, strongly agreed on the behaviors and attributes which characterized a healthy man, a healthy woman, or a healthy adult. Thirdly, clinicians rated socially desirable

masculine characteristics healthy for men more often than they rated them healthy for women. Only about half of the socially desirable feminine characteristics were considered healthy for women more often than they were considered healthy for men. The authors stated:

On the face of it, the finding that clinicians tend to ascribe male-valued stereotypic traits more often to healthy men than to healthy women may seem trite. However, an examination of the content of these items suggests that this trite-seeming phenomenon conceals a powerful, negative assessment of women. For instance, among these items, clinicians are more likely to suggest that healthy women differ from healthy men by being more submissive, less independent, less adventurous, more easily influenced, less aggressive, less competitive, more excitable in minor crises, having their feelings more easily hurt, being more emotional, more conceited about their appearance, less objective, and disliking math and science. This constellation seems a most unusual way of describing any mature, healthy individual. (Broverman et al., 1970, pp. 4-5)

Clinicians clearly accept the sex role stereotypes prevalent in our society and, by so doing, help to perpetuate the stereotypes. The authors theorized that the double standard of health for women and men originated from an "adjustment" theory of health:

For a woman to be healthy, from an adjustment viewpoint, she must adjust to and accept the behavioral norms for her sex, even though these behaviors are generally less socially desirable and considered to be less healthy for the generalized competent, mature adult. (p. 6)

Results similar to those reported by Broverman et al. (1970) were obtained by Fabrikant (1974). Therapists were asked to respond to an adjective check list describing sex role characteristics as applied to either the female or male. Significant agreement was found in female and male therapist descriptions of the male as aggressive, assertive, bold, breadwinner, chivalrous,

crude, independent, and virile. Male therapists added achiever, animalistic, attacker, competent, intellectual, omnipotent, powerful, and rational. Female therapists added exploiter, ruthless, strong, unemotional, and victor.

In describing the female, both female and male therapists agreed on chatterer, decorative, dependent, dizzy, domestic, fearful, flighty, fragile, generous, irrational, nurturing, over-emotional, passive, subordinate, temperamental, and virtuous. Male therapists added manipulative and perplexing. Female therapists added devoted, empathic, gentle, kind, sentimental, slave, and yielding.

The words were grouped by the therapists with respect to their positive and negative values according to society. Male therapists rated 71% of the male words as positive, but only 30% of the female words as positive. Similarly, female therapists rated 67% of the male words as positive, and only 32% of the female words as positive.

The existence of a double standard of mental health applied by counselors to women and men is clear from the research. Counselors also have been shown to ascribe to the same sex role stereotypes as the general public--stereotypes which are primarily ones of power for men, and primarily ones of powerlessness for women. A question is posed by Levine et al. (1974): "Can we not accept the probability of differences between the sexes without assigning a demeaned position to the female?" (p. 329).

In addition to the presence of well defined sex role stereotypes present among counseling practitioners, numerous feminist

writers have criticized research methodology and biased interpretations of research findings (Kasten, 1972; Kronsby, 1971; Torrey, 1971; Fields, 1973; Chesler, 1972). Silveira (1973) identified examples from comparative psychology to illustrate research bias and poor methodology. She stated that in comparative psychology research, when female and male animal behavior is the same, different value laden words are used to describe each. When female and male animal behavior is different, unwarranted value laden words are used to imply that the male behavior is superior. Thus, female animal behavior is defined as different from and inferior to male animal behavior. Silveira contended that male bias in research methodology leads to:

Poor experimental methods--the questionable statistics, biased observations, misclassification of data, and poorly defined and untestable concepts. Use of the male as the model for what is human--thereby explaining only male behavior, treating women as error or deviance, and ignoring women's articulation of our own experience. The construction of theories with little factual foundation and the ignoring or failing to look for facts which disconfirm the theory. An addiction to word magic--turning every description of female and male behavior into an assertion of male superiority. Refusal to go beyond lay stereotypes to look more deeply into known sex differences or to explore the possibility of an underlying sameness--the result here being a fractionated psychology, with numerous mini-theories and sets of unassimilated data. (p. 16)

The research has indicated that counselors describe healthy female behavior and healthy male behavior in stereotyped terms that parallel the terms of lay persons, that counselors negatively value stereotyped female behaviors, and that methodological bias in research casts doubt upon any conclusions that can be drawn. It would logically follow that counselors possessing such biases

might treat their female and male clients differently. Do psychiatric statistics reveal differences in the psychiatric treatment females and males receive?

Chesler (1972), in a summary of National Institute of Mental Health statistics for the years 1960-1968, found that a greater proportion of females than males became psychiatric patients and stayed in treatment for a longer period of time. Specifically, in 1968, women comprised 59% of the population in general psychiatric wards, 60% in private hospitals, 50% in state and county hospitals, and 54% in outpatient clinics. The number of female patients increased from 479,167 in 1964, to 615,112 in 1968--a growth of nearly 136,000 patients. By 1968, 50,363 more women than men were psychiatrically hospitalized and treated in public facilities. The number of women in psychiatric wards increased nearly 40,000 from 1968 to 1969, while the number of men increased fewer than 10,000 from 1968 to 1969.

Brandon (1972) found that women were more likely to (1) be admitted to psychiatric hospitals, (2) stay longer in hospitals, (3) be referred to a psychiatrist, and (4) be diagnosed by therapists as ill or suicidal. These findings indicate that women populate psychiatric facilities in disproportionate numbers.

Levine et al. (1974) state that certain diagnoses which are not sex-linked by definition are applied overwhelmingly to women. Those diagnoses are schizophrenia, affective psychoses, and psychoneuroses. The authors assert that 60-75% of all outpatients

are women. This finding seems incongruent with the morbidity and mortality rates for most childhood disorders which are significantly male dominated (Levine et al., 1974).

A contention can be made that counselors do not "know" women. Evidence exists as to male counselors' lack of knowledge about female body functioning, sexuality, menstruation, pregnancy, childbirth, and menopause (Sherman, Koufacos, & Kenworthy, 1978). Biological knowledge is fundamental to working with female clients, and it would be easy for a counselor to make serious errors in evaluating clients when not informed on current research findings.

Responses to the Sherman et al. (1978) questionnaire revealed that 18% of the therapists studied either agreed or were not sure whether rape victims are somewhat seductive. Twenty-six percent of male therapists did not know that most women selecting abortions do not experience serious psychological consequences. Seventy percent of male therapists were either neutral about or thought marriage or its prolongation is an important goal in therapy for women. Fifty-five percent of males either did not know or agreed that it is preferable for women with young children to be at home. Seventy-one percent of therapists felt that the cure of frigidity is an important goal for female clients, even though the concept of "frigidity" and its "cure" is being questioned by many other therapists.

Other studies demonstrate that, even in initial interviews, the presenting problems of women and men are defined differently

but follow predictable sex stereotypes (Abramowitz, 1977; Hill, Tanney, Leonard, & Reiss, 1977; Garai, 1970). Collins and Sedlacek (1974) reviewed the ratings by counselors of 565 female and 645 male clients seen at the counseling center, University of Maryland, from June, 1970, to June, 1971. The authors discovered that there were systematic differences in the way counselors perceived female and male clients and diagnosed their counseling concerns. Males were more likely to be rated as having vocational-educational problems than were females. Females were more often rated as having emotional-social problems.

Nowhere has there been more criticism directed at psychotherapeutic theory relative to women than at the psychoanalytic concepts of Sigmund Freud. Feminist psychoanalytically trained therapists, in particular, have shared their insights and anger concerning the concepts promulgated upon them throughout their long training. Many therapists believe, though, that the counseling profession does not readily respond to criticism (Levine et al., 1974):

We in the profession frequently have not dealt with crucial issues raised by our detractors, but rather have vilified, maligned, or worse, made fun of these serious critics. They have been called inadequate, love-starved, queer, radical, ugly, disturbed--we have (just) tended to stop short of applying psychopathological labels to them. Perhaps it is time to pay attention to the message and overlook the medium. (p. 327)

Many feminists feel that psychotherapy epitomizes the dominant-submissive relationship in which women find themselves in this

society, and that the acquisition of personal power is not a goal for women in therapy (Silveira, 1973; Whiteley, 1974; Walstedt, 1972):

Psychotherapy is an unproven and expensive tyranny of one individual over another, supposedly in an effort to "help," but often to the detriment of the recipient. It is an intransitive and hierarchical relationship in which the therapist is defined as a person able to understand the patient, but not the reverse. The term "therapy" implies illness and a need for "treatment"--that something is wrong with the person who seeks it. At its best, it may not harm, but it is always disrespectful. There is no way to use the terms "therapist" and "patient" that does not put the latter at a disadvantage. (Tennov, 1973, p. 107)

Freud proposed that a girl's relationship with her father and all men was affected by her biological deficiencies, specifically, the lack of a penis. She would, during her life, attempt to correct her clitoral inferiority by acquiring a penis or, if not possible, a child. From a woman's envy of the penis emerged her inborn traits of passivity, narcissism, and masochism (Levine et al., 1974).

Freud believed that the "normal" woman was unable to sublimate, and was characterized by a lack of moral sense, intellectual inferiority, selfishness, emotional bias, and a weaker sexual instinct. To be a normal woman in Freud's opinion was to be a far less than adequate human being (Levine et al., 1974).

In addition to the many criticisms one can direct at Freud's clientele, his research methodology, and his personal maladjustments, it is important to note that he gave no consideration to the social and cultural conditioning under which women were to conduct their lives, that might have partially explained their behavior (Levine et al., 1974).

Freud viewed assertiveness in women, for example, as neurotic and believed that non-neurotic assertiveness could be achieved by women only in their becoming mothers. Thus, when a strong and forceful woman was seen clinically, her strength was often ascertained as her illness (Kasten, 1972). Assertiveness in women, while rewarded economically and culturally in some few instances, is disdained psychologically. There is some truth in Freud's theory that women who were assertive had made "masculine" identifications, but the reasons for this were sociological and cultural, not biological.

Once we dismiss Freud's view of women as biologically deprived creatures, we can be quite clear that women who identify with males or envy males do so because of the social and political advantages which accrue to males in our society, and because of their awareness that males do not have to internalize such painful and inconsistent prohibitions as do females. The concept of "penis envy" can thus be decontaminated of its invidious biological comparisons predicated by Freud; it can then be viewed as any other mechanism in which preoccupation with alleged inferiority is present. The lack of penis, in brief, has become for some women a symbol of their general feelings of unacceptability and powerlessness. (Kronsky, 1971, pp. 90-91)

Sexism in psychological theory is pervasive. Even contemporary humanists have incorporated sexism into theories which logically would require the exclusion of sexist beliefs (Kasten, 1972). Many of Abraham Maslow's assumptions about human potential were predicated in his belief that masculinity and femininity were basic dichotomies. His phrase "feminine creativeness" implied an unchangeable, genetic quality that existed in women. Maslow theorized that self actualization took place by way of femaleness

or maleness, preceding general human self actualization. That is, one must be a healthy "femaleness-fulfilled" woman or "maleness-fulfilled" man before human self actualization. Maslow stated that all men were capable of self actualization, while only intelligent women had such a capability (Kasten, 1972). Thus, intelligence in women was equivalent to masculinity in general.

The existential, or Rogerian, counselor is committed to the belief that the counselor primarily helps the client attain her or his own personal version of happiness. Counselor values are not to be introduced into the therapy process:

And it is in keeping with the psychologist's typically ivory tower, introspective naivete concerning the real world lack of commitment to radical societal change, which would eliminate many sources of human misery. (Kasten, 1972, p. 41)

The insistence on treating women for individual solutions to a sexist society is an effective way to avoid making any structural changes in society.

Research indicates that the diagnosis and treatment women receive from counselors follow predictable patterns. A larger number of women are psychiatric patients than are men, and women tend to stay in treatment for longer periods of time (Chesler, 1972; Brandon, 1972; Levine et al., 1974). Some diagnoses which are not sex linked by definition are applied disproportionately to women (Levine et al., 1974; Abramowitz, 1977; Collins & Sedlacek, 1974). Male counselors, in particular exhibit a lack of knowledge about female biological functioning and research on women (Sherman et al., 1978). The sexist premises of several counseling theories were briefly reviewed and

were found to promote both the concept of inferiority of women and the double bind facing women to choose between appropriate social behavior or mental health. Most theories were found to exhibit a lack of consideration of the social and cultural conditioning to which women are subjected (Kronsky, 1971; Levine et al., 1974).

How do these biases, general misinformation, and lack of knowledge about women become translated into the actual counseling process? Is there evidence that counselor sex stereotyped beliefs affect the presence and quality of therapeutic conditions required for positive client change? If so, what are the ways in which therapy is affected, and what need is there for further investigation?

Facilitative Conditions and Sexism

Although there is clear evidence that counselors accept societal sex role stereotypes and a double standard of mental health for women and men, it is not yet clear how counselor biases affect the actual components of the counseling process. This section reviews literature on the facilitative conditions and the effects of client sex on the facilitative conditions.

The goal of counseling is to "facilitate" the process of psychotherapeutic change and constructive personality change. These changes imply change in the personality structure of the client, both superficially and internally, in a way which counselors would agree means integration, less internal conflict, more eagerness for living, and change in behavior away from immature to mature (Rogers, 1967).

There are several conditions which seem to be necessary to initiate constructive personality change. When given together, they appear to be sufficient to begin that process. The conditions are genuineness, unconditional positive regard, and empathy.

Genuineness

Genuineness requires that the counselor be, within the counseling relationship, a congruent, genuine, integrated person, and deeply her or himself (Rogers, 1967). The greater the degree to which the counselor is congruent in the relationship, the greater will be the indications of movement in the client, and the greater the degree of constructive personality change in the client during therapy (Rogers, Gendlin, Kiesler, & Truax, 1967). The importance of genuineness is in its promotion of feelings of trust and openness in the client (Altmann, 1973).

Unconditional Positive Regard

To the extent that the counselor experiences a warm acceptance of every facet of the client's life as being a valid part of that client, the counselor is experiencing unconditional positive regard. Unconditional positive regard means caring for the client as a unique individual, allowed to have her or his own feelings and experiences (Rogers, 1967). The greater the degree of unconditional positive regard for the client in the counseling relationship, the greater will be the indications of the client's participation in the process of therapy and her or his consequent personality change (Rogers et al., 1967).

Empathy

The counselor experiences empathy when an accurate, empathic understanding of the client's cognizance of the client's individual experience is both felt and communicated by the counselor. The counselor perceives the client's personal world as if it were the counselor's own, while never losing the "as if" property. When the client's world is so clear to the counselor, the counselor can communicate her or his understanding of what is known to the client, as well as an understanding of what is not clearly known to the client (Rogers, 1967). The greater the degree of accurately empathic understanding demonstrated by the counselor toward the client, the greater will be the client's involvement in the process of therapy and her or his consequent personality change (Rogers et al., 1967). Furthermore, accurate empathy plays a vital role in determining whether clients will continue or terminate counseling after the initial interview with the counselor (Altmann, 1973).

Genuineness, unconditional positive regard, and empathy are referred to as the facilitative conditions. They are the counselor offered conditions which "move" the client toward positive growth and change. It has been demonstrated that the presence of these conditions is necessary for optimum client growth and change, regardless of the counselor's theoretical orientation (Mickelson & Stevic, 1971; Truax, 1971; Altmann, 1973; Truax, 1963).

Client self disclosure is crucial to the client's movement in therapy. The depth and extent of client self disclosure is

dependent on the genuineness, unconditional positive regard, and empathy communicated by the counselor:

In all patient and non-patient groups thus far studied with the exception of juvenile delinquents, the depth and extent of self disclosure during therapy is significantly and positively related to degree of improvement. (Truax, 1971, p. 352)

Because client self disclosure is so imperative to the client's improvement during therapy, it is clear that the facilitative conditions, offered at the highest degree possible, are essential.

Truax (1971) reviewed the findings from a five-year research program studying the facilitative conditions and their effects, with outpatient neurotics and hospitalized schizophrenics as subjects. Data revealed that high levels of facilitative conditions during therapy were related to patient improvement, while lower levels were related to patient deterioration.

Effect of Sex and Six Specific Counseling Problems on Facilitative Conditions

There is a dearth of research on counseling younger girls, from elementary school into high school (McEwen, 1975). The research which has been conducted with these age groups is primarily research on career counseling, hence its selection as one content category for this investigation. Results reveal a clear pattern of counselor discrimination against girls considering a "masculine" career, that is, a non-traditional career for females (Schlossberg & Pietrofesa, 1974).

However, analysis of data from various vocational interest inventories in which sex norms were not used revealed very similar

vocational interest patterns for females and males (Prediger & Hanson, 1973). This finding probably comes much closer to reality than do the highly divergent interest patterns for females and males produced by vocational interest inventories normed by sex. The authors concluded:

The data accumulated so far suggest that the sex differences currently found in interest inventory items, scores, and reporting procedures may simply be an unfortunate legacy from an era that took traditional sex roles for granted. (p. 96)

Abramowitz (1975) found that women aspiring to medical school evoked stern judgments from counselors. Counselors labeled the women as "less psychologically adjusted." Thomas and Stewart (1971) played tapes for counselors of high school girls choosing either a deviate or conforming career goal, as defined by sex role stereotypes. Female counselors gave higher acceptance scores to both deviate and conforming clients than did male counselors. But high school counselors, regardless of sex, rated conforming goals as more appropriate than deviate. In addition, high school counselors, regardless of sex, rated female clients with deviate career goals to be more in need of counseling than female clients with conforming goals.

Donahue and Costar (1977) found that high school counselors, when given case studies of female and male high school students, chose occupations for females that (1) paid less, (2) required less pre-requisite education, and (3) were more closely supervised than occupations chosen for males. Even though counselors sometimes

chose careers requiring formal education for females, they seldom chose a career that paid well, or was supervisory in nature. It appeared that counselors felt it was socially acceptable for females to have an education as long as they stayed in dependent, supervised roles; in other words, as long as they did not use their education (Donahue & Costar, 1977).

Counselors consistently rate behaviors of assertiveness, independence, and rationality as positive and desirable male qualities (Broverman et al., 1970; Fabrikant, 1974; Kasten, 1972). Females who behave assertively, independently, or rationally, however, are viewed by counselors as exhibiting inappropriate and "masculine" behavior.

The full and open expression of emotions is considered by counselors to be positive and desirable female behavior (Broverman et al., 1970; Fabrikant, 1974). Males who openly express their emotions, particularly emotions of grief or sadness, are viewed by counselors as displaying inappropriate and "feminine" behavior. It was felt that the selection of these specific content categories might help to elicit sex biased responses from the subjects of this investigation.

The limited research on the relationship between client sex and counselor empathy yields conflicting results. In some studies (Hill, 1975; Olesker & Balter, 1972), counselors at all levels of experience demonstrated less empathy with opposite sex clients than with same sex clients. Freeman and Stormes (1977) found that

clients were more willing to accept negative feedback when they received it from a same sex counselor. Petro and Hansen (1977) and Whalen and Flowers (1977) found that both female and male counselors demonstrated more affective sensitivity, that is, empathy, to male referents than to female referents. The authors theorized this was possibly due to the counselors' belief that males are more reluctant to share their feelings and thus engender a stronger motivation on the part of the counselor to listen more closely. Hill (1975) reported that both female and male clients expressed more satisfaction with a counseling session with a female counselor than with a male counselor. Because female and male counselors exhibited no behavioral differences in their treatment of clients, apparently female counselors were simply perceived as more empathic.

Summary

Research on the facilitative conditions of genuineness, unconditional positive regard, and empathy identifies the necessity for the existence of the conditions within the therapy session in order for maximum client growth to occur. How client sex affects the presence and degree of facilitative conditions is much less clearly understood. The research findings suggest that client sex does affect counselor behavior during counseling sessions. There is a need to examine more specifically how client sex affects the facilitativeness of counselors.

CHAPTER III
DESIGN AND PROCEDURES

This study was designed to examine the effects that the sex of a client, sex of a counselor, and type of client problem have on the facilitative responsiveness of a high school counselor and on the counselor's desire to continue a counseling relationship with a client. Specifically, an attempt was made to answer the following null hypotheses and research questions:

- Ho₁: There will be no difference between the mean facilitative responsiveness of counselors toward female clients and the mean facilitative responsiveness of counselors toward male clients.
- Ho₂: There will be no difference between the mean facilitative responsiveness of female counselors toward clients and the mean facilitative responsiveness of male counselors toward clients.
- Ho₃: There will be no difference in the mean facilitative responsiveness of counselors between client profiles.
- Q4: On the average, do the rankings of counselor responses to female clients resemble the theoretically correct rankings for specific counseling problems:

- Q5: On the average, do the rankings of counselor responses to male clients resemble the theoretically correct rankings for specific counseling problems?
- Q6: Are counselor ratings of their desire to continue the counseling relationship with female clients affected by the sex of the counselor or by the nature of the client's counseling problem?
- Q7: Are counselor ratings of their desire to continue the counseling relationship with male clients affected by the sex of the counselor or by the nature of the client's counseling problem?

One of six simulated profiles of high school clients was mailed to all high school counselors employed in Colorado during the 1979-1980 school year. Each counselor was asked to rank order a list of six counselor responses, from most to least helpful, as they pertained to one simulated client's profile. In addition, each counselor was asked to indicate the degree to which the counselor desired to continue a counseling relationship with the client described in the profile.

Differences in first choice responses were tested, using analysis of variance techniques. Counselor rankings of responses were tabulated in descriptive matrices as were counselor ratings of desire to continue a counseling relationship.

Sample

All Colorado high school counselors who were employed in three or four year public high schools during 1979-1980 were invited to participate in this investigation. This sample included 563 counselors, of whom 232 were female and 331 were male.

One of the six simulated profiles was mailed to six groups of approximately 94 counselors (39 female and 55 male). Thus, approximately 47 counselors (19 female and 28 male) were mailed the "female client" version of one of the six profiles, while the remaining 47 were mailed the "male client" version of the same profile.

Profiles were designed to require a brief response time in order to encourage participation in the investigation. However, the profiles were number coded by order of mailing, in the event that a follow-up letter was required. A cover letter was enclosed in the mailing to invite the response of subjects (Appendix C). The letter emphasized the brevity of response time and identified a specific date for return of the completed profile. Of the 563 counselors invited to participate in this investigation, 410 (72.8%) responded. Of those 410 responses, 407 were usable and included 159 female counselors and 248 male counselors.

Several categories of personal and professional data were gathered on each subject (Appendix D). The personal data sheet

was detached from the rest of the instrument when completed and returned to insure the anonymity of respondents. Data were summarized in the form of frequency distribution tables in order to describe demographically the final sample (Appendices E through H).

Counselor ages ranged from 23 to 66, with an overall mean age of 42.4 years (Appendix E). Mean age for female counselors was 41.8 years, and mean age for male counselors was 42.8 years. Over one-third of the respondents were in the age range 31 to 40 and another one-third, 41 to 50. Nearly 20% were 51 years or older, and less than 9% were 30 years or younger.

High school counseling experience ranged from one to 31 years, with an overall mean of 10.5 years (Appendix F). Mean years of experience for female counselors was 9.1 and for male counselors, 11.4. Over half the respondents had from one to 10 years of counseling experience; nearly one-fourth, 11 to 15 years; and nearly one-fourth, 16 years or more.

Approximately 87% of the respondents held at least a master's degree and over 10%, a specialist or doctorate. Less than 4% of the respondents held only a bachelor's degree (Appendix G).

Nearly one-fifth of the respondents held a Colorado Type A, bachelor's degree teaching certificate and over 57%, a Type B certificate (master's degree in counseling, plus three years school counseling experience). Less than 6% held a Type E (master's

degree in counseling, plus two years alternative counseling experience), and less than 2% were qualified for certification but had not applied (Appendix H). Almost 17% answered "other" which included a Type D administrative certificate or "life" endorsement in counseling.

Procedure

The Colorado School Counselors Directory (CSCA, 1979) was used to obtain names and mailing addresses of subjects. This directory was the most comprehensive and current listing available, of Colorado counselors. Within the directory counselors were listed alphabetically by school, school district, and county. Each public high school counselor listed was mailed a package containing four enclosures: cover letter, personal data sheet, one simulated profile, and postage-paid pre-addressed envelope.

Profiles were randomly assigned to counselors in the following manner (Appendix I). Beginning on page one of the directory, the first male counselor listed was mailed the male version of profile one; the second male counselor was mailed the female version of profile two; and so on, alternating the version of profiles in ascending order so that the sixth male counselor was mailed the female version of profile six. The seventh male counselor was mailed the female version of profile one; the eighth male counselor was mailed the male version of profile two; and so on,

alternating the version of profiles in ascending order so that the 12th male counselor was mailed the male version of profile six. Beginning with the 13th male counselor, and with every 13th male counselor after that, the assignment of profiles to counselors repeated the pattern just described. This procedure assured that an equal number of male counselors was mailed each version of all profiles.

The first female counselor listed was mailed the female version of profile six; the second female counselor was mailed the male version of profile five; and so on, alternating the version of profiles in descending order so that the sixth female counselor was mailed the male version of profile one. The seventh female counselor was mailed the male version of profile six; the eighth female counselor was mailed the female version of profile five; and so on, alternating the version of profiles in descending order so that the 12th female counselor was mailed the female version of profile one. Beginning with the 13th female counselor, and with every 13th female counselor after that, the assignment of profiles to counselors repeated the pattern just described. This procedure assured that an equal number of female subjects was mailed each version of all profiles.

Instruments

Six simulated profiles of high school clients were developed to measure possible differences in counselor responses based on client sex, counselor sex, and client problem (Appendix J). The

two versions of any one profile were identical except for client sex. Client sex was designated by randomly assigning a hypothetical common female or male name to versions of the profile.

Profiles included client name, client statement made in counseling, test data, and grade level. Following the profile information were six counselor responses designed to portray the six possible levels of responding found on the Continuum of Facilitative Responses (Appendix A). The Desire to Continue the Counseling Relationship scale followed each profile and counselor responses. Instructions for completing all parts of each profile were written directly on the profile (Appendix J).

Client Profiles

Information included in the profiles and held constant for all profiles consisted of a grade level of 12th grade, an I.Q. score of 110, a verbal percentile ranking of 75, and a percentile ranking of 72 in mathematics. Test scores were written to fall within the band one standard deviation above the mean on the normal curve and to describe a high school senior with somewhat above average academic skill and intellectual ability.

Six content categories of client statements were included in profiles to provide a varied assortment of possible client statements, as well as to gather data on the possible differences in counselor responses toward specific client problems. The statements

were written to represent high school client statements from actual counseling sessions.

The categories selected were ones similar to those which have been used in previous research examining sex bias among counselors in clinical and college or university settings: (1) assertiveness (Broverman et al., 1970; Chesler, 1972; Kasten, 1972); (2) emotionality (Broverman et al., 1970); (3) grief (Broverman et al., 1970); (4) independence (Broverman et al., 1970); (5) non-traditional career choice (Thomas & Stewart, 1971; Donahue & Costar, 1977); and (6) rationality (Broverman et al., 1970) (Appendix K).

Previous research had revealed that counselors regarded the characteristics of assertiveness, independence, and rationality as appropriate male stereotyped behaviors, while emotionality and grief were regarded as appropriate female stereotyped behaviors. Career choices were considered appropriate when they followed sex stereotypic patterns. It was felt that the selection of these content categories might elicit existing sex biased responses from the subjects in this investigation.

The language used in the client statements was as sex neutral as possible to insure that the statement, whether made by a female or male client, was plausible. Each statement was evaluated for authenticity as a client statement and for accuracy of intended content, by one doctoral level counselor in private practice and two doctoral level counselor educators.

The order of presentation of the client profiles was randomized, using a table of random numbers. The same order was used for both versions of profiles.

Continuum of Facilitative Responses

The six hypothetical counselor responses following each client profile were written to represent the six levels of responses on the Continuum of Facilitative Responses (Wittmer & Myrick, 1974, p. 55) (Appendix A). The levels, ascending from most facilitative to least facilitative, are defined as (1) reflecting or understanding of feeling, (2) clarifying or summarizing, (3) questioning, (4) reassuring or supporting, (5) interpreting or analyzing, and (6) advising or evaluating. The continuum was selected by the investigator as a way to evaluate the level of facilitation of counselor responses to specific client problems and to the same problems, when experienced by a female and male client.

The responses were written to appear as plausible counselor responses to client statements made in actual counseling sessions and to portray accurately the content of each of the six levels of responses (Appendix K). The language used in each response was as sex neutral as possible. Each response was evaluated for authenticity as a counselor response and for accuracy of intended content, by one doctoral level counselor in private practice and two doctoral level counselor educators. The order of presentation of the six counselor responses was determined by die tosses for each profile and was the same order on both versions of profiles.

To the investigator's knowledge, the Continuum of Facilitative Responses, although widely used in teacher education, had not been used in the present way to evaluate counselor responses to clients on the basis of client and counselor sex and type of client problem. Therefore, neither the reliability nor validity of the continuum for use in the present study has been established. However, the continuum's theoretical basis, founded upon Rogerian techniques, has been researched and validated (Carkhuff & Berenson, 1967). There is some postulating that Rogerian techniques may not be optimally helpful for counseling with women. However, no alternative theory had been developed, and the continuum was selected with these considerations in mind (Kasten, 1972).

Desire to Continue the Counseling Relationship Scale

Desire to continue the counseling relationship with the client described in the simulated profile was measured by asking the counselor to rate the degree of perceived desire to continue. The ratings were made on a five-point Likert scale with "1" defined as "strongly desire not to continue," and "5" defined as "strongly desire to continue." The rating scale and instructions for it were presented following each profile and six responses (Appendix B). Instructions were written so that counselor ratings would reflect the counselor's desire to continue working with the client rather than the counselor's judgment of whether or not the client needed further counseling. Because the scale was developed specifically for this investigation, neither its reliability nor validity had

been established. However, the scale was a Likert-type scale, a widely used rating scale, and was designed and selected with this information in mind.

Rater Selection and Training

One doctoral level counselor educator at the University of Northern Colorado, Greeley, Colorado; one doctoral level counselor educator at Colorado State University, Fort Collins, Colorado; and one doctoral level counselor in private practice in Greeley, Colorado, served as evaluators of both client statements and counselor responses. A description of the Continuum of Facilitative Responses was given to raters and discussed until a consensus of definitions for each level on the continuum was reached. Sample client statements and counselor responses were given to the raters who were asked to identify the level of each response, until agreement on all levels was unanimous.

Raters were given definitions of the statement content categories, and definitions were discussed until a consensus of definitions for each category was reached. They were also given the actual client statements and counselor responses and were asked to (1) read and evaluate each statement for its face validity, that is, for its plausibility and authenticity as a client statement and for the accuracy of its intended content, (2) read and evaluate each response for its plausibility and authenticity as a counselor response and its accuracy of intended content as a specific level

on the continuum, and (3) write suggestions for improvements of statements and responses (Appendix L).

Suggestions for improvement were classified into three categories: word changes (from one to three words), phrase changes (from four to 10 words), or no changes (Appendix M). Raters made only one suggestion for improvement of a client statement, that is, they judged essentially adequate the content validity of client statements.

Raters one and two offered essentially no suggestions for improvement of counselor responses, that is, they judged adequate the content validity of counselor responses. Rater three suggested nine word changes and 11 phrase changes. The investigator made a judgment as to which of rater three's suggested changes to use. Nineteen responses were altered--13 with word changes and six with phrase changes.

Research Design and Analysis

This investigation was designed to determine whether high school counselors respond differently to female and male clients who make the same statements in counseling sessions. The analysis of data proceeded in two phases:

Phase I

Subjects' rankings were rated according to their levels of facilitation, using the Continuum of Facilitative Responses.

Part A: In order to compare female and male counselor first choice responses to female and male client versions of profiles, a

three-factor analysis of variance design was selected (Appendix M). The null hypotheses mentioned earlier in this chapter were tested, using counselor sex, client sex, and profile type as the independent variables, with level of counselor response on the continuum as the dependent variable.

Because of the paucity of research measuring the effects of client sex on facilitative response and desire to continue the counseling relationship, and because high school counselors and high school students are seldom used as subjects and clients for such research, the present study can be termed exploratory research. Many social scientists feel that "different classes of research problems may require different levels of alpha" and in "exploratory research . . . it would seem advisable to tailor (the) level of significance to the open ended character of research design" (Skipper, Guenther, & Nass, 1972, p. 144). Therefore, in an effort to avoid a Type II error, the false conclusion that a difference does not exist when in fact it does, a .10 level of significance was selected.

Part B: In order to determine if the rankings of counselor responses to male and female clients resemble the theoretically correct rankings for specific counseling problems (research questions four and five), rankings for each of the four counselor client pairings were presented in a descriptive matrix for each profile. A mean ranking for each profile was reported.

Phase II

To determine if counselor ratings of their desire to continue a counseling relationship were affected by the sex of the counselor, or by the nature of the client's counseling problem (research questions six and seven), ratings were tabulated in descriptive matrices. Two matrices presented ratings for female and male clients, and a third matrix presented mean ratings.

CHAPTER IV
RESULTS AND DISCUSSION

Introduction

This study investigated the effects of client sex, counselor sex, and type of client problem on the facilitative responsiveness of high school counselors and the counselor's desire to continue a counseling relationship. High school counselors in Colorado were asked to respond to either the female or male version of one of six simulated client profiles (Appendix J). Counselors rank ordered given counselor responses (Appendix J). Facilitative responsiveness was assessed by the Continuum of Facilitative Responses (Wittmer & Myrick, 1974) (Appendix A). Counselor desire to continue a counseling relationship was assessed by the Desire to Continue the Counseling Relationship Scale (Appendix B).

Results and discussion of each statistical analysis and all descriptive data are presented in three sections. Section one, Statistical Results, includes null hypotheses one through three, followed by a discussion of the pertinent data reported in Table 1, the summary table generated by the analysis. Section two, Rankings of Counselor Responses, includes research questions four and five, followed by a discussion of subjects' rankings of counselor responses. Section three, Desire to Continue the Counseling Relationship, presents research questions six and seven, followed

by a discussion of subjects' desire to continue a counseling relationship with clients.

Statistical Results

Hypotheses were tested with a 2 x 2 x 6, three-way analysis of variance (Appendix N). The criterion for rejecting each null hypothesis was the .10 level of significance. Since this was a three factor investigation, interaction effects as well as main effects are available from Table 1. No interaction effects were significant at $p < .10$, so little elaboration of interaction effects was necessary.

Hypothesis One

There will be no difference between the mean facilitative responsiveness of counselors toward female clients and the mean facilitative responsiveness of counselors toward male clients.

Results. Table 1 presents the analysis of variance of the facilitative responsiveness of counselor first choice responses to female and male clients. The difference in mean facilitative responsiveness of counselors toward female and male clients was not significant at the .10 level; therefore, null hypothesis one was retained.

The counselors in this study responded to female and male clients with essentially the same facilitative responsiveness. Client sex did not affect high school counselor facilitative responsiveness.

Table 1
 Analysis of Variance of Facilitative Responsiveness

Source	SS	df	MS	F
Main Effects:				
Client Sex	.41	1	.41	.17
Counselor Sex	2.22	1	2.22	.90
Profile	91.06	5	18.21	7.36*
Interaction Effects:				
Profile x Client Sex	11.37	5	2.27	.92
Profile x Counselor Sex	6.10	5	1.22	.49
Client Sex x Counselor Sex	2.16	1	2.16	.87
Profile x Client Sex x Counselor Sex	21.16	5	4.23	1.71
Error Term	948.26	383	2.48	

* $p < .10$

The mean facilitative responsiveness of counselors toward female clients was 2.96 (standard deviation 1.63). The mean facilitative responsiveness of counselors toward male clients was 2.90 (standard deviation 1.66). Counselors responded to male clients with higher facilitative responsiveness than to female clients, although this difference was not statistically significant. (According to the Continuum of Facilitative Responses, the higher the numerical value of counselor responses, the lower the degree of facilitative responsiveness.) (Appendix A)

Because there was no significance with the main effect of client sex or with the client sex-profile interaction, it was logical to expect that there would be no difference in counselor facilitative responsiveness toward female and male clients at all levels (i.e., on all profiles). The profile by profile pattern was examined for differences undetected by the statistical test. Male clients were responded to with higher facilitative responsiveness on four profiles (independence, grief, non-traditional career choice, and emotionality). Counselors responded to female clients with higher facilitative responsiveness on the profiles of assertiveness and rationality.

Hypothesis Two

There will be no difference between the mean facilitative responsiveness of female counselors toward clients and the mean facilitative responsiveness of male counselors toward clients.

Results. Table 1 presents the analysis of variance of the facilitative responsiveness of female and male counselor first choice responses to clients. The difference in the mean facilitative responsiveness of female and male counselors toward clients was not significant at the .10 level; therefore, null hypothesis two was retained.

Female and male counselors in this study responded to clients with essentially the same facilitative responsiveness. Counselor sex did not affect high school counselor facilitative responsiveness.

The mean facilitative responsiveness of female counselors toward clients was 2.81 (standard deviation 1.60) and the mean facilitative responsiveness of male counselors toward clients was 3.00 (standard deviation 1.67). Female counselors responded to clients with slightly higher facilitative responsiveness than male counselors, although this difference was not statistically significant.

Because there was no significance with the main effect of counselor sex or with the counselor sex-profile interaction, it was logical to expect that there would be no difference in female and male counselor facilitative responsiveness at all levels (i.e. on all profiles). The profile by profile pattern was examined for differences undetected by the statistical test. Female counselors responded with higher facilitative responsiveness on the profiles of independence, assertiveness, and

non-traditional career choice. Male counselors responded with higher facilitative responsiveness on the profiles of grief, rationality, and emotionality.

Hypothesis Three

There will be no difference in the mean facilitative responsiveness of counselors between client profiles.

Results. Table 1 includes the analysis of variance of the facilitative responsiveness of counselor first choice responses to clients on the six profiles. Differences in the mean facilitative responsiveness of counselors toward clients between profiles were significant at the .10 level; therefore, null hypothesis three was not retained.

High school counselors in this study responded to clients with different facilitative responsiveness, depending on the client problem presented. The type of client problem did affect the facilitative responsiveness of counselors.

In order to determine where the significant differences between profiles occurred, a Scheffe post hoc pairwise comparison test was conducted with a .10 level of significance. The critical value used was 9.50.

The mean facilitative responsiveness of counselors toward clients on each profile was compared to the mean facilitative responsiveness of counselors toward clients on every other profile. For example, the mean facilitative responsiveness on independence

(2.63) was compared to the mean facilitative responsiveness on grief (3.06).

Table 2 gives the results of the series of Scheffe tests. Of the 15 comparisons, three were significant at the critical value of 9.50. Significance occurred when the facilitative responsiveness of counselors toward clients on the profile of non-traditional career choice was compared to the facilitative responsiveness of counselors toward clients on the profiles of independence, emotionality, and assertiveness. Counselors responded with significantly higher facilitative responsiveness when clients expressed problems related to independence, emotionality, and assertiveness, than when clients expressed problems related to choosing a non-traditional career.

The mean facilitative responsiveness scores for each profile were rank ordered from most to least facilitative. The order was assertiveness, emotionality, independence, grief and rationality (equal), and non-traditional career choice. However, only the differences described in the previous paragraph were statistically significant.

Discussion

There were no significant differences in female and male counselor facilitative responsiveness toward female and male clients in this investigation. Neither client nor counselor sex affected counselor facilitative responsiveness.

Table 2

Scheffe Post Hoc Pairwise Comparisons
of Mean Facilitative Responsiveness

Profiles	Mean Facilitative Responsiveness	Scheffe Test Statistic**
Independence-Grief	2.63-3.06	2.57
Independence-Assertiveness	2.63-2.36	1.00
Independence-Rationality	2.63-3.06	2.57
Independence-Non-traditional Career Choice	2.63-3.80	18.51*
Independence-Emotionality	2.63-2.48	.29
Grief-Assertiveness	3.06-2.36	7.00
Grief-Rationality	3.06-3.06	.00
Grief-Non-traditional Career Choice	3.06-3.80	7.94
Grief-Emotionality	3.06-2.48	4.86
Assertiveness-Rationality	2.36-3.06	7.00
Assertiveness-Non-traditional Career Choice	2.36-3.80	29.57*
Assertiveness-Emotionality	2.36-2.48	.14
Rationality-Non-traditional Career Choice	3.06-3.80	8.18
Rationality-Emotionality	3.06-2.48	4.86
Non-traditional Career Choice- Emotionality	3.80-2.48	25.22*

* $p < .10$

** Critical Value 9.50

Research exists which reveals that both female and male counselors ascribe to the same sex role stereotypes as society in general and hold a double standard of mental health for women and men (Sherman et al., 1978; Prediger & Hanson, 1978). Additional research reveals that counselors respond with less empathy and acceptance to clients who express non-sex stereotyped problems in counseling sessions (Donahue & Costar, 1977; Freeman & Stormes, 1977; Hill et al., 1977; Petro & Hansen, 1977). Therefore, it was hypothesized that the counselors in this study might exhibit their biases by responding with lower facilitative responsiveness to female and male clients who expressed non-sex stereotyped problems in simulated profiles.

Contrary to earlier investigations, the counselors in this study did not respond differently to clients on the basis of client sex. This finding was encouraging considering the examples of bias against women's attainments still evident within higher education psychology and counseling departments (National Advisory Council on Women's Educational Programs, 1977). While 50% of master's degree and 22% of doctoral degree counselor education students are women, 85% of counselor educators are men, and fewer than 8% of counselor education departments are chaired by women (National Advisory Council on Women's Educational Programs, 1977). In private practice, 90% of psychiatrists and 75% of psychologists are men (Katrin, 1976).

The counselors in this study responded with significantly higher facilitative responsiveness to clients who expressed problems related

to assertiveness, emotionality, and independence, than to clients who expressed problems related to choosing non-traditional careers. In the non-traditional career choice profile, female clients expressed the desire to become electricians, and male clients expressed the desire to become nurses. Therefore, the counselors in this study were significantly less facilitative (i.e. less helpful) toward both female and male clients who discussed their intentions of selecting a career not traditional for their sex, than toward clients who expressed other problems in counseling. The degree of facilitative responsiveness of counselors appeared to depend on how traditional were their clients' career decisions.

Counselors selected the least facilitative of responses, advising or evaluating, most often when responding to a non-traditional career choice of clients (Appendix A). The advice giving response read, "If I were you, I'd investigate the field even more by talking with men in the nursing field (or women in the electrical field) and reading more in our library career center on specific job activities" (Appendix J).

Counselors selected the fourth response on the continuum, reassuring or supporting, second most often when responding to a non-traditional career choice of clients (Appendix A). That response read, "Non-traditional careers are opening up to men (women), and I think the desire and enthusiasm you express will help you succeed" (Appendix J).

These two most frequently selected counselor responses illustrate the dichotomy in career counseling philosophy with which high school counselors are confronted. Should counselors emphasize to students

the reality of the job market and of making a realistic career decision (e.g., there are few male nurses and few female electricians), and advise students to explore other career options? Or should counselors encourage and support students in seeking and fulfilling non-traditional goals despite patterns of employment and employer discrimination?

The responses of the counselors in this investigation to clients choosing a non-traditional career, although consistent with earlier findings, was surprising because Title IX regulations were first released in 1972. Those regulations state that schools must insure that

counselors do not direct or urge any student to enroll in a particular career or program, or measure or predict a student's prospects for success in any career or program based upon the student's . . . sex.

Where recruitment activities involve the presentation or portrayal of vocational and career opportunities, the curricula and programs described should cover a broad range of occupational opportunities and not be limited on the basis of the . . . sex . . . of the students. (Federal Register, 1979, p. 17167)

History has demonstrated that rules and regulations covering biases and prejudices do not easily or quickly change attitudes. The counselors in this investigation illustrated that point.

The overall mean facilitative responsiveness of 2.93 indicated that counselors responded to no profile with a high degree of facilitative responsiveness. Counselors responded to assertiveness with the highest facilitative responsiveness (2.36) and to non-traditional career choice with the lowest (3.80). Three profiles were responded to with a mean facilitative responsiveness between the third and fourth most facilitative of responses on the continuum. Therefore, it can be concluded that the high school counselors were not particularly helpful to any clients in this study.

Rankings of Counselor Responses

Subjects' rankings of counselor responses were examined by profile, answering together research questions four and five. For each profile, mean scores for responses "a" through "f" were determined (Appendix J) and rank ordered from most to least often selected. Finally, scores were translated into their corresponding placement on the Continuum of Facilitative Responses (Appendix A). For example, in profile one male counselors' first choice response to female clients was "2" (clarifying). Male counselors' second choice response was a tie between "1" and "3" (reflecting and questioning) (Table 3). Mean rankings for the four counselor-client pairings and an overall mean ranking for each profile were presented in tables three through eight.

Research Question Four

On the average, do the rankings of counselor responses to female clients resemble the theoretically correct rankings for specific counseling problems?

Research Question Five

On the average, do the rankings of counselor responses to male clients resemble the theoretically correct rankings for specific counseling problems?

Results: Profile one, Independence, Table 3: Male counselors were most likely to give a clarifying response to female clients. Female counselors were equally as likely to give a clarifying or questioning response. Male counselors were least likely to respond with advice, while female counselors were least likely to respond with reassurance. Rankings of male and female counselors while similar to one another were dissimilar to the correct ranking.

Table 3
 Profile #1 Mean Rankings
 for Four Counselor-Client Pairings
 and Mean Ranking Pooled

Profile #1-Independence

Correct Ranking	Female Client		Male Client		Mean Ranking Pooled
	Male CO	Female CO	Male CO	Female CO	
1st	2*	3/2	2	2	2
2nd	3/1		3	3	3
3rd		1	1	1	1
4th	5	5	5	5	5
5th	4	6	4	4	4
6th	6	4	6	6	6

* Note: 1 = reflecting
 2 = clarifying
 3 = questioning
 4 = reassuring
 5 = interpreting
 6 = advising

Male and female counselors responded with the same ranking of responses to male clients, selecting a clarifying response most often and an advising response least often. Rankings of male and female counselors were dissimilar to the correct ranking.

Overall, the four rankings were similar to one another but dissimilar to the theoretically correct ranking. A clarifying response was the mean first choice overall, while reflecting, most facilitative on the continuum, was the mean third choice.

Results: Profile two, Grief, Table 4. Male counselors were most likely to respond to female clients with advice while female counselors were most likely to give a clarifying response. Male and female counselors were least likely to give an interpretive response. Male and female counselor rankings were dissimilar to each other and to the correct ranking.

Male counselors were most likely to give a reflective response to male clients while female counselors were most likely to advise male clients. Male and female counselors were least likely to give an interpretive response. Male and female counselor rankings were dissimilar to each other and to the correct ranking.

Overall, the four rankings were dissimilar to each other and to the theoretically correct ranking. Advice was the mean first choice response. Counselor first choice responses were facilitative to same-sex clients expressing grief and non-facilitative to opposite-sex clients.

Results: Profile three, Assertiveness, Table 5. Male and female counselors were most likely to give a clarifying response to female clients. Male counselors were least likely to reassure and female

Table 4
 Profile #2 Mean Rankings
 for Four Counselor-Client Pairings
 and Mean Ranking Pooled

Profile #2-Grief

Correct Ranking	Female Client		Male Client		Mean Ranking Pooled
	Male CO	Female CO	Male CO	Female CO	
1st	6*	2	1	6	6
2nd	4	6	2	2	2
3rd	2	1	6	1	1
4th	1	4	3/4	4	4
5th	3	3		3	3
6th	5	5	5	5	5

*Note: 1 = reflecting
 2 = clarifying
 3 = questioning
 4 = reassuring
 5 = interpreting
 6 = advising

counselors were least likely to advise. Rankings were dissimilar to each other and to the correct ranking.

Male and female counselors were most likely to give a clarifying response to male clients. Male and female counselors were least likely to give an advising response to male clients. Rankings were dissimilar to each other and to the correct ranking.

Female counselors responded with the same rankings for both male and female clients. Male counselors responded similarly to both male and female clients, although male and female counselor rankings were dissimilar to each other and to the theoretically correct ranking. The overall mean ranking was similar to the correct ranking, with a clarifying response as the mean first choice response.

Results: Profile four, Rationality, Table 6. Male counselors were most likely to give a reflective response to female clients while female counselors were most likely to reassure female clients. Male counselors were least likely to give a questioning response while female counselors were least likely to give advice. Male and female counselor rankings were dissimilar to each other and to the correct ranking.

Male counselors were most likely to reassure male clients while female counselors were most likely to give a reflective response to male clients. Male counselors were least likely to advise and female counselors were least likely to give a questioning response. Male and female counselor rankings were dissimilar to one another and to the correct ranking.

Table 5

Profile #3 Mean Rankings
for Four Counselor-Client Pairings
and Mean Ranking Pooled

Profile #3-Assertiveness

Correct Ranking	Female Client		Male Client		Mean Ranking Pooled
	Male CO	Female CO	Male CO	Female CO	
1st	2*	2	2	2	2
2nd	3	1	3	1	1
3rd	1	5	1	5	3
4th	5	3	5	3	5
5th	6	4	4	4	4
6th	4	6	6	6	6

* Note: 1 = reflecting
2 = clarifying
3 = questioning
4 = reassuring
5 = interpreting
6 = advising

Table 6
 Profile #4 Mean Rankings
 for Four Counselor-Client Pairings
 and Mean Ranking Pooled

Profile #4-Rationality

Correct Ranking	Female Client		Male Client		Mean Ranking Pooled
	Male CO	Female CO	Male CO	Female CO	
1st	1*	4	1	1	4
2nd	2	1	5	5	1
3rd	4	2	2	4/6	2
4th	5	5	1		5
5th	6	3	3	2	6
6th	3	6	6	3	3

* Note: 1 = reflecting
 2 = clarifying
 3 = questioning
 4 = reassuring
 5 = interpreting
 6 = advising

Overall, the four rankings were dissimilar to one another and to the correct ranking, with reassurance selected as the mean first choice response. Counselors' first choice responses were facilitative to opposite-sex clients, and non-facilitative to same-sex clients.

Results: Profile five, Non-traditional Career Choice, Table 7

Male and female counselors were most likely to give a reassuring response to female clients and were least likely to give an interpretive response. Male and female counselor rankings were similar to each other but dissimilar to the correct ranking.

Male counselors were most likely to give advice to male clients while female counselors were most likely to give a clarifying response. Male and female counselors were least likely to give an interpretive response. Male and female counselor rankings were dissimilar to each other and to the correct ranking.

Overall, the four rankings were similar to one another but dissimilar to the theoretically correct ranking. Advising was the mean first choice response. Of all profiles, the rankings were the most dissimilar to the correct ranking.

Results: Profile six, Emotionality, Table 8. Male counselors were most likely to give a reflective response to female clients while female counselors were most likely to give a clarifying response. Male counselors were least likely to interpret and female counselors were least likely to advise. Male and female counselor rankings were similar to each other and to the correct ranking.

Male counselors were most likely to give a reflective response to male clients while female counselors were most likely to give a clarifying response. Male and female counselors were least likely to

Table 7

Profile #5 Mean Rankings
for Four Counselor-Client Pairings
and Mean Ranking Pooled

Profile #5-Non-traditional Career Choice

Correct Ranking	Female Client		Male Client		Mean Ranking Pooled
	Male CO	Female CO	Male CO	Female CO	
1st	4*	4	6	2	6
2nd	6	2	4	6	4
3rd	2	6	2	4	2
4th	1	1	1	1	1
5th	3	3	3	3	3
6th	5	5	5	5	5

* Note: 1 = reflecting
2 = clarifying
3 = questioning
4 = reassuring
5 = interpreting
6 = advising

Table 8
 Profile #6 Mean Rankings
 for Four Counselor-Client Pairings
 and Mean Ranking Pooled

Profile #6-Emotionality

Correct Ranking	Female Client		Male Client		Mean Ranking Pooled
	Male CO	Female CO	Male CO	Female CO	
1st	1*	2	1	2	2
2nd	2	1	3	1	1
3rd	3	3	2	4	3
4th	4	4	4	3	4
5th	6	5	5/6	5	5
6th	5	6		6	6

* Note: 1 = reflecting
 2 = clarifying
 3 = questioning
 4 = reassuring
 5 = interpreting
 6 = advising

advise male clients. Counselor rankings were similar to each other and to the correct ranking.

Overall, the four rankings were similar to one another and to the theoretically correct ranking. Of all six profiles, this mean ranking most closely approximated the correct ranking.

Discussion

On the average, the rankings of counselor responses to female and male clients did not resemble the theoretically correct rankings for specific counseling problems. The counselors in this study did not rank correctly the responses for any of the six profiles. Instead, there appeared to be great diversity among the counselors as to their beliefs about the "helpfulness" of specific counseling responses. Counselor rankings varied according to all three variables: client sex, counselor sex, and profile.

Inconsistent and incorrect rankings perhaps reflected a belief that different counseling responses were required, both in reaction to different counseling problems and for female and male clients, even when clients expressed the same content in simulated profiles. It is possible, too, that the facilitative skill of counselors varied, depending upon the counseling problem, sex of client, and sex of counselor. It would be appropriate to question both the overall facilitative skills of this sample of counselors and the possible existence of sex stereotyped beliefs.

Desire to Continue the Counseling Relationship

Female and male counselor mean desire to continue with female and male clients was computed for each profile. Profiles were rank ordered from most to least mean desire to continue (Tables 9 and 10). Rankings for research questions six and seven are discussed together.

Research Question Six

Are counselor ratings of their desire to continue the counseling relationship with female clients affected by the sex of the counselor or by the nature of the client's counseling problem?

Research Question Seven

Are counselor ratings of their desire to continue the counseling relationship with male clients affected by the sex of the counselor or by the nature of the client's counseling problem?

Results. Both counselor sex and client problem appeared to affect the desire of counselors to continue a counseling relationship with female and male clients. Female and male counselors indicated differing degrees of desire to continue a counseling relationship with female and male clients. First, there were differences in the order in which the profiles were ranked according to mean desire (tables nine and ten). Male counselors most desired to continue with female clients expressing a non-traditional career choice and least desired to continue with female clients expressing rationality. Female counselors most desired to continue with female clients expressing grief and least desired to continue with female clients expressing rationality.

Male counselors most desired to continue with male clients expressing grief and least desired to continue with male clients expressing rationality. Female counselors most desired to continue with male clients expressing a non-traditional career choice and least desired to continue with male clients expressing rationality. The remaining profiles were ranked dissimilarly by female and male counselors.

Second, female counselors indicated a greater desire than male counselors to continue with female clients on five of the six

Table 9
 Mean Desire to Continue the Counseling Relationship
 for Female Clients
 in Rank Order by Profile

Female Clients			
Male Counselors		Female Counselors	
Mean Desire, Most to Least	Profile	Mean Desire, Most to Least	Profile
4.14	5 - Non-trad. Career	4.56	2 - Grief
4.11	2 - Grief	4.53	5 - Non-trad. Career
3.95	6 - Emotionality	4.20	3 - Assertiveness
3.93	1 - Independence	4.18	1 - Independence
3.89	3 - Assertiveness	4.11	6 - Emotionality
3.81	4 - Rationality	3.73	4 - Rationality

Table 10
 Mean Desire to Continue the Counseling Relationship
 for Male Clients
 in Rank Order by Profile

Male Clients			
Male Counselors		Female Counselors	
Mean Desire, Most to Least	Profile	Mean Desire, Most to Least	Profile
4.24	2 - Grief	4.43	5 - Non-trad. Career
4.11	5 - Non-trad. Career	4.27	6 - Emotionality
4.00	3 - Assertiveness/	4.08	1 - Independence
4.00	6 - Emotionality	4.00	2 - Grief/ 3 - Assertiveness
3.95	1 - Independence		
3.62	4 - Rationality	3.55	4 - Rationality

profiles and with male clients on three profiles (independence, emotionality, and non-traditional career choice). Male counselors indicated a greater desire than female counselors to continue with female clients on the profile of rationality. Male counselors indicated a greater desire than female counselors to continue with male clients on grief and rationality. Female and male counselors equally desired to continue with male clients on the profile, assertiveness.

In summary, the female counselors in this study were more desirous than male counselors of continuing the counseling relationship with female clients and slightly more desirous than male counselors to continue with male clients. No clear pattern emerged, though, to explain the rankings, from most to least desire to continue.

Mean desire to continue for all four counselor-client pairings was rank ordered according to profile (Table 11). The overall mean desire was 4.05, indicating that, as a group, counselors desired to continue a counseling relationship with all clients, regardless of the problem expressed. Counselors indicated their greatest desire to continue (4.25) with clients who expressed a non-traditional career choice and least desire to continue (3.69) with clients expressing rationality. It was interesting that counselors were least facilitative toward clients who expressed a non-traditional career choice (see hypothesis three discussion).

Table 11

Overall Mean Desire to Continue the Counseling Relationship
in Rank Order by Profile

Mean Desire, Most to Least	Standard Deviation	Profile
4.25	.72	5 - Non-traditional Career
4.24	.82	2 - Grief
4.06	.67	6 - Emotionality
4.02	.71	1 - Independence
4.00	.66	3 - Assertiveness
3.69	.72	4 - Rationality

Discussion

When female counselor responses to female and male clients were compared (tables 9 and 10), it was evident that female counselors preferred to continue with female clients on all profiles except emotionality. Similarly, it was evident that male counselors preferred to continue with male clients on all profiles except non-traditional career choice and rationality. Counselors in this study appeared to prefer to continue a counseling relationship with same-sex clients.

Mean desire of female (4.07) and male counselors (3.99) to continue with male clients, and mean desire of female (4.22) and male counselors (3.97) to continue with female clients were compared. Female counselors indicated a higher mean desire to continue with both female and male clients.

Client statement content categories were selected to convey sex stereotyped counseling problems. Profiles of grief and emotionality were considered female sex stereotyped while profiles of independence, assertiveness, and rationality were considered male sex stereotyped (Broverman et al., 1970). Non-traditional career choice was considered male sex stereotyped for female clients and female sex stereotyped for male clients.

The numbers of female and male sex stereotyped profiles were determined for both the top and bottom three rankings in tables 9 and 10. Among the top three desired profiles were eight female sex

stereotyped profiles and five male sex stereotyped profiles. Among the bottom three desired profiles were two female sex stereotyped profiles and nine male sex stereotyped profiles.

This information could be interpreted to mean that the counselors in this study felt a greater desire to continue a counseling relationship with female and male clients expressing female sex stereotyped counseling problems. The counselors appeared to have felt less desire to continue with female and male clients expressing male sex stereotyped counseling problems.

Breaking down the rankings by client sex, it appeared that counselors indicated a greater desire to continue with male clients who expressed female stereotyped concerns. Counselors felt an equal desire to continue with female clients who expressed either female or male stereotyped concerns.

Breaking down the rankings by counselor sex, it appeared that female counselors equally desired to continue with clients expressing either female or male stereotyped concerns. Male counselors indicated a greater desire to continue with clients expressing female stereotyped concerns. These patterns were consistent with research findings revealing that male clients were allowed female traits to a much greater degree than female clients, particularly by male counselors (McKee & Sherriffs, 1959).

CHAPTER V SUMMARY AND CONCLUSIONS

Investigations of counselor attitudes toward, and treatment of, female and male clients consistently have revealed differences and biases according to client sex, including a somewhat negative view of females (Sherman et al., 1978; Prediger & Hanson, 1978). The possibility of differences in actual counseling treatment has not been researched adequately.

Research evidence exists which shows that members of American society possess strong sex stereotyped beliefs about women and men (Rosenkrantz et al., 1968; McKee & Sherriffs, 1957; Sherriffs & Jarrett, 1953). There is also evidence that counselors possess the same sex stereotyped beliefs as society in general (Fabrikant, 1974; Fabrikant et al., 1972). It seems inevitable that counselors would convey their personal sex biases and the sex biases of their counselor training to their female and male clients during the counseling session. However, the current investigation revealed few counselor biases on the basis of client sex.

The current investigation studied the effects of client sex, counselor sex, and type of client problem on counselor facilitative responsiveness and counselor desire to continue a counseling relationship. More specifically, this investigation studied whether female and male counselors responded to female and male clients differently when the clients expressed the same content in statements made in simulated client profiles.

Procedures

The subjects for this study were 159 female and 248 male high school counselors who were employed during 1979-1980 in Colorado public high schools. Each subject responded to either the female or male version of one of six simulated client profiles (Appendix J). Subjects rank ordered six counselor responses according to how helpful they felt the responses were to the client and rated their desire to continue a counseling relationship with the client on a five-point scale (Appendix B). Rankings were rated according to their placement on the Continuum of Facilitative Responses (Appendix A).

The six profiles contained a simulated client statement with the sex of the client the only difference between the two versions of any one profile. Simulated profiles included statements of assertiveness, emotionality, grief, independence, non-traditional career choice, and rationality.

A 2 x 2 x 6 analysis of variance design was used to analyze counselor first choice responses (Appendix N). A Scheffe post hoc pairwise comparison test was used when significance occurred. Descriptive matrices were used to present rankings of counselor responses and ratings of counselor desire to continue a counseling relationship.

Results

Differences in the mean facilitative responsiveness of female and male counselors toward female and male clients were not significant. Neither client nor counselor sex affected counselor facilitative responsiveness. Differences in the mean facilitative

responsiveness of counselors toward clients between profiles were significant ($p < .10$). The type of client problem did affect the facilitative responsiveness of high school counselors. Counselors in this study were significantly more facilitative toward clients who made statements relating to assertiveness, independence, and emotionality, than toward clients who made statements relating to a non-traditional career choice.

Rankings of counselor responses to female and male clients, although similar to one another, did not resemble the theoretically correct rankings for specific profiles. Counselors did not rank correctly the responses for any of the six simulated profiles. The mean ranking for emotionality most closely approximated the correct ranking. The mean ranking for non-traditional career choice was least like the correct ranking. Rankings varied according to all three variables: client sex, counselor sex, and profile.

Both counselor sex and client problem affected the desire of counselors to continue a counseling relationship with female and male clients. Female counselors indicated a greater desire than male counselors to continue a counseling relationship with female and male clients. Additionally, rankings of profiles according to counselor mean desire to continue were different for female and male counselors. Overall, counselors indicated the greatest mean desire to continue with clients who made statements of a non-traditional career choice, and the least mean desire with clients who made statements of rationality.

Conclusions

Contrary to earlier investigations, the high school counselors in this study did not respond to clients according to sex stereotypes except when clients made statements relating to a non-traditional career choice. In addition, counselors indicated their desire to continue a counseling relationship with female and male clients, regardless of the type of problem. More specifically, the following conclusions were drawn:

1. The counselors in this study responded with significantly higher facilitative responsiveness to client statements of assertiveness, emotionality, and independence, than to client statements of a non-traditional career choice.
2. The counselors responded with essentially the same facilitative responsiveness to female clients as to male clients.
3. The female counselors responded to clients with essentially the same facilitative responsiveness as male counselors.
4. The counselors in this study tended to respond to clients with relatively low facilitative responsiveness on all simulated profiles.
5. The counselors ranked responses in a way that did not resemble the theoretically correct rankings. Rankings appeared to have been affected by client sex, counselor sex, and client problem.
6. Both counselor sex and client problem seemed to affect counselor ratings of their desire to continue a counseling relationship.

7. Counselors in this study tended to desire to continue a counseling relationship with all clients, regardless of the type of problem.
8. Counselors most desired to continue a counseling relationship with clients who made statements of a non-traditional career choice. However, counselors were significantly less facilitative with those clients than with clients who made statements of assertiveness, emotionality, and independence.
9. Counselors indicated greater desire to continue a counseling relationship with both female and male clients who expressed female sex stereotyped counseling problems.
10. Counselors indicated less desire to continue a counseling relationship with both female and male clients who expressed male sex stereotyped counseling problems.

Recommendations and Implications

The conclusions of this investigation have implications for further research and for counselor preparation. Items one through four, below, include suggestions for future research. Items five through 10 give implications for counselors and counselor educators.

1. Studies should be conducted on the effects of counselor sex biases on components in the counseling process other than facilitative responsiveness.
2. Future research should examine possible counselor biases present in actual, live counseling sessions.
3. Research should be conducted on the effects of sex biased counseling on the self concepts, aspirations, and actual decisions of clients.

4. School districts should evaluate counseling outcomes, especially career decisions, for evidence of differential treatment of young women and men.
5. Professional preparation to eliminate sex stereotyped career counseling should be conducted for all high school counselors.
6. Counselor education programs should continue to include (or initiate, if necessary) training in counseling skills free of sex bias, particularly for career counseling.
7. Possession of counseling skills free of sex bias should be a criterion for employment as a high school counselor.
8. Inservice education in facilitative responsiveness should be conducted for all high school counselors.
9. Skills in facilitative responsiveness should be a criterion for employment as a high school counselor.
10. Efforts should be made to enforce Title IX more effectively, rather than to rely on the "voluntary compliance" described in the guidelines (Federal Register, 1979).

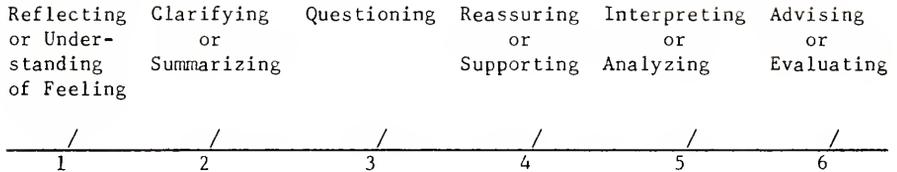
Summary

The biases of counselors and treatment differences revealed in previous research gave sufficient reason for concern about the influence of biased counseling on young women and men. The present study indicated that high school students in the state of Colorado appear to have counselors who are making progress toward the elimination of sex biased beliefs and counseling treatment.

Issues of sexual equality are important in the state of Colorado. Political and educational leaders, as well as organized groups of

citizens, have worked actively to promote equitable treatment and opportunities for women and men. A state Equal Rights Amendment was ratified in 1972, bringing all Colorado laws into compliance. Citizens rejected an Equal Rights Amendment rescission effort in 1976, by a two to one margin. The results of this study lend merit to the popular image of Colorado as a state whose citizens respect the rights and freedoms of individuals, and accept the non-traditional. It may be that Colorado counselors are influenced by the attitudes and actions discussed above, to relate to students in an increasingly equitable counseling style.

APPENDIX A
CONTINUUM OF FACILITATIVE RESPONSES



Level 1: Reflecting or Understanding of Feeling

A counselor response that conveys to a client the counselor is reading how the client is feeling. The response is a kind of feedback that accurately communicates how the client's world appears at this time.

Level 2: Clarifying or Summarizing

A counselor response that indicates an attempt to understand accurately what a client has said, or to identify the most significant ideas that seem to have been emerging in what the client has said.

Level 3: Questioning

A counselor response that is intended to seek additional information, provoke further discussion, and implies to a client that she/he should or might profit further by developing a point of discussion.

Level 4: Reassuring or Supporting

A counselor response that is intended to express belief in a client, in her/his ability to handle a situation, and potential to solve problems. The response implies the client is normal, like others in her/his problems, and that the future will be better than the present.

Level 5: Interpreting or Analyzing

A counselor response that explains, analyzes, or interprets a client's behavior, often by connecting one event to another to acquire insight into the client's behavior. The response implies what the client might or ought to think.

Level 6: Advising or Evaluating

A counselor response that implies a judgment of goodness, appropriateness, effectiveness, or rightness. The response implies what the client might or ought to do.

Note: The continuum is from Wittmer and Myrick, 1974, p. 55.

APPENDIX B

DESIRE TO CONTINUE THE COUNSELING RELATIONSHIP SCALE

How much do you feel you would enjoy continuing a counseling relationship with (client's name), if that choice were available? Your decision should reflect your personal desire to continue, and should not reflect whether or not you feel (client's name) needs further counseling. Look at the scale below and indicate the degree of your desire to continue the counseling relationship with (client's name) by circling one of the five points on the scale which most nearly describes your desire:

1	2	3	4	5
strongly desire <u>not</u> to continue	do <u>not</u> desire to continue	<u>neither</u> desire nor not desire to continue	desire to continue	strongly desire to continue

APPENDIX C
LETTER TO COUNSELORS

October 3, 1979

Dear Counselor:

I would like to invite you to participate in a study which examines the counseling responses given by high school counselors to high school students. I have been a high school counselor in Colorado for six years, as well as a Ph.D. candidate in Counselor Education at the University of Florida, and am currently involved in gathering data for my dissertation research.

Your help is very important to me. I am using high school counselors in the state of Colorado for my sample, and your participation will help make the research results valuable, not only to me, but also to you and to your colleagues.

Out of respect for your time, the enclosed two forms have been designed to require less than ten minutes for you to complete and mail. The forms include a personal data sheet, and a profile of a hypothetical high school student to whom you are asked to respond. Your responses will be confidential. The results will be tabulated anonymously, and used only for research purposes.

So that I am able to meet my required deadlines, please return the two completed forms to me in the enclosed postage paid envelope by October 17, 1979, or even today if you are able. Thank you for your help.

Sincerely,

Lyn E. Ferguson
1852 Eagle Drive
Loveland, CO 80537

Enclosures

APPENDIX D
PERSONAL DATA SHEET

Place your response in the blanks to the right of the items. Your responses will be confidential. They will be used for statistical purposes only.

1. Check your sex: female
 male
2. Age in years: years
3. Including the current school year, how many years have you been a high school counselor: years
4. Check the highest college degree you have obtained:
 B.A. or B.S.
 M.A. or M.S.
 Specialist
 Ed.D. or Ph.D.
 other
5. Check the type of Colorado certificate you now hold:
 Type A
 Type B
 Type E
 qualified, but have not applied
 other

APPENDIX E
FREQUENCY DISTRIBUTION FOR AGE OF SUBJECTS

Age	Number of Females	Number of Males	Total
23	1		1
24		1	1
25	2	1	3
26		1	1
27	1	4	5
28	2	2	4
29	5	1	6
30	6	7	13
31	7	3	10
32	7	6	13
33	3	8	11
34	2	12	14
35	9	11	20
36	10	12	22
37	3	8	11
38	5	8	13
39	4	9	13
40	11	14	25
41	4	12	16
42	1	3	4
43	5	10	15
44	6	12	18
45	6	10	16
46	4	9	13
47	4	4	8
48	7	7	14
49	4	9	13
50	9	8	17
51	6	5	11
52	1	7	8
53	5	4	9
54	3	5	8
55	1	3	4
56	1	10	11
57	1	6	7
58	1	3	4

Age	Number of Females	Number of Males	Total
59	1	3	4
60	3	1	4
61		1	1
62	1		1
63	1	1	2
64		1	1
65	1	1	2
66	1		1

APPENDIX F
 FREQUENCY DISTRIBUTION FOR YEARS OF
 EXPERIENCE OF SUBJECTS

Years of Experience	Number of Females	Number of Males	Total
1	7	10	17
2	15	12	27
3	7	17	24
4	15	7	22
5	12	9	21
6	9	9	18
7	9	15	24
8	7	8	15
9	5	13	18
10	15	14	29
11	9	10	19
12	6	18	24
13	1	13	14
14	5	8	13
15	10	15	25
16	5	13	18
17	2	13	15
18	5	9	14
19	1	7	8
20	6	7	13
21	1	3	4
22		2	2
23	2	3	5
24	3	1	4
25		3	3
26		3	3
27		1	1
28			
29			
30		2	2
31		1	1

APPENDIX G
FREQUENCY DISTRIBUTION FOR
HIGHEST COLLEGE DEGREE

Highest Degree	Number of Females	Number of Males	Total
Bachelors	6	8	14
Masters	140	211	351
Specialist	7	20	27
Doctorate	6	8	14

APPENDIX H
FREQUENCY DISTRIBUTION FOR TYPE OF CERTIFICATE

Certificate Type	Number of Females	Number of Males	Total
A	27	48	75
B	91	134	225
Qualified	3	4	7
Other	23	43	66

APPENDIX I
ASSIGNMENT OF PROFILES TO COUNSELORS

APPENDIX J
PROFILES AS MAILED TO SUBJECTS

	<u>Female Version</u>	<u>Male Version</u>
Profile #1	Betty Smith	Bob Smith
Profile #2	Carolyn Long	Charles Long
Profile #3	Donna Jones	David Jones
Profile #4	Linda Carlson	Larry Carlson
Profile #5	Patty Brown	Paul Brown
Profile #6	Shirley Adams	Steve Adams

Bob Smith's TEST RESULTS:

ACHIEVEMENT

verbal 75th percentile

math 72nd percentile

I.Q. 110

Bob Smith is a senior in your school. He walks in to your counseling office and says: "I feel that I'm really growing up, you know? More and more I want to be on my own, making my own decisions, and accepting the consequences of my decisions. I don't want to be doing things because my parents or my teachers or even my friends tell me to, but instead I'm trying to live my life with me deciding what to do."

Now, how would you respond to Bob? Look at the responses below and place a "1" beside the response you feel to be the most helpful, a "2" beside the response you feel to be the second most helpful, a "3" beside the response you feel to be the third most helpful, and so on until you have ranked all six responses according to how helpful you feel they would be:

- ___ a. You like making your own decisions and being more on your own, maybe because it makes you feel more grown up and adult when you do.
- ___ b. What kinds of decisions are you especially wanting to make on your own, Bob?
- ___ c. It's probably important that you at least consider what your friends and especially your family suggest, and respect their needs and wishes, too.
- ___ d. It's really good that you are becoming more independent from your friends and family, Bob. All teenagers will do that sooner or later.
- ___ e. If I understand you, Bob, you want to decide things for yourself—be more on your own.
- ___ f. You feel very strongly about making your own decisions.

Please continue below:

How much do you feel you would enjoy continuing a counseling relationship with Bob, if that choice were available? Your decision should reflect your personal desire to continue, and should not reflect whether or not you feel Bob needs further counseling. Look at the scale below and indicate the degree of your desire to continue the counseling relationship with Bob by circling one of the five points on the scale which most nearly describes your desire:

1	2	3	4	5
strongly desire <u>not</u> to continue	<u>do not</u> desire to continue	<u>neither</u> desire nor not desire to continue	desire to continue	strongly desire to continue

Carolyn Long's TEST RESULTS:
 ACHIEVEMENT
 verbal 75th percentile
 math 72nd percentile
 I.Q. 110

Carolyn Long is a senior in your school. She walks in to your counseling office and says: "Ever since my mother died, I can't think of anything else. I miss her so much - being able to talk with her about my problems, and just always having her there made me feel so good. I have this huge weight in my chest since she's gone; I think about her during class and cry myself to sleep sometimes at night. I wonder if this awful sadness will ever go away."

Now, how would you respond to Carolyn? Look at the responses below and place a "1" beside the response you feel to be the most helpful, a "2" beside the response you feel to be the second most helpful, a "3" beside the response you feel to be the third most helpful, and so on until you have ranked all six responses according to how helpful you feel they would be:

- ___a. The grief you feel is very natural when you lose such an important person, Carolyn, and as time goes on I know you'll feel less sad.
- ___b. When you feel the sadness coming on, you might want to try to talk to somebody about your feelings, and in this way help yourself to understand your mother's death.
- ___c. Maybe the reason you're feeling so sad for so long is because you're reluctant to "go on" without the security of your mother.
- ___d. You're feeling so sad about your mother, and feel that you're going to miss her for a long time still.
- ___e. Carolyn, what do you think are some things you could do to help you feel less sad?
- ___f. It sounds like you're saying you're so sad much of the time and wonder if the sadness will ever end.

Please continue below:

How much do you feel you would enjoy continuing a counseling relationship with Carolyn, if that choice were available? Your decision should reflect your personal desire to continue, and should not reflect whether or not you feel Carolyn needs further counseling. Look at the scale below and indicate the degree of your desire to continue the counseling relationship with Carolyn by circling one of the five points on the scale which most nearly describes your desire:

1	2	3	4	5
strongly desire <u>not</u> to continue	do <u>not</u> desire to continue	<u>neither</u> desire nor not desire to continue	desire to continue	strongly desire to continue

David Jones' TEST RESULTS:
 ACHIEVEMENT
 verbal 75th percentile
 math 72nd percentile
 I.Q. 110

David Jones is a senior in your school. He walks in to your counseling office and says: "I think I have a right to be honest about how I feel or what I think. I feel good about being straightforward even though others sometimes misunderstand or disagree with me. I like being able to take care of myself and not rely on others to reassure me I'm right or okay. I trust my feelings."

Now, how would you respond to David? Look at the responses below and place a "1" beside the response you feel to be the most helpful, a "2" beside the response you feel to be the second most helpful, a "3" beside the response you feel to be the third most helpful, and so on until you have ranked all six responses according to how helpful you feel they would be:

- a. Perhaps you might try not being quite so direct and blunt, but more gentle or tactful in your honesty, David.
- b. You feel pretty self confident, and, well, right and just about being honest with others.
- c. Although others may sometimes disagree with your opinions, you'll find that being honest has rewards, because others will always know where you stand.
- d. What do you think are some reasons others sometimes misunderstand when you are straightforward?
- e. It sounds like you're saying, David, that you feel good about yourself being honest whether or not others misunderstand.
- f. It seems that it's really important to you to be assertive because you feel you might lose something if you were to tone down your straightforwardness.

Please continue below:

How much do you feel you would enjoy continuing a counseling relationship with David, if that choice were available? Your decision should reflect your personal desire to continue, and should not reflect whether or not you feel David needs further counseling. Look at the scale below and indicate the degree of your desire to continue the counseling relationship with David by circling one of the five points on the scale which most nearly describes your desire:

1	2	3	4	5
strongly desire <u>not</u> to continue	do <u>not</u> desire to continue	<u>neither</u> desire nor not desire to continue	desire to continue	strongly desire to continue

Linda Carlson's TEST RESULTS:
 ACHIEVEMENT
 verbal 75th percentile
 math 72nd percentile
 I.Q. 110

Linda Carlson is a senior in your school. She walks in to your counseling office and says: "I don't know why kids, or even adults, have so much trouble making decisions. I mean, all I do is weigh both sides of an issue, map out the consequences of each side, and it's then obvious which is right. It seems so easy; just rely on your mind to solve problems. Paying attention to your feelings just confuses the issue."

Now, how would you respond to Linda? Look at the responses below and place a "1" beside the response you feel to be the most helpful, a "2" beside the response you feel to be the second most helpful, a "3" beside the response you feel to be the third most helpful, and so on until you have ranked all six responses according to how helpful you feel they would be:

- ___ a. Feelings aren't always inappropriate, Linda. You might consider yours more when making decisions.
- ___ b. You feel confident when you make decisions, but irritated when others are indecisive.
- ___ c. You seem to be wondering why haven't others learned to make rational decisions like you.
- ___ d. Although others may make decisions differently from you, you've found a way that works for you and that's great.
- ___ e. Behind your impatience, Linda, it might be that you find decisions aren't quite so easy for you when you allow your feelings to enter in.
- ___ f. How did you learn to make decisions in such a logical, rational way?

Please continue below:

How much do you feel you would enjoy continuing a counseling relationship with Linda, if that choice were available? Your decision should reflect your personal desire to continue, and should not reflect whether or not you feel Linda needs further counseling. Look at the scale below and indicate the degree of your desire to continue the counseling relationship with Linda by circling one of the five points on the scale which most nearly describes your desire:

1	2	3	4	5
strongly desire not to continue	do <u>not</u> desire to continue	<u>neither</u> desire nor not desire to continue	desire to continue	strongly desire to continue

Paul Brown's TEST RESULTS:

ACHIEVEMENT

verbal	75th percentile
math	72nd percentile
I.Q.	110

Paul Brown is a senior in your school. He walks in to your counseling office and says: "I just really think I'd like to be a nurse. I'm sure the training will be hard work for me because I haven't had much experience or background, and I know not many men are nurses. But from all I read and those I talk to, it sounds like it would be challenging and fun and I'd learn so much."

Now, how would you respond to Paul? Look at the responses below and place a "1" beside the response you feel to be the most helpful, a "2" beside the response you feel to be the second most helpful, a "3" beside the response you feel to be the third most helpful, and so on until you have ranked all six responses according to how helpful you feel they would be:

- a. If I were you, Paul, I'd investigate the field even more by talking with men in the nursing field and reading more in our library career center on specific job activities.
- b. You're saying despite some weaknesses in your academic background and the fact that you're a male, that being a nurse is really an appealing career.
- c. Non-traditional careers are opening up to men, Paul, and I think the desire and enthusiasm you express will help you succeed.
- d. You realize it won't be easy, but you're really excited by the prospect of being a nurse.
- e. What are some ways you could compensate for your background or sex?
- f. Your enthusiasm is so great that you might be overlooking the possibility that being a nurse might be impractical or inappropriate.

Please continue below:

How much do you feel you would enjoy continuing a counseling relationship with Paul, if that choice were available? Your decision should reflect your personal desire to continue, and should not reflect whether or not you feel Paul needs further counseling. Look at the scale below and indicate the degree of your desire to continue the counseling relationship with Paul by circling one of the five points on the scale which most nearly describes your desire:

1	2	3	4	5
strongly desire <u>not</u> to continue	do <u>not</u> desire to continue	<u>neither</u> desire nor not desire to continue	desire to continue	strongly desire to continue

Shirley Adams' TEST RESULTS:

ACHIEVEMENT

verbal	75th percentile
math	72nd percentile
I.Q.	110

Shirley Adams is a senior in your school. She walks in to your counseling office and says: "Gosh, I don't know about me. I just find myself experiencing a whole range of feelings almost every day. When my friends are happy or depressed, I feel those same things - because I care, I guess. Movies and books make me cry so easily; I just imagine myself as one of the characters and I feel what they must be feeling. I react so strongly to everything, and my feelings seem to change constantly."

Now, how would you respond to Shirley? Look at the responses below and place a "1" beside the response you feel to be the most helpful, a "2" beside the response you feel to be the second most helpful, a "3" beside the response you feel to be the third most helpful, and so on until you have ranked all six responses according to how helpful you feel they would be:

- a. You experience wide mood swings, and that worries you.
- b. I think you're telling me that you feel what others are feeling, whether they're real friends or characters in a movie or book.
- c. It's a good quality to be able to feel deeply, and I'm sure your friends appreciate your caring, Shirley.
- d. Do your emotions seem out of control to you, or excessively changeable?
- e. Your emotions overwhelm you, Shirley, because you get overly involved with so many things going on around you.
- f. You'd probably be more peaceful if you made an effort to get yourself on more of a middle ground, rather than feeling such peaks and valleys.

Please continue below:

How much do you feel you would enjoy continuing a counseling relationship with Shirley, if that choice were available? Your decision should reflect your personal desire to continue, and should not reflect whether or not you feel Shirley needs further counseling. Look at the scale below and indicate the degree of your desire to continue the counseling relationship with Shirley by circling one of the five points on the scale which most nearly describes your desire:

1	2	3	4	5
strongly desire <u>not</u> to continue	do <u>not</u> desire to continue	<u>neither</u> desire nor not desire to continue	desire to continue	strongly desire to continue

APPENDIX K
STATEMENT CONTENT CATEGORIES
AND COUNSELOR RESPONSE LEVELS IDENTIFIED

Statement #1:

- "I feel that I'm really growing up, you know? More and more I want to be on my own, making my own decisions and accepting the consequences of my decisions. I don't want to be doing things because my parents or my teachers or even my friends tell me to, but instead I'm trying to live my life with me deciding what to do."
- a. You like making your own decisions and being more on your own, maybe because it makes you feel more grown up and adult when you do. 5: analyzing or interpreting
- b. What kinds of decisions are you especially wanting to make on your own? 3: questioning
- c. It's probably important that you at least consider what your friends and especially your family suggest and respect their needs and wishes, too. 6: advising or evaluating
- d. It's really good that you are becoming more independent from your friends and family. All teenagers will do that sooner or later. 4: supporting or reassuring
- e. If I understand you, you want to decide things for yourself--be more on your own. 2: clarifying or summarizing
- f. You feel very strongly about making your own decisions. 1: reflecting or understanding of feeling

Statement #2:

"Ever since my mother died, I can't think of anything else. I miss her so much--being able to talk with her about my problems, and just always having her there made me feel so good. I have this huge weight in my chest since she's gone; I think about her during class and cry myself to sleep sometimes at night. I wonder if this awful sadness will ever go away."

statement
of grief

- | | |
|---|---|
| a. The grief you feel is very natural when you lose such an important person, and as time goes on I know you'll feel less sad. | 4: supporting or reassuring |
| b. When you feel the sadness coming on, you might want to try to talk to somebody about your feelings, and in this way help yourself to understand your mother's death. | 6: advising or evaluating |
| c. Maybe the reason you're feeling so sad for so long is because you're reluctant to "go on" without the security of your mother. | 5: analyzing or interpreting |
| d. You're feeling so sad about your mother, and feel that you're going to miss her for a long time still. | 1: reflecting or understanding of feeling |
| e. What do you think are some things you could do to help you feel less sad? | 3: questioning |
| f. It sounds like you're saying you're so sad much of the time and wonder if the sadness will ever end. | 2: clarifying or summarizing |

Statement #3:

"I think I have a right to be honest about how I feel or what I think. I feel good about being straightforward even though others sometimes misunderstand or disagree with me. I like being able to take care of myself and not rely on others to reassure me I'm right or okay. I trust my feelings." statement of assertiveness

- | | |
|--|---|
| a. Perhaps you might try not being quite so direct and blunt, but more gentle or tactful in your honesty. | 6: advising or evaluating |
| b. You feel pretty self confident and, well, right and just about being honest with others. | 1: reflecting or understanding of feeling |
| c. Although others may sometimes disagree with your opinions, you'll find that being honest has rewards, because others will always know where you stand. | 4: supporting or reassuring |
| d. What do you think are some reasons others sometimes misunderstand when you are straightforward? | 3: questioning |
| e. It sounds like you're saying that you feel good about yourself being honest whether or not others misunderstand. | 2: clarifying or summarizing |
| f. It seems that it's really important to you to be assertive because you feel you might lose something if you were to tone down your straightforwardness. | 5: analyzing or interpreting |

Statement #4:

"I don't know why kids, or even adults, have so much trouble making decisions. I mean, all I do is weigh both sides of an issue, map out the consequences of each side, and it's then obvious which is right. It seems so easy; just rely on your mind to solve problems. Paying attention to your feelings just confuses the issue."

statement of
rationality

- | | |
|---|---|
| a. Feelings aren't always inappropriate. You might consider yours more when making decisions. | 6: advising or evaluating |
| b. You feel confident when you make decisions, but irritated when others are indecisive. | 1: reflecting or understanding of feeling |
| c. You seem to be wondering why haven't others learned to make rational decisions like you. | 2: clarifying or summarizing |
| d. Although others may make decisions differently from you, you've found a way that works for you and that's great. | 4: supporting or reassuring |
| e. Behind your impatience, it might be that you find decisions aren't quite so easy for you when you allow your feelings to enter in. | 5: analyzing or interpreting |
| f. How did you learn to make decisions in such a logical, rational way? | 3: questioning |

Statement #5:

"I just really think I'd like to be a nurse (electrician-female version). I'm sure the training will be hard work for me because I haven't had much experience or background, and I know not many men (women-female version) are nurses (electricians-female version). But from all I read and those I talk to, it sounds like it would be challenging and fun and I'd learn so much."

statement of non-traditional career choice

- | | |
|--|---|
| a. If I were you, I'd investigate the field even more by talking with men in the nursing field (women in the electrical field) and reading more in our library career center on specific job activities. | 6: advising or evaluating |
| b. You're saying despite some weaknesses in your academic background and the fact that you're a male (female), that being a nurse (electrician) is really an appealing career. | 2: clarifying or summarizing |
| c. Non-traditional careers are opening up to men (women), and I think the desire and enthusiasm you express will help you succeed. | 4: supporting or reassuring |
| d. You realize it won't be easy, but you're really excited by the prospect of being a nurse (electrician). | 1: reflecting or understanding of feeling |
| e. What are some ways you could compensate for your background or sex? | 3: questioning |
| f. Your enthusiasm is so great that you might be overlooking the possibility that being a nurse (electrician) might be impractical or inappropriate. | 5: analyzing or interpreting |

Statement #6:

"Gosh, I don't know about me. I just find myself experiencing a whole range of feelings almost every day. When my friends are happy or depressed, I feel those same things-- because I care, I guess. Movies and books make me cry so easily; I just imagine myself as one of the characters and I feel what they must be feeling. I react so strongly to everything, and my feelings seem to change constantly."

statement of
emotionality

- | | |
|--|---|
| a. You experience wide mood swings, and that worries you. | 1: reflecting or understanding of feeling |
| b. I think you're telling me that you feel what others are feeling, whether they're real friends or characters in a movie or book. | 2: clarifying or summarizing |
| c. It's a good quality to be able to feel deeply, and I'm sure your friends appreciate your caring. | 4: supporting or reassuring |
| d. Do your emotions seem out of control to you, or excessively changeable? | 3: questioning |
| e. Your emotions overwhelm you because you get overly involved with so many things going on around you. | 5: analyzing or interpreting |
| f. You'd probably be more peaceful if you made an effort to get yourself on more of a middle ground, rather than feeling such peaks and valleys. | 6: advising or evaluating |

APPENDIX L
INSTRUCTIONS TO RATERS

On the bottom of this page and on the following page you will find three hypothetical statements a student might make to a counselor. Following each statement are six possible responses a counselor might make to the student. Each response represents one of six levels from the Continuum of Facilitative Responses described on the previous page. Please rank the responses following each student statement from most facilitative, "1," to least facilitative, "6," using the Continuum as your model and using each number only once:

INSTRUCTIONS TO RATERS

On the following pages you will find six hypothetical statements a high school student might make to a high school counselor. Each statement is designed to portray a specific category of content, and that content category follows the statement. Categories, defined on the following page, are assertiveness, emotionality, grief, independence, non-traditional career choice, and rationality. Please evaluate the student statement for its content validity; that is, for its plausibility and authenticity as either a female or male client statement, and for the accuracy of its intended content. Write your suggestions for improvement directly on the page for discussion later.

Following each client statement are six possible responses a counselor might make to the student. Each response is designed to represent one of the six levels of response from the Continuum of Facilitative Responses, and the level follows the counselor response. Please evaluate each counselor response for its plausibility and authenticity as a counselor response, for the accuracy of its intended content, and for its harmony with the client statement preceding it. Write your suggestions for improvement directly on the page for discussion later.

APPENDIX M
 RATER RESPONSES TO CLIENT STATEMENTS
 AND COUNSELOR RESPONSES

Statement and Response No.	Raters and Type of Change			Type of Change Made
	1	2	3	
#1	word	0	0	word*
a	0	0	0	0**
b	0	0	0	0
c	0	0	0	0
d	0	0	0	0
e	0	0	0	0
f	0	0	word	word
#2	0	0	0	0
a	0	0	word	word
b	0	0	phrase	phrase***
c	0	0	phrase	phrase
d	0	0	0	0
e	0	0	word	word
f	0	0	phrase	word
#3	0	0	0	0
a	0	0	word	word
b	0	0	phrase	word
c	0	0	0	0
d	0	0	0	0
e	0	0	0	0
f	0	0	phrase	phrase
#4	0	0	0	0
a	0	0	phrase	0
b	0	0	0	0
c	0	0	word	word
d	0	0	word	word
e	0	0	phrase	word
f	0	0	phrase	word
#5	0	0	0	0
a	word	0	word	word
b	0	0	0	0
c	0	0	phrase	phrase
d	0	0	0	0
e	0	0	0	0
f	0	0	0	0

Statement and Response No.	Raters and Type of Change			Type of Change Made
	1	2	3	
#6	0	0	0	0
a	0	0	phrase	phrase
b	0	0	0	0
c	0	0	word	word
d	0	0	phrase	phrase
e	0	0	word	word
f	0	0	0	0

* = 1 to 3 words

** = no changes suggested

*** = 4 to 10 words

APPENDIX N
INDEPENDENT VARIABLES FOR THREE-FACTOR
ANALYSIS OF VARIANCE

Counselor Sex	Client Sex	Profile					
		IND	GRE	AST	RAT	CAR	EMO
		Ss	Ss	Ss	Ss	Ss	Ss
M	M	1	8	3	10	5	12
		13	20	15	22	17	24
		25	32	27	34	29	36
	
	
		313	308	315	310	317	312
		325	320	327	322	329	324
	F	7	2	9	4	11	6
		19	14	21	16	23	18
		31	26	33	28	35	30
	
	
		319	314	309	316	311	318
		331	326	321	328	323	330
F	M	6	11	4	9	2	7
		18	23	16	21	14	19
		30	35	28	33	26	31
	
	
		210	215	220	213	218	211
		222	227	232	225	230	223
	F	12	5	10	3	8	1
		24	17	22	15	20	13
		36	29	34	27	32	25
	
	
		216	209	214	219	212	217
		228	221	226	231	224	229

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BIOGRAPHICAL SKETCH

Lyn Elaine Ferguson was born in Denver, Colorado, on June 1, 1947. Her parents are Evelyn and Chester Ferguson. Her sisters and brother are Eileen Ferguson, Charlene Foxx, and John Ferguson.

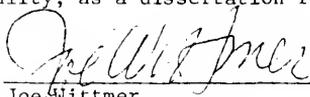
Ms. Ferguson completed high school at Durango High School, Durango, Colorado, in 1965. She attended the University of Northern Colorado, Greeley, Colorado, where she received a Bachelor of Arts degree in mathematics in 1969 and a Master of Arts degree in psychology, counseling, and guidance in 1971. She attended the University of Florida, Gainesville, Florida, and received a Specialist in Education degree in counselor education in 1973 and a Doctor of Philosophy degree in counselor education in 1980.

Ms. Ferguson served as Assistant Director of a coeducational dormitory at the University of Northern Colorado in 1971. She was Resident Counselor-Dormitory Director for Upward Bound, Greeley, Colorado, during the summers of 1970 through 1972. From 1973 through 1978, she was a counselor at Roosevelt High School, Johnstown, Colorado. Since 1979, Ms. Ferguson has been on the counseling staff of Laramie County Community College, Cheyenne, Wyoming.

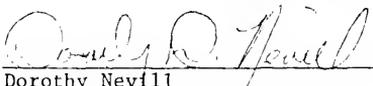
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Joe Wittmer
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This dissertation was submitted to the Graduate Faculty of the Department of Counselor Education in the College of Education and to the Graduate Council, and was accepted as partial fulfillment of the requirements for the degree of Doctor of Philosophy.

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