

ABSTRACT

THE EFFECTS OF MODELING AND INFORMATION-ONLY ON COUNSELING SELF-REFERRAL AMONG MIDDLE SCHOOL STUDENTS

By

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The primary purpose of this investigation was to test the relative effect of modeling with vicarious reinforcement procedures versus information-only procedures as methods of motivating middle school students to volunteer for counseling.

An experiment was conducted using a post-test only control group design. The subject pool for this study was students, currently enrolled in one of the two middle schools serving the East Lansing Public School District, who had not volunteered for counseling during the 1969-70 school year. One hundred and eighty (180) subjects, divided equally by building, grade-level, and sex were randomly drawn and ordered to treatment groups. These procedures resulted in a thirty-six cell matrix ($2 \times 2 \times 3 \times 3$) with five replications per cell, and with subject and treatment variables completely crossed.

The modeling and information-only treatments contained information about the counseling and self-referral process, whereas the control group treatment specifically avoided any references to counseling, presenting only information about the local city and school history. All treatments were audiotaped and presented on an individual subject basis within a grouped language laboratory setting. Each subject received his program via headphones controlled from a master control panel, a procedure which facilitated subject independence. The entire treatment procedure, including the subsequent administration of the acquisition measure, took approximately fifty minutes, after which the subjects returned to their regular classes. The subjects were not made aware of the fact that three different treatments had been administered simultaneously. Two weeks after the administration of the treatments, the acquisition measure was repeated, and the interest in making a self-referral measure was administered. During the two-week interim, a record was kept of the number of self-referrals for counseling made by the one hundred and eighty subjects. Thus, specifically measured was the acquisition response or knowledge about the counseling and self-referral process, the actual performance of the desired behavior, and the level of interest in making a self-referral.

It was hypothesized that the subjects who received the modeling treatment procedures would score higher on

acquisition (immediately and over time), on performance, and on interest than would the subjects who received the information-only treatments. It was hypothesized that the subjects who received information-only treatment procedures would score higher on each measure than would the subjects who received the placebo-control treatment procedures. Additional hypotheses were formulated to investigate the effect of sex, grade-level, and building on acquisition, performance and interest. Hypotheses were also stated to investigate all interaction between treatments and sex, grade-level, and building on acquisition, performance, and interest.

Statistical analyses were done using an analysis of variance program, treating the acquisition measures within a repeated measures design. The differences predicted for treatments were investigated using planned comparisons. The interest measure was treated within an analysis of variance design. It was also planned to treat the performance measure within an analysis of variance design, but the failure to obtain meaningful differences warranted no further statistical procedures.

No significance was obtained for any of the sources of variation for the analysis of variance performed on the data from the interest measure. The mean level of response indicated that the subjects were on the average "not sure" of their likelihood to make an appointment to see a counselor.

There were no differences in the level of acquisition responses produced by the modeling treatment as compared to the information-only treatment, either immediately or over time. The information-only treatment produced a higher level of acquisition responses than the placebo-control procedures, immediately following treatment and after a two-week interval. The mean level of acquisition responses differed for subjects grouped according to sex and grade-level, but not according to building. Statistically significant effects were found for the treatment by time interaction and the sex by time interaction. The treatments did not interact with sex, grade-level, or building. A fourth order interaction of building x grade-level x sex x treatment x time was thought to be spuriously significant and attributed to a Type I error.

These findings were discussed in terms of the implications for future research and practice, and it was concluded that the treatments used are viable and efficient methods of presenting information which may be especially useful when counselor time is at a premium.

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TABLE OF CONTENTS

Chapter	Page
I. THE PROBLEM, RATIONALE, AND REVIEW OF THE LITERATURE	1
Problem and Rationale.	1
Review of the Literature.	5
Voluntary versus Required Counseling	5
Counseling as a Learning Process	10
Social Model Learning	12
Symbolic Models	16
Social Models in Counseling	16
Summary	18
II. EXPERIMENTAL DESIGN AND PROCEDURES	20
Experimental Design	20
Subjects	20
Experimental Treatments	24
Treatment Content	25
Student Social Models (T ₁).	25
Counselor-Presented Information (T ₂)	26
City and School History (T ₃)	26
Experimental Procedures	27
Treatment Procedures	29
Criterion Measures.	30
Post-test Acquisition Measure (M _{1A})	30
Follow-up Acquisition Measure (M _{1B})	31
Performance Measure (M ₂)	31
Self-Referral Interest Measure (M ₃)	31
Follow-up Procedures	32
Statement of the Hypotheses.	32
Statistical Analyses	34

Chapter	Page
III. RESULTS	37
Overview	37
Acquisition	39
Performance	47
Interest	49
Summary	51
Acquisition	52
Performance	53
Interest	54
IV. SUMMARY, DISCUSSION, AND IMPLICATIONS . . .	55
Summary	55
Discussion	59
Implications.	63
Implications for Research.	63
Implications for Practice.	64
BIBLIOGRAPHY.	66
APPENDICES	
Appendix	
A.	71
B.	95
C.	112
D.	121
E.	123
F.	127
G.	129
H.	134
I.	135

LIST OF TABLES

Table	Page
2.1. Non-Volunteers and Total Enrollment on Date of Treatment	23
2.2. Cell Frequency Matrix.	24
2.3. Design Matrix	36
3.1. Acquisition Measure Repeated Measures Analysis of Variance Summary.	38
3.2. Performance Measure Summary (Total Self- Referrals for Counseling--Two Weeks Post- Treatment).	48
3.3. Interest Measure--Analysis of Variance Summary.	51

LIST OF FIGURES

Figure	Page
3.1. Treatment x Time Interaction for Acquisition .	42
3.2 Sex x Time Interaction for Acquisition . . .	45

CHAPTER I

THE PROBLEM, RATIONALE, AND REVIEW OF THE LITERATURE

Problem and Rationale

It is characteristic of American education that each school system enjoys a certain degree of local autonomy, a provision which allows for the development of a program which is especially well-suited to the needs of a particular community. During the last several decades, counseling programs have been developed in virtually every school system. The emphases of these programs and the methods by which they are carried out in part reflects the concerns of the populace being served, and in part the larger environment to which this group relates.

It is understandable that there is more than one opinion among counseling professionals, school officials, and school critics over the way in which students should be served by counselors. The major positions taken are those of required counseling for all students as opposed to a system of participation solely on a voluntary basis. Advocates of each position premise their actions on theoretical, ethical, and pragmatic considerations. Is

counseling necessary for everyone? Is it ethical to require counseling for those who do not voluntarily request it? Will the shy, withdrawn student volunteer for services if left to himself? Are counseling services primarily oriented to the middle-class student? These and similar questions have been raised and some investigated with conflicting results. It is possible to find major support for either position in the literature. Because of the diverse and complex situational problems encountered in the schools, it may seem justifiable at times to support either position. Although sound arguments have been advanced in favor of required counseling procedures, there is greater support and tradition among theorists, counselors, and students themselves for a system of voluntary counseling.

There is a need to carefully study the entire counseling process, from pre-counseling perceptions of students to the techniques used by counselors to effect behavior change. Research is needed to demonstrate methods which can change the actual behavior of clients. In this respect, recent developments in counseling research are encouraging. The contributions of Krumboltz and his associates are examples of the efforts being made to apply new techniques to counseling practice. The principles of behavior modification based on modeling techniques have been demonstrated as effective procedures.

The bulk of counseling research has focused on the counselor and the client, including such variables as their characteristics and traits, attentiveness, verbalization rate, non-verbal productions and many more. Few studies have attempted to study the characteristics of non-clients. Very little research attention has been given to methods of influencing a non-client to become a client. When programs of voluntary counseling in the school setting fail to reach a significant number of students, the perceived alternative has been to institute required counseling procedures.

There is research evidence to show that information alone has an effect on student perception of counseling. One way to encourage self referral may be through providing descriptive and procedural information. It may be, however, that typical orienting type programs are not sufficiently motivating. More powerful procedures need to be tried.

The principles of imitation or modeling with reinforcement have been reliably demonstrated as effective means of changing behavior (Bandura & Walters, 1963; Bandura, 1969). The effectiveness of using model-reinforcement techniques to familiarize students with counseling needs to be tested as a method of encouraging self-referral among non-volunteers. If such a technique is found to be effective, practical, and easy to administer, more students would be counseled on a voluntary

basis, and the instances of required counseling, with its attendant disadvantages, reduced.

It was the general purpose of this study to investigate the self-referral for counseling behavior of a group of middle school students classified as non-volunteers. The specific purpose was to test the relative efficacy of two methods of motivating non-clients to volunteer for counseling. It was assumed that the method of presentation of information about counseling and self-referral would be an important variable affecting the acquisition and performance of the desired behavior. The treatment variables were the presence of models with vicarious reinforcement and parallel information presented by a counselor. The subject variables were sex, grade-level, and building. Answers to the following specific questions were sought: Does the social modeling treatment have a greater effect than the informational treatment on the acquisition of knowledge about the counseling and self-referral process? On the performance of self-referral behavior? On the interest in making a self-referral? Does the informational treatment have a greater effect than the placebo-control treatment on the acquisition of knowledge about the counseling and self-referral process? On the performance of self-referral behavior? On the interest in making a self-referral?

Of secondary interest were answers to the following questions: Does the sex, grade-level, or school of the subject have an effect on the acquisition of knowledge about, or performance of the self-referral behavior taught by means of social modeling and information-only? Or on the interest in making a self-referral?

Review of the Literature

Voluntary versus Required Counseling

There are many advocates of the position that counseling, to be effective, must be voluntarily sought by the client. Hobbs, et al. (1953) reporting to the American Psychological Association as a Committee on Ethics recommended that clients must be permitted the freedom to reject or accept the counseling relationship. Ethical considerations regarding the right to privacy are cited in support of this position. Williamson (1965) refers to this entire line of thinking as the doctrine of voluntarism. Pine and Boy (1966) concerned with this issue in the school setting, proposed that students be permitted the decision to freely use or to refrain from using the counseling service. A number of theorists have stated that voluntarism is a necessary prerequisite for effective counseling (Wolberg, 1954; Belden, 1956; Rogers, 1961; Beier, 1962; Arbuckle, 1965; Grummon, 1965). These, among other writings from which counselors draw their orientation and

technique, assume a client who is willingly referred or voluntarily present for counseling. After reviewing four major theories for their commonalities, Stefflre (1965) concluded

While not always made explicit, it would seem that the several theories are agreed that the clients who want counseling are more apt to profit from it than those who don't. The unmotivated client may be dealt with, but the likelihood of success is felt to be minimal. The school or college which drags the reluctant client to the counselor's door will find little optimism in the counselor's assessment of his chances of being helpful. Motivation for counseling would appear to be a necessary condition for behavior change and counseling would appear to be a necessary condition for behavior change and counseling "success" [p. 273].

Virtually every definition or statement of purpose for counseling either states explicitly, or permits the inference, that the client is a willing participant. For example, the central purpose of counseling as seen by Krumboltz (1965) "is to help the client resolve those problems for which he requests help [p. 384]." Others similarly maintain that the focus of the counseling process is to promote specific behavioral changes based upon goals mutually established by the client and the counselor (Bandura, 1962; Michael & Meyerson, 1962; Wrenn, 1962; Bijou, 1966; Patterson, 1966; Woody, 1969; Thoresen, 1969).

Several investigations have attempted to measure student preference for either voluntary or required counseling. Esper (1964) reported a preference for voluntary counseling among junior high school students with girls demonstrating a greater freedom to use counseling

services than boys. Boys were more likely to be referred. Brough (1968) also found a higher rate of self-referral among girls. He observed that more than seven out of ten ninth grade students who had counseling service available to them while in junior high school preferred a voluntary system of counseling to required procedures. Seventh grade students who had not yet had the opportunity for counseling also indicated a preference for a voluntary program. In this group, boys had a greater stated preference for the voluntary program. Pine and Boy (1966) found an even greater stated preference among students for voluntary counseling.

Brown and Calia (1968) investigating self-initiated versus required student interviews among college freshmen reported no significant difference between the two groups in the rate of return for a second appointment. It is worthwhile to note, however, that the required group had received a letter from the chairman of the Psychology and Guidance Department informing them of their scheduled appointment and that each of these required appointments took significantly less time to complete. Nevertheless, the authors concluded that there is "no conclusive evidence that would discourage counselors from routinely calling in all students for initial interviews [p. 405]" and were "led to speculate that the method of initiating contact is more likely to be a problem for counselors than for clients [p. 405]." Stewart (1969) also points out that "counselors

frequently feel that they are working with uninterested or unmotivated students [p. 213]." Counselor motivation and interest may be adversely affected when confronted with students who are required to see them.

Rational arguments for required counseling have been advanced on the basis that this procedure may uncover problems which would otherwise go unnoticed (Williams, 1966). Williamson (1965) notes that "some students who do not volunteer for counseling still may actually be in need of that which they do not desire [p. 245]." A number of other writers have called the doctrine of voluntarism into question (Matthewson, 1962; Kagan, 1964; Samler, 1964). It is recognized that to some students there is a stigma attached to contact with counselors, and it is argued that required counseling eases and equalizes the social situation for all students. Shy and withdrawn students might not volunteer for counseling. To others, the monopolization of counselors' time only by the aggressive or middle-class client is indefensible from both a financial and humanistic standpoint. For example, Tseng and Thompson (1968) suggest that ambitious, success-oriented, and affluent students are more likely to use counseling and guidance services than students with goals and ideals representative of a lower socio-economic class.

The position taken by a local school system is often more pragmatically based than theoretically premised.

A policy of requiring counselors to see each student at least once per school year may seem to be prudent in face of possible criticism that counseling is only used by a limited number of students.

The question of voluntary versus required counseling is far from being resolved. It appears that most theorists, counselors, and students are intuitively attracted to the doctrine of voluntarism. As Williamson (1965) points out, however, it is more difficult to establish a voluntary relationship with high school students than it is with college age clients. Presumably it is even more difficult to establish voluntary counseling relationships with children in the middle and elementary schools. It may be that required counseling programs are partly spawned out of this frustration.

Several studies show that merely the availability of counseling services in the school may affect the perceptions students have of the role of the counselor (Hanvey, 1963; Rippee, 1963). Pratte and Cole (1965) measured differences between the perceptions of referred and self-referred clients regarding the counselors' role following actual contact with the counselor. Self-referred students better understood the counselor's role. One possible implication is that self-referral may result from increased information about the counseling process and the counselor's role. Specific information regarding counseling

services was also found to affect college students' counseling expectations (Heetderks, 1965). Gawrys (1968) indicated that group, individual and pamphlet orientations to a junior high counseling program were equally effective in influencing favorable attitudes towards counselors and producing contacts, but suggest that continued programs might be necessary to maintain interest. Informational attempts made by counselors seem to have some effect on voluntarism.

Barry and Wolf (1962) have referred to the practice of routinely scheduling initial conferences with all students as absurd. It may be equally absurd to routinely wait for all students to knock on the counselors' door. Tyler (1963) calls for some "serious thinking about how we might open channels of communication with persons who now see no need for our assistance [p. 210]." Calia (1966) states that "a variety of methods for motivating recalcitrant clients to seek counseling needs to be developed, tried, and evaluated [p. 102]."

Counseling as a Learning Process

The words used to describe the counseling process may differ for different theories, but there is some agreement. Stefflre (1965) says that "most theorists in the field now would agree that counseling is a learning process, although they might have some sharp differences

as to what facilitates learning and how learning occurs

[p. 14]." Patterson (1966) states explicitly

Theories of counseling cannot be clearly separated from theories of learning, theories of personality, or general theories of behavior. Counselors deal with behavior . . . and the goal of counseling is the changing of behavior or personality in some respect or to some extent. Different approaches to counseling vary in the specific nature and extent of behavior change toward which they are directed, but all accept behavior change of some kind, including changes in attitudes, feeling, perception, values, or goals, as the objective of counseling. Since learning may broadly be defined as a change in behavior, then counseling is, of course, concerned with learning and thus with theories of learning [p. 7].

Williamson (1950) says

The interactions of the counselor and the counselee are, therefore, those of teacher and learner, and it is a highly personalized teaching and learning process. . . . The role of the counselor is clear, then--to teach or help the individual learn to understand and accept himself in terms of capabilities, aptitudes, and interest; to appraise them in terms of their implications or consequences; and, when appropriate, to substitute more adequate behavior to achieve desired life satisfaction that the individual has set as his personal goal [pp. 2-3].

Goodstein (1965) agrees "that counseling or therapy can be seen as a learning process through which the individual acquires an ability to speak to himself in appropriate ways so as to control his own behavior [p. 146]." Stefflre (1965) further states that "all counselors face and answer, openly or covertly, the basic pedagogic question 'What do I want this person to learn?' [pp. 274-75]."

The behavioral approach to counseling probably provides the most clear illustration of counseling as a learning situation. The behavioral counselor uses a

variety of approaches, characterized by specific learning tasks. The client is assisted in learning specific behavioral changes as an involvement from specific presenting problems to specific and mutually established goals (Thoresen, 1969). The client is not asked to develop "insight," but helped to learn specific skills to solve present problems and manage future difficulties. Stefflre (1965) affirms that "Behavioral theorists have the most clear and explicit plan for changing the behavior of clients [p. 260]." While not an exclusive feature of this approach, behavioral counseling frequently employs the principles of social model learning.

The same learning principles and kinds of techniques which are successfully used in the counseling process might also be effectively applied outside of the counseling process. The purpose of this study was to test experimentally two methods of teaching information about counseling and self-referral for counseling behaviors to a group of middle school students classified as non-volunteers. One of the experimental methods was based on the tenets of social model learning.

Social Model Learning

A number of different terms have been used to refer to the occurrence of matching responses. The most common are imitation, identification, observational learning, modeling, vicarious learning, copying, contagion, and

social facilitation. The concept of imitation or social model learning has been subsumed under and explained in terms of other learning theories for some time. A sufficient body of research on social model learning has been completed, reviewed, and presented to merit its separate consideration (Bandura & Walters, 1963; Bandura, 1969).

Social model learning has been shown to be an effective way to facilitate specific behavioral patterns on an individual or group basis. The basic tenet of social model learning is that it is possible to learn new behaviors or entire behavioral repertoires by the observation of other people's behavior and the consequences that follow. Efficient learning is extended from direct experience and consequence to vicarious processes as well.

Notable in the theoretical development of social model learning are the conceptualizations of Miller and Dollard (1941), Mowrer (1960), and Bandura (1965, 1969). Miller and Dollard (1941) refer to imitation as "matched-dependent behavior." This rubric designates that the subject, initially proceeding on a trial and error basis, is completely dependent on the behavioral cues of the model for which the model is reinforced. For learning to occur, it is necessary for a motivated subject to be positively reinforced for matching the model's responses. Imitative learning is thus contingent upon nearly identical responses which are then reinforced. It is apparent then, that the

response must already be in the subject's behavioral repertory.

Mowrer (1960) proposes a sensory feedback theory of imitative learning which is associated with classical conditioning rather than instrumental learning. Mowrer differentiates between the type of imitative learning taking place on the basis of whether the subject is directly or vicariously reinforced. Regardless, when the observer perceives that a behavior is rewarding, a positive value is established for the behavior which can then be reproduced through stimulus generalization when self-rewarding experiences are desired. Thus emotions are positively or negatively conditioned by sensory experiences, and reinforcement is an indispensable aspect of imitative learning.

Bandura (1969) takes issue with the emphases of the reinforcement and affective feedback theories. Neither distinguish, as does Bandura, between response acquisition and performance. As a result, the statements of Miller and Dollard (1941) do not account for the acquisition of matching behaviors independent of motivation, nor for learning in the absence of actual performance or direct reinforcement. Mowrer's (1960) affective feedback theory does not explain acquisition of matching responses in the absence of direct or vicarious reinforcement, nor for the acquisition of responses lacking a discernable affective valence.

Bandura (1969) proposes a contiguity theory of observational learning, based in part on his earlier research. According to this theory

. . . the acquisition of matching responses results primarily from stimulus contiguity and associated symbolic processes, whereas the performance of observationally learned responses will depend to a great extent upon the nature of reinforcing consequences to the model or to the observer [p. 128].

Response acquisition refers to the learning of modeled behavior in cognitive, representational forms; that is, retrievable images and verbal codes which serve a mediational function for later reproduction. Performance refers to the person's willingness to do that which he has learned and this, Bandura suggests, is governed by the nature of the reinforcement and consequences.

Not all individuals have the same perceptual threshold, incentive and motivation, or social learning history. Therefore it appears that stimulus contiguity, although necessary, does not always produce response acquisition. There is considerable research evidence to show that the characteristics of the model are important. To the extent that some characteristics command more attention and are perceived to have greater reinforcement potential, they are more likely to be imitated. Bandura (1969) postulates that model characteristics, possessing different probabilities of reinforcement, serve principally to focus attention to the modeling cues. Therefore, when specific characteristics are clearly ascribed to the

models, and appropriate cues are clearly presented, the verbal and imaginal coding process is facilitated. It is quite possible to measure a significant response acquisition in observers following a modeled event without obtaining any evidence of a performance response. Sufficient favorable incentives or motives must be provided to overcome negative conditions which encourage non-performance.

Symbolic Models

It is frequently neither practical nor possible in observational learning situations to present real-life models. Virtually any form of communication can be used to physically present models or to represent them. Bandura and Walters (1963) review numerous studies which involve the use of symbolic models and indicate that symbolic models may be as effective as real-life models in producing behavioral change. The present study used models presented by means of audiotape. In this way the content and method of presentation could be controlled.

Social Models in Counseling

It has been said earlier that it is difficult to separate theories of counseling from general theories of learning, personality, and behavior (Patterson, 1966). Many of the research findings reviewed by Bandura (1969) based on the principles of social model learning have

implications for theories of counseling and applications in practice. Social model learning has been demonstrated to be an effective method of changing specific behaviors and learning entire behavioral repertoires.

Until recently, no new procedures for counseling based on principles of imitation have been developed. The contributions of Krumboltz and his associates are among the notable exceptions. The majority of these studies have focused on the information-seeking behaviors among high school students (Krumboltz & Thoresen, 1964; Krumboltz & Schroeder, 1965; Krumboltz, Varenhorst & Thoresen, 1967; Thoresen, Krumboltz & Varenhorst, 1967; Thoresen & Krumboltz, 1968; Stewart & Thoresen, 1968; Thoresen, Hosford & Krumboltz, 1968).

Truax et al. (1966) reported success using modeling procedures in portraying ideal client behaviors to hospitalized mental patients and juvenile delinquents prior to therapy. Sarason (1968) using group leader-social models with institutionalized delinquents, reported greater success with modeled role-playing treatment than with role playing treatment alone. Thoresen (1967) as a part of behavioral counseling procedures with a disadvantaged black youth, used a modeled role-playing technique. Kramer (1968), using social models in conjunction with verbal reinforcement, increased the oral participation of college students in a group setting. Krieger (1969) was able to

affect the information-seeking behavior among students classified as educable mentally retarded. Myrick (1968) indicates that a self-referent model presented prior to counseling tended to increase the frequency of self-reference statements among junior high school subjects in an initial counseling interview. Long (1968) used modeling procedures as a pretraining device for counseling in an employment counseling setting. Results of the studies involving the use of social models in a counseling setting generally are supportive of the tenets of social model learning theory and indicate the feasibility of designing other applications for practice. Many of the studies cited, however, failed to test modeling procedures against a viable alternative confirming only that modeling has a greater effect than control procedures.

Summary

Voluntary programs of counseling are consistent with theories and definitions of counseling which assume a client's willing participation. In practice, when students who are judged to be in need of counseling fail to make a self-referral, it is common to require counseling. Several writers have urged that new methods be found which would encourage students to seek assistance.

Counseling research has largely ignored the non-client. Previous studies have shown that information about counseling tends to affect student perception of counseling,

the role of the counselor, counseling expectations, and attitudes toward counseling. The literature also indicates that students and counselors prefer voluntary procedures. Rather than instituting required procedures to contact non-volunteers who may be in need of assistance, it is proposed that more effective means of motivating reluctant students be found.

Social model learning has been demonstrated to be an effective means of changing specific behaviors and learning entire behavioral repertoires. Techniques applicable to the general learning process may be applicable to the pre-counseling and counseling process as well.

The present study is an experimental attempt to measure the relative efficacy of two methods of motivating non-clients to volunteer for counseling. The specific measures were the acquisition of knowledge about the counseling and self-referral process, the actual performance of self-referral behavior, and the interest in making a self-referral. The models were presented to the subjects by means of audiotape, which facilitated control over the content and method of presentation.

The following chapter contains a detailed description of the experimental design, procedures, and testable hypotheses.

CHAPTER II

EXPERIMENTAL DESIGN AND PROCEDURES

Experimental Design

The Post-test Only Control Group Design, described by Campbell and Stanley (Gage, 1963) was used in this study. This design is described as one of three true experimental designs which is especially useful where pre-tests are likely to be either reactive, inconvenient, or awkward. It is also recommended in cases where the treatment and post-test can logically be presented together. This design is based on the principle of true randomization to control for possible sources of invalidity. Pre-test measures are not necessary when subjects are randomly assigned to treatment groups. Analyses of variance is suitable to this experimental design.

Subjects

The experiment was conducted at the John A. Hannah Middle School and the C. E. MacDonald Middle School in East Lansing, Michigan. These two schools contain exclusively the sixth, seventh, and eighth grades of the East Lansing Public School District. The schools serve a

community which is primarily suburban-residential. All major socio-economic classes are represented in the school district, with the lower class accounting for a small percentage of the total population. The presence of Michigan State University in East Lansing, and the automotive and related industry in the adjoining city of Lansing contribute to the high percentage of homes representing professional and business occupations.

Several differences exist between the two middle schools which are worth noting. The John A. Hannah Middle School is characterized by the virtual absence of students from low socio-economic groups. School officials estimate that approximately 80 per cent of the students come from homes where at least one parent has a college degree. In terms of educational backgrounds of the parents, the students form a rather homogeneous group. The extensive married housing complex of Michigan State University is served by two elementary schools, both of which are feeder schools for the John A. Hannah Middle School. MacDonald Middle School serves a heterogeneous population, drawing from the extremes of well-to-do and low income families as well as middle-income families. The largest areas of substandard housing and luxury dwellings are included in this portion of the school district. In sum, the East Lansing Public School District serves a primarily white, middle-class, suburban population with a small percentage

of black, Mexican-American, and foreign born residents. The median value of an East Lansing home is twenty-one thousand dollars. The city limits encompass an estimated (1970) population of 58,000 residents, including the residents of Michigan State University dormitories and married housing units; 34,000 residents excluding the same.

At the time of this study there were 286 boys and 303 girls enrolled at John A. Hannah Middle School, and 261 boys and 290 girls enrolled at C. E. MacDonald Middle School. Only those students who had not volunteered for counseling during the 1969-1970 school year were considered the eligible subject pool for this study. Table 2.1 indicates the eligible subject pool (non-volunteers for counseling) as compared to the total enrollment by building, grade-level, and sex on the date of treatment.

The experimental subjects consisted of one hundred and eighty (180) students, an equal number of males and females, randomly drawn by building, grade-level, and sex from the eligible subject pool. Subjects randomly drawn were ordered to the three experimental treatment groups. These procedures resulted in a thirty-six cell matrix with subject and treatment variables completely crossed, and equal cell frequency ($n = 5$).

Each subject group corresponded to a grade-level within the school, with sixth grade designated as Group One (G_1), seventh grade as Group Two (G_2), and eighth

TABLE 2.1.--Non-volunteers and Total Enrollment On Date of Treatment.

		John A. Hannah		C. E. MacDonald	
		Non-Volunteers	Total Enrollment	Non-Volunteers	Total Enrollment
Sixth Grade	Male	73	102	69	95
	Female	57	99	37	90
Seventh Grade	Male	57	87	54	91
	Female	49	106	48	106
Eighth Grade	Male	64	97	43	75
	Female	53	98	38	94
Total		353	589	289	551

grade as Group Three (G_3). The three experimental treatments were administered simultaneously to subject groups. The desired information and behavior was presented by means of student social models under first treatment (T_1) conditions. The same basic information was narrated to the subjects receiving the second treatment (T_2). A documentary of local school and city history was presented to subjects receiving the placebo-control treatment (T_3). The thirty-six cell matrix with subject and treatment variables completely crossed and equal cell frequency is presented graphically in Table 2.2.

In anticipation of absences on the date of treatment, eighteen alternate subjects (nine male and nine

TABLE 2.2.--Cell Frequency Matrix.

			T ₁	T ₂	T ₃
John A. Hannah Middle School	G ₁	M	5	5	5
		F	5	5	5
	G ₂	M	5	5	5
		F	5	5	5
	G ₃	M	5	5	5
		F	5	5	5
C. E. MacDonald Middle School	G ₁	M	5	5	5
		F	5	5	5
	G ₂	M	5	5	5
		F	5	5	5
	G ₃	M	5	5	5
		F	5	5	5

female) per grade-level were also randomly drawn. Necessary substitutions were made and ordered to treatment after the daily school attendance reports were collected on the date of treatment.

Experimental Treatments

A major independent variable in this study was the type of treatment the subjects received. The three treatments were developed in written form prior to audio-tape recording. Several audiotapes of the treatments were made, using different actors for each tape. Five recordings were made of the script written for presentation by social models (T₁). Two of these recordings were marred

by slight audio distortion when played back on a different tape recorder. The three technically correct audiotapes were submitted for evaluation to a panel of four middle school counselors, one high school counselor, and one counselor educator. All six judges independently selected the same audiotape as a representative portrayal of an actual situation.

Two audiotapes, made of the script written for the presentation of information about the counseling and self-referral process by a male counselor (T_2), were also submitted to the same panel. The audiotape selected was judged to be an accurate portrayal, and equivalent to the model tape (T_1) in terms of enthusiasm in presentation. The male voice used for the audiotape produced for the placebo-control treatment was chosen by the experimenter for its pleasant tonal quality, and was also used for the introductory portions of the other treatments.

Treatment Content

Each of the treatments developed by the experimenter are described below:

Student Social Models (T_1): This audiotaped treatment, based on social model learning theory, featured a dialogue among three students. A narrator introduced each model and attributed accomplishments and characteristics to them that were considered important to the age

group of the subjects in this study. The male student model depicted as a former middle school student now successful in high school, conveyed the descriptive and procedural information about counseling to the other student models (one male and one female), portrayed as current enrollees in the local middle school. The high school model also served as the reinforcing agent to the middle school models. Reinforcement was given to any class of response which indicated an interest in, and willingness to seek counseling, and the understanding of the counseling and self-referral process. The entire script is presented (Appendix A).

Counselor-Presented Information (T₂): This treatment contained basically the same procedural and descriptive information about counseling as did the modeling treatment. The information was presented by a male counselor in a narrative style and without reinforcement. This presentation was in part based on the orienting remarks that the staff counselors had made during a classroom visit at the beginning of the year, and was developed in consultation with the counseling staff at both middle schools. The complete script as presented is attached (Appendix B).

City and School History (T₃): The content of this treatment was designed to avoid any reference to counseling,

and served as a placebo-control treatment. A brief documentary of the local city and school history was narrated via audiotape (Appendix C).

Experimental Procedures

Initial approval for conducting the experiment in the East Lansing Public Schools had been given by the Director of Instruction and the building principals, in accordance with the established research policy. The dates for the administration of the treatment and subsequent procedures were established in consultation with the middle school principals. The experimenter's primary requirement was that a two-week interval be found during which time no extensive out of school activity was planned for the students. This was necessary so that all of the subjects would be present for the treatment administration and later for the final measures which were taken after a two-week interval. In addition, the performance measure taken was the number of self-referrals for counseling among subjects during the two-week interval.

The calendar of school events for the John A. Hannah Middle School favored the interval of April 16-30, 1970. The experimental procedures were conducted at the C. E. MacDonald Middle School from May 5-19, 1970. Prior to these dates, a briefing was given to the members of the school staff and six staff members were obtained to conduct the treatment procedures.

Arrangements were made to present the audiotaped treatments in the language laboratory. The language laboratory in each school contained a Switchcraft, Inc. control panel, Model AV-3001-F, equipped with six sound tracks and wired to thirty headset receivers. The program sent to each receiver could be controlled by sound track switches on the master control panel. The use of this equipment made it possible to present the three treatments to the thirty subjects within each group in a classroom setting, but on an individual subject basis, facilitating subject independence.

The first three class periods of the day were allocated for the administration of the treatments. The groups were sequenced in the following order:

Group One	(sixth grade subjects)	8:25 - 9:20 a.m.
Group Two	(seventh grade subjects)	9:23 - 10:18 a.m.
Group Three	(eighth grade subjects)	10:21 - 11:16 a.m.

The subjects were notified by their homeroom teacher to report to the language laboratory instead of their regular class at the established time (Appendix D). As necessitated by absences, alternates were ordered to treatments in the same manner as the original subjects, and notified prior to the scheduled treatment administration to report to the language laboratory.

Treatment Procedures

The six faculty members were paired up to conduct the treatment procedures for the three groups. As the subjects entered the room, they were handed an instruction booklet (Appendix E), and assisted with the headphones at their assigned listening stations. Standard instructions (Appendix F) were read at various times during the treatment procedures. The audiotapes were monitored during presentation as a check against technical malfunction. The audiotapes were of unequal duration so that each could be started and stopped in turn. The longest tape was started first and removed last. Music was played during the brief interlude required for the operation of the control panel. The headphones were removed only at the conclusion of the experimental procedures, including the administration of the first measure. The entire procedure for each group took approximately fifty minutes, and students were immediately returned to their regular classes. The subjects were not aware that three different treatments had been administered simultaneously.

To make the administration of the repeated measure for acquisition (M_1A , M_1B) seem plausible to the control group, the measures were introduced as a convenient way for another person to have some questions answered while the students were assembled anyway.

Criterion Measures

To assess the level of acquisition and performance of self-referral behaviors among the subjects following treatments, several measures were taken on all subjects.

Post-test Acquisition Measure (M_{1A})

To measure the acquisition of the modeled information about the counseling process and self-referral behavior, sixty true-false items (Appendix G) were presented in written form to all treatment groups immediately following the audiotapes. The items were based on the information about counseling and self-referral as presented in the experimental treatments. The scoring key containing the correct item responses is attached (Appendix H). Slightly more false items than true statements were used, since false items tend to be better discriminators (Ebel, 1965).

The intrinsic ambiguity of the test items was guarded against by submitting eighty proposed test items to a critical review by three counseling professionals and a measurement expert. Twenty of the original items were discarded on this basis.

Ebel (1965) defends the use of true-false items because they "provide a simple, direct, and fundamental test of the student's knowledge [p. 126]," and ". . . the relative brevity of the true-false items means that

more such items, yielding more independent item scores, can be answered in a test of the same duration [p. 129]."

Follow-up Acquisition
Measure (M_{1B})

The same sixty true-false items were presented to all subjects after an interval of two weeks. The score was the total number of correct items.

Performance Measure (M₂)

A record was kept of the number of self-referrals for counseling made by the one hundred and eighty (180) subjects during the two week period immediately following the administration of the treatments.

Self-Referral Interest
Measure (M₃)

To assess the effect of the treatments on the level of interest subjects reported in making a self-referral, a twelve item scale was constructed which posed various situations (Appendix I). The selection of the twelve items was made on the basis of situations known to occur with middle school students. Each item was presented in exactly the same manner, and the subjects asked to rate their likelihood to seek counseling, from "definitely would" (an interest rating of 4) to "definitely would not" (an interest rating of 0). The total individual score was simply the sum of the interest ratings for the twelve items.

Follow-up Procedures

Two weeks after the administration of the treatments, each subject was given the follow-up acquisition measure (M_1B). Attached to and placed before the acquisition measure was the self reported scale of interest in making a self-referral (M_3). The distribution, administration, and collection of the measures took approximately thirty minutes for each group.

Statement of the Hypotheses

Of particular interest in this study was the effect of the treatments on the level of subject acquisition, performance, or interest as measured by each of the criterion measures. Bandura (1969) postulates that clearly specified model characteristics serve to focus attention on the modeling cues and facilitate the verbal and imaginal coding process. When model reinforcement is perceived, there is a greater likelihood for imitation to occur.

To investigate the comparative effect of the modeling treatment procedure, the information-only treatment procedure, and the placebo-control procedure on acquisition, performance, and interest, the following directional hypotheses were formulated:

- I. Subjects who receive the modeling treatment procedures will score higher on the acquisition measure immediately and after a two-week interval than will subjects who receive the information-only treatment procedures.

- II. Subjects who receive the information-only treatment procedures will score higher on the acquisition measure immediately and after a two-week interval than will subjects who receive the placebo-control treatment procedures.
- III. Subjects who receive the modeling treatment procedures will score higher on the performance measure than will subjects who receive the information-only treatment procedures.
- IV. Subjects who receive the information-only treatment procedures will score higher on the performance measure than will subjects who receive the placebo-control treatment procedures.
- V. Subjects who receive the modeling treatment procedures will score higher on the interest measure than will subjects who receive the information-only treatment procedures.
- VI. Subjects who receive the information-only treatment procedures will score higher on the interest measure than will subjects who receive the placebo-control treatment procedures.

To investigate the effect of sex, grade-level, and building on acquisition, performance, and interest, the following hypotheses were formulated:

- VII. The scores of the subjects grouped according to sex, grade-level, and building will not differ on acquisition.
- VIII. The scores of the subjects grouped according to sex, grade-level, and building will not differ on performance.
- IX. The scores of the subjects grouped according to sex, grade-level, and building will not differ on interest.

It was also of interest to investigate the effect of treatments for particular students. To investigate

these interactions, the following hypotheses were formulated:

- X. Treatment will not interact with sex, grade-level, and building on acquisition.
- XI. Treatment will not interact with sex, grade-level, and building on performance.
- XII. Treatment will not interact with sex, grade-level, and building on interest.

Statistical Analyses

Statistical analyses were done using an analysis of variance program written by Robert I. Jennrich, modified for use on the Michigan State University CDC 3600 computer by David J. Wright (1966).

The acquisition measures were treated within a repeated measures design involving M_1A as the post-test and M_1B as the follow-up test. The performance measure (M_2) and the interest measure (M_3) were treated within an analysis of variance design.

Planned comparisons were used to test Hypotheses I through VI. The complete $2 \times 2 \times 3 \times 3$ factorial design matrix with five replications per cell was used to test the remaining hypotheses. The design matrix is presented graphically in Table 2.3. The level of statistical significance was set at the .05 level for all of the hypotheses tests treated by means of analysis of variance procedures. Because the planned comparisons were not orthogonal, the overall error rate was held constant at

the .05 level by splitting the overall alpha of .05 equally among the four comparisons two at each time.

The results of these analyses are reported in the next chapter.

TABLE 2.3--Design Matrix.

VARIABLES:			Subject	Treatment		Measures	
Sex	Building	Grade-Level	Treatment	Repli- cation	Acqui- sition	Perform- ance	Interest
S	B	G	T	R	M ₁ A M ₁ B	M ₂	M ₃
S ₁	B ₁	G ₁	T ₁	R ₁	R ₅		
			T ₂	R ₆	R ₁₀		
			T ₃	R ₁₁	R ₁₅		
		G ₂	T ₁	R ₁₆	R ₂₀		
			T ₂	R ₂₁	R ₂₅		
			T ₃	R ₂₆	R ₃₀		
		G ₃	T ₁	R ₃₁	R ₃₅		
			T ₂	R ₃₆	R ₄₀		
			T ₃	R ₄₁	R ₄₅		
	B ₂	G ₁	T ₁	R ₄₆	R ₅₀		
			T ₂	R ₅₁	R ₅₅		
			T ₃	R ₅₆	R ₆₀		
		G ₂	T ₁	R ₆₁	R ₆₅		
			T ₂	R ₆₆	R ₇₀		
			T ₃	R ₇₁	R ₇₅		
		G ₃	T ₁	R ₇₆	R ₈₀		
			T ₂	R ₈₁	R ₈₅		
			T ₃	R ₈₆	R ₉₀		
S ₂	B ₁	G ₁	T ₁	R ₉₁	R ₉₅		
			T ₂	R ₉₆	R ₁₀₀		
			T ₃	R ₁₀₁	R ₁₀₅		
		G ₂	T ₁	R ₁₀₆	R ₁₁₀		
			T ₂	R ₁₁₁	R ₁₁₅		
			T ₃	R ₁₁₆	R ₁₂₀		
		G ₃	T ₁	R ₁₂₁	R ₁₂₅		
			T ₂	R ₁₂₆	R ₁₃₀		
			T ₃	R ₁₃₁	R ₁₃₅		
	B ₂	G ₁	T ₁	R ₁₃₆	R ₁₄₀		
			T ₂	R ₁₄₁	R ₁₄₅		
			T ₃	R ₁₄₆	R ₁₅₀		
		G ₂	T ₁	R ₁₅₁	R ₁₅₅		
			T ₂	R ₁₅₆	R ₁₆₀		
			T ₃	R ₁₆₁	R ₁₆₅		
		G ₃	T ₁	R ₁₆₆	R ₁₇₀		
			T ₂	R ₁₇₁	R ₁₇₅		
			T ₃	R ₁₇₆	R ₁₈₀		

CHAPTER III

RESULTS

Overview

The results of the data collected for this study are presented in this chapter, and the hypotheses are restated. The data were examined using planned comparison procedures and repeated measures analyses of variance. The planned comparisons were not orthogonal and were therefore tested with the overall experiment-wise error rate held constant at the .05 level. The overall alpha of .05 was split equally among the comparisons. All of the hypotheses examined by means of analysis of variance procedures were tested at the .05 level of significance.

The results of the overall tests of significance are presented in the following summary tables. The findings on the acquisition measure within the repeated measures design are summarized in Table 3.1. The raw data for the performance measure, a simple tally of the number of subjects who made a self-referral for counseling during the two-week period following the administration of the treatments, is presented in Table 3.2. The findings on

TABLE 3.1.--Acquisition Measure Repeated Measures Analysis of Variance Summary.

Source of Variation	Sum of Squares	Degrees of Freedom	Mean Square	F
Building (B)	54.444	1	54.444	.975
Grade (G)	551.739	2	275.869	4.943*
B x G	13.572	2	6.786	.122
Sex (S)	953.878	1	953.878	17.091*
B x S	6.944	1	6.944	.124
G x S	103.439	2	51.719	.927
B x G x S	27.339	2	13.669	.245
Treatment (T)	1925.972	2	962.986	17.254*
B x T	11.172	2	5.586	.100
G x T	348.228	4	87.057	1.560
B x G x T	85.761	4	21.440	.384
S x T	36.939	2	18.469	.331
B x S x T	204.672	2	102.336	1.834
G x S x T	246.794	4	61.699	1.105
B x G x S x T	181.394	4	45.349	.813
Error	8037.000	144	55.813	
Measure (M)	59.211	1	59.211	6.267*
B x M	6.944	1	6.944	.735
G x M	51.039	2	25.519	2.701
B x G x M	5.739	2	2.869	.304
S x M	60.844	1	60.844	6.440*
B x S x M	2.178	1	2.178	.230
G x S x M	32.272	2	16.136	1.708
B x G x S x M	7.172	2	3.586	.380
T x M	66.806	2	33.403	3.535*
B x T x M	28.672	2	14.336	1.517
G x T x M	11.994	4	2.999	.317
B x G x T x M	61.594	4	15.399	1.630
S x T x M	30.839	2	15.419	1.632
B x S x T x M	27.372	2	13.686	1.448
G x S x T x M	33.894	4	8.474	.897
B x G x S x T x M	102.828	4	25.707	2.721*
Error	1360.600	144	9.449	
Total	14739.289	359	41.057	

the interest measure within a straight-forward analysis of variance design are summarized in Table 3.3.

The findings are reported and discussed in terms of the specific hypotheses. The hypotheses are grouped according to the category of measure. Hypotheses I, II, VII, and X were formulated to investigate the acquisition response. Hypotheses III, IV, VIII, and XI were formulated to investigate the performance response. Hypotheses V, VI, IX, and XII were formulated to investigate the interest response. Planned comparisons were used to test Hypotheses I through VI. An omnibus F was used to test Hypotheses VII through XII.

Acquisition

The level of acquisition response was obtained through the use of a repeated measure. The computer program used generated the mean squares for the sources of variation, from which the appropriate terms were used to compute the planned comparisons and the F-ratios.

Hypotheses I and II, formulated specifically to test the effects of the treatments on acquisition, are stated below.

Hypothesis I. Subjects who receive the modeling treatment procedures will score higher on the acquisition measure immediately and after a two-week interval than will subjects who receive the information-only treatment procedures.

Hypothesis II. Subjects who receive the information-only procedures will score higher on the acquisition measure immediately and after a

two-week interval than will subjects who receive the placebo-control treatment procedures.

Four comparisons were made on the above hypotheses, testing the level of acquisition responses among the treatment groups. Hypothesis I was rejected. A F value of .559 was obtained for the comparison on the acquisition measure immediately after treatments, and a F value of .160 was obtained for the comparison after a two-week interval. Neither was significant at the .05 level. The values of the means for these comparisons were 50.783 and 50.200 for the immediate acquisition measure, and 49.167 and 49.000 for the acquisition measure repeated after a two-week interval. There were no differences in the level of response produced by the modeling treatment or the information-only treatment, either immediately or over time.

Hypothesis II was accepted. A F value of 5.500 was obtained for the comparison on the acquisition measure immediately after treatments, with mean values, of 50.200 and 44.700. A F value of 3.756 was obtained for the comparison after a two-week interval, with mean values of 49.000 and 45.083. Both were significant at the .05 level. The information-only treatment procedure produced a consistently higher rate of acquisition responses, both immediately after treatments and after a two-week interval, than did the placebo-control procedures.

On the basis of the comparisons made, no differences were found between modeling and information-only procedures, but both are more effective in producing acquisition responses than the placebo-control procedures.

The use of a repeated measures design also makes it possible to look at the dimension of time via the measures. Inspection of the overall test on the acquisition measure as presented in Table 3.1 reveals that an F-ratio of 6.267 for the effect of measure (time) was significant at an alpha level of .05. The mean value of 48.561 for the measure obtained immediately following the treatment was significantly different from the mean value of 47.750 for the measure obtained after a time interval of two weeks. The level of acquisition responses is lowered by the passage of time.

An F-ratio of 3.535, computed for the treatment by measure (time) interaction, was significant at the .05 level (Table 3.1). The means, previously reported when discussing the results of the planned comparisons, are represented as points on the graph displaying the treatment by measure (time) interaction (Figure 3.1.). The differences were greater immediately after the treatment procedures than after a two-week interval. The retention rate, or level of acquisition responses, for the modeling treatment group and the information-only group decreased with the passage of time, but the placebo-control group

Mean Scores

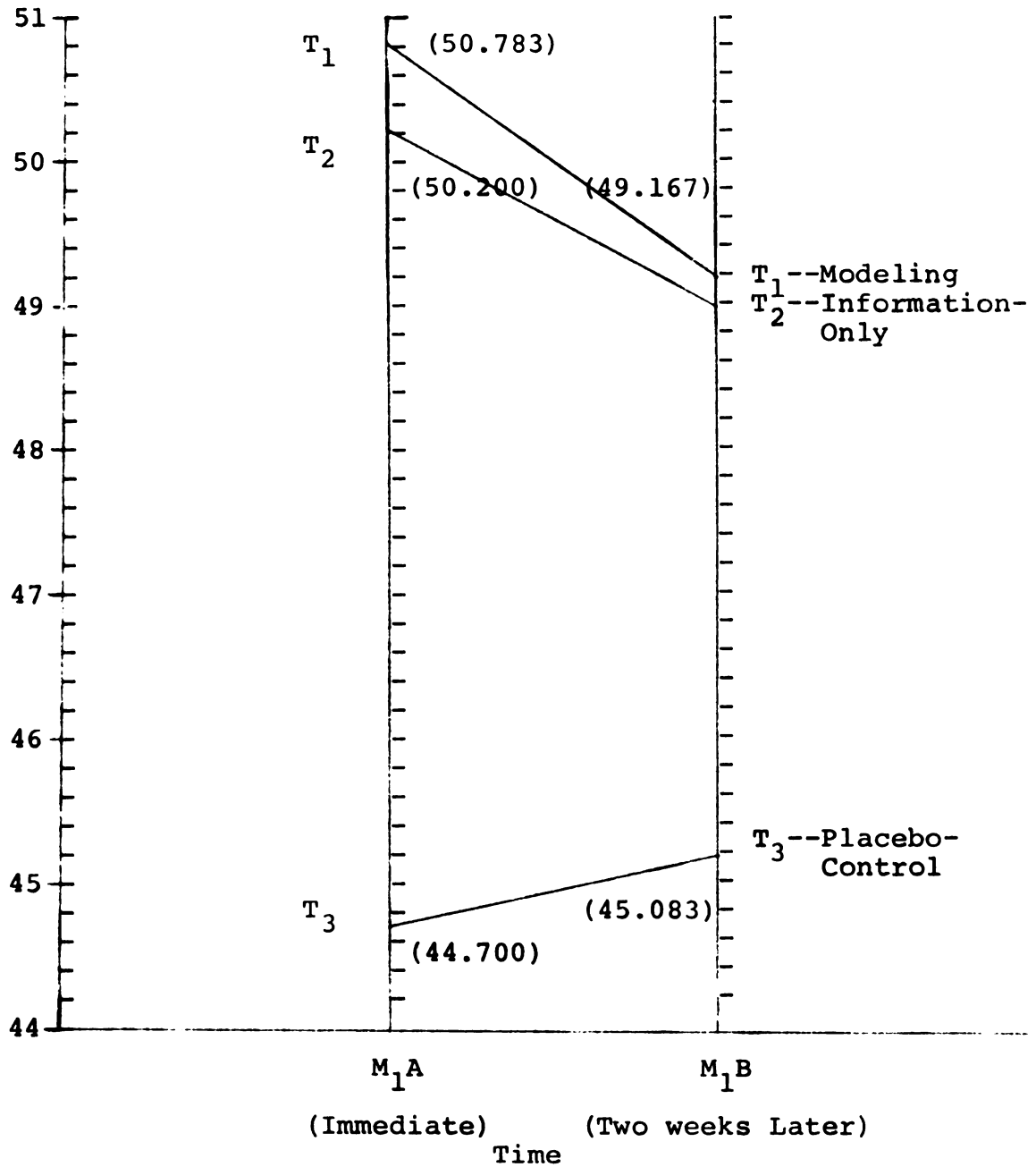


Figure 3.1.--Treatment x time interaction for acquisition.

became more like the other treatment groups. This accounts for the presence of the ordinal interaction. The interaction may be explained in terms of the natural maturation of the subjects. The placebo-control group received no additional information about the counseling and self-referral process. The level of acquisition response measured immediately after the treatment procedures can be thought of as the amount of information already acquired and retained over time. Under these circumstances, it would seem probable that the level of the acquisition response might increase. The modeling and information-only treatment groups, however, received additional information. Retention as measured by the level of acquisition responses was initially high and sloped downward over a two-week time interval. The explanation of natural maturation of the subjects might also include the possibility that the repeated measure may have focused attention on the counseling and self-referral process, and that it was impossible to experimentally isolate the subjects during the two-week interval following the treatment procedures and before the administration of the repeated measure.

To determine the effect of sex, grade-level, and building on acquisition, the following hypothesis was formulated.

Hypothesis VII. The scores of the subjects grouped according to sex, grade-level, and building will not differ on acquisition.

An F-ratio of 17.091, significant at the .05 level, was found for the differences according to sex, and is reported in Table 3.1. The mean response level of females on the repeated measure was 49.783, as compared to the mean response level of males of 46.528. Additional information is available through examination of the sex by measure (time) interaction. An F-ratio of 6.44, significant at the .05 level, was computed for the interaction of sex over time. Females not only outperformed males on each administration of the repeated measure, but the level of acquisition for females was extremely stable over time. The mean score for females immediately after treatment was 49.778, whereas two weeks later the mean score for females was 49.789. The corresponding mean scores for males were 47.344 and 45.711. The decrease in the acquisition level of males over time contributes to the significant ordinal interaction, between sex and time which is graphically presented in Figure 3.2. The scores of the subjects grouped according to sex differed for acquisition, rejecting the null hypothesis.

An F-ratio of 4.943, significant at the .05 level, was obtained for the acquisition level of subjects grouped according to grade-level. The mean scores corresponding to grades six, seven, and eight were 46.517, 48.442, and

Mean Scores

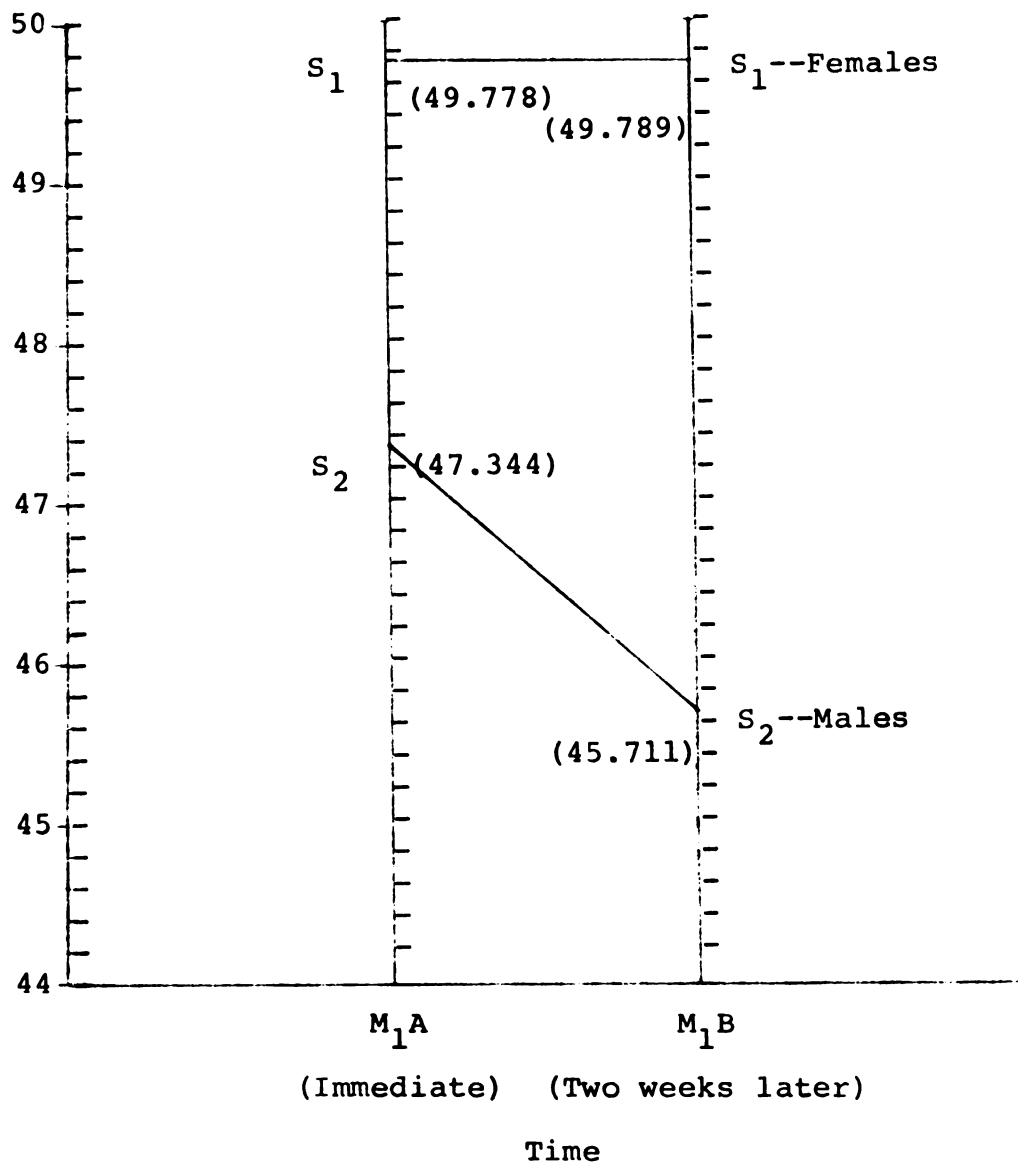


Figure 3.2.--Sex x time interaction for acquisition.

49.508 respectively. The scores of the subjects grouped according to grade-level did differ for acquisition as averaged over time, rejecting the null hypothesis. These results were not unexpected. The use of grade-level as a blocking variable did increase the precision of the test.

The separation of subjects by building was also an appropriate blocking variable. An F-ratio of .975 was not significant at the .05 level for the differences of the mean scores of subjects grouped according to building. This result is consistent with the hypothesis statement.

To determine the effect of treatments for particular students, the following hypothesis was formulated.

Hypothesis X. Treatment will not interact with sex, grade-level, and building on acquisition.

As reported in Table 3.1, all of the first, second, and third order interactions involving treatment were not significant at the alpha level of .05 within the repeated measures design, with the exception of the treatment by time interaction previously discussed. An F-ratio of 2.721, significant at the .05 level, was computed for the fourth order interaction of building x grade-level x sex x treatment x measure (time). Because of the lack of significance among the lower order interactions, this fourth order interaction is very difficult to interpret. It is quite probable that, with a thirty-six cell matrix and an alpha level of .05, at least one of the F-ratios would be

spuriously significant. Thus this may, in fact, be a Type I error.

Performance

Hypotheses III, IV, VIII, and XI were formulated to specifically test the effects of several variables on performance, and are stated below.

Hypothesis III. Subjects who receive the modeling treatment procedures will score higher on the performance measure than will subjects who receive the information-only treatment procedures.

Hypothesis IV. Subjects who receive the information-only treatment procedures will score higher on the performance measure than will subjects who receive the placebo-control treatment procedures.

Hypothesis VIII. The scores of the subjects grouped according to sex, grade-level, and building will not differ on performance.

Hypothesis XI. Treatment will not interact with sex, grade-level, and building on performance.

The performance measure was a simple tally of the number of subjects who made a self-referral for counseling during the two-week period following the administration of the treatments. The final results of this measure as presented in Table 3.2 did not warrant further statistical procedures. No meaningful differences were observed among the data, as only seven of the one hundred and eighty subjects volunteered for counseling. The implications of the lack of results on the performance measure will be discussed in the next chapter.

TABLE 3.2.--Performance Measure Summary (Total Self-referrals for Counseling--Two Weeks Post-Treatment).

		Social Modeling Treatment (T ₁)	Information Only Treatment (T ₂)	Placebo- Control Treatment (T ₃)
John A. Hannah Middle School (B ₁)	Sixth Grade (G ₁)	(F)	1	0
		Sex1 (M)	0	0
		Sex2		
	Seventh Grade (G ₂)	(F)	0	0
		Sex1 (M)	0	0
		Sex2		
	Eighth Grade (G ₃)	(F)	0	0
		Sex1 (M)	0	0
		Sex2		
	Sixth Grade (G ₁)	(F)	0	0
		Sex1 (M)	0	0
		Sex2		
C. E. MacDonald Middle School (B ₂)	Seventh Grade (G ₂)	(F)	1	2
		Sex1 (M)	1	0
		Sex2		
	Eighth Grade (G ₃)	(F)	0	0
		Sex1 (M)	0	0
		Sex2		
		(F)	0	0
		Sex1 (M)	0	0
		Sex2		

Interest

Several hypotheses were formulated to investigate the effects of several variables on interest. To investigate the effect of treatments on the level of interest in making a self-referral for counseling, the following hypotheses were stated:

Hypothesis V. Subjects who receive the modeling treatment procedures will score higher on the interest measure than will subjects who receive the information-only treatment procedures.

Hypothesis VI. Subjects who receive the information-only treatment procedures will score higher on the interest measure than will subject who receive the placebo-control treatment procedures.

A comparison was made on the above hypotheses, testing the level of interest responses among the treatment groups. The overall alpha of .05 was split equally between the comparisons. A z value of 1.129, not significant at the .05 level, was obtained for the comparison of the interest level produced by modeling and information-only. There was no significant difference between the mean value of 23.667 for the modeling treatment group and the mean value of 22.483 for the information-only treatment group. Hypothesis V was rejected.

A z value of -1.303, not significant at the .05 level, was obtained for the comparison of the interest level produced by information-only and placebo-control procedures. The respective mean values for the comparisons were 22.483 and 23.850. Hypothesis VI was rejected.

The interest measure was constructed so that each subject was asked to report his level of interest in making a self-referral when confronted with each of twelve hypothetical situations. A total mean score of 24.000 would exactly correspond to the selection of the item foil "Not sure" (see Appendix I). The grand mean score of 23.333 indicates that the subjects were on the average not sure of their likelihood to make an appointment for counseling when confronted with twelve situations known to occur for some middle school students. Further discussion of these findings will occur in the next chapter.

To determine the effect of sex, grade-level, and building on interest, the following hypothesis was formulated.

Hypothesis IX. The scores of subjects grouped according to sex, grade-level, and building will not differ on interest.

An F-ratio of .099, not significant at the .05 level, was found for the results according to sex. An F-ratio of 1.638, not significant at the .05 level, was computed for the results according to grade-level. An F-ratio of 1.793, not significant at the .05 level, was obtained for the results according to building. The complete analysis of variance summary table, presented in Table 3.3, shows that none of the first or higher order interactions were significant. No differences were found at any level with the overall F-test. Hypothesis IX was accepted.

TABLE 3.3.--Interest Measure--Analysis of Variance Summary.

Source of Variation	Sum of Squares	Degrees of Freedom	Mean Square	F
Building (B)	160.556	1	160.556	1.793
Grade (G)	293.233	2	146.617	1.638
B x G	84.544	2	42.272	.472
Sex (S)	8.889	1	8.889	.099
B x S	18.689	1	18.689	.209
G x S	79.211	2	39.606	.442
B x G x S	164.078	2	82.039	.916
Treatment (T)	66.033	2	33.017	.369
B x T	419.544	2	209.772	2.343
G x T	269.433	4	67.358	.752
B x G x T	170.456	4	42.614	.476
S x T	126.944	2	63.472	.709
B x S x T	82.678	2	41.339	.462
G x S x T	325.856	4	81.464	.910
B x G x S x T	246.256	4	61.564	.688
Error	12,981.600	144	89.525	
Total	15,408.000	179	86.078	

To determine the effect of treatments for particular students, the following hypothesis was formulated:

Hypothesis XII. Treatment will not interact with sex, grade-level, and building on interest.

F.-ratios were computed for each of the interactions with treatment. None were significant at the alpha level of .05, as indicated in Table 3.3. Hypothesis XII was accepted.

Summary

In this chapter, the results of the data collected for this study were presented. The hypotheses were restated and discussed in categories according to the

measure of acquisition, performance, or interest. Planned comparisons were used to investigate Hypotheses I through VI. Because the planned comparisons were not orthogonal, the overall error rate was held constant at the .05 level by splitting the overall alpha of .05 equally among the comparisons being made. An overall F-test was used to investigate the null hypotheses, Hypotheses VII through XII, each tested at the .05 level of significance.

Acquisition

The level of acquisition response was obtained through the use of a sixty item information measure administered immediately following treatments and repeated after a time period of two weeks. The following results were obtained:

1. There were no differences in the level of responses produced by the modeling treatment as compared to the information-only treatment, either immediately or over time.
2. The information-only treatment produced a higher level of acquisition responses than the placebo-control procedures, both immediately following treatment and after a two-week interval.
3. The mean level of acquisition responses differed for subjects grouped according to sex, and for grade-level, but not according

to building. Females maintained a higher level of acquisition responses than males, whose acquisition level decreased over time. This accounted for a significant sex x time interaction. The mean level of acquisition responses was higher for eighth grade subjects than seventh grade subjects whose scores were in turn higher than sixth grade subjects.

4. There were no first, second, or third order interactions of treatment x sex, grade-level, or building. A fourth order interaction of building x grade-level x sex x treatment x measure (time) was found and attributed to a Type I error.
5. The effect of measure (time) measure, and the treatment x measure (time) interaction were significant. The level of acquisition responses was lowered by the passage of time for the subjects receiving modeling and information-only treatments, but the placebo-control group became more like the other treatment groups.

Performance

The level of performance response was determined by a tally of the number of subjects who made a self-referral for counseling during the two-week period following the treatment procedures. Seven of the one hundred

and eighty subjects made a self-referral during this interval. No meaningful differences were observed among the data, therefore statistical procedures were not warranted.

Interest

The level of interest in making a self-referral response was measured by a twelve item scale given two weeks after treatments, on which each subject reported his level of interest in making a self-referral when confronted with twelve hypothetical situations known to occur generally for middle school students. The mean level of response indicated that the subjects were on the average "Not sure" of their likelihood to make an appointment to see a counselor. No significance was obtained for any of the sources of variation for the analysis of variance.

The discussion and implications of the above findings will be presented in the next chapter.

CHAPTER IV

SUMMARY, DISCUSSION, AND IMPLICATIONS

Summary

This study investigated an application of the principles of modeling to a specific middle school counseling setting. Voluntary participation of the client in counseling is consistent with theories and definitions of counseling. In schools, it is fairly common to require counseling routinely, or for those judged to be in need of counseling. Very little research attention has been given to methods of influencing a non-client to become a client.

This study examined two possible methods of encouraging students to make a self-referral. Both contained essentially the same information, and were presented via audiotape. It was assumed that the method of presentation of information about counseling and the self-referral process would affect the acquisition and performance of the desired behavior, as well as effect the level of interest in making a self-referral. Previous studies were cited which indicated that information about counseling tends to affect student perception of counseling and the role of the counselor, counseling expectations, and

attitudes toward counseling. Social model learning has been shown to be an effective means of changing specific behaviors. Some of the studies of modeling procedures in counseling have failed to test modeling procedures against a viable alternative, confirming only that modeling has a greater effect than control procedures.

It was the purpose of this study to measure the relative effect of modeling versus information-only procedures on acquisition and performance of the desired behavior, and additionally, on the level of interest for making a self-referral.

The Post-test Only Control Group Design, described by Campbell and Stanley (Gage, 1963) was used in this study. The subject pool for this study was those students, currently enrolled in one of the two middle schools serving the East Lansing Public School District, who had not volunteered for counseling during the 1969-1970 school year. One hundred and eighty (180) subjects, divided equally by building, grade-level, and sex were randomly drawn and ordered to treatment groups. These procedures resulted in a thirty-six cell matrix ($2 \times 2 \times 3 \times 3$) with five replications per cell, and with subject and treatment variables completely crossed.

The three treatments were: (1) Modeling, (2) Information-Only, and (3) Placebo-Control. Treatments One and Two contained information about the counseling and

self-referral process, whereas Treatment Three specifically avoided any references to counseling, presenting only information about the local city and school history. All treatments were audiotaped and presented on an individual subject basis within a grouped language laboratory setting. Each subject received his program via headphones controlled from a master control panel, a procedure which facilitated subject independence. The entire treatment procedure, including the subsequent administration of the acquisition measure, took approximately fifty minutes, after which subjects returned to their regular classes. The subjects were not made aware of the fact that three different treatments had been administered simultaneously. Two weeks after the administration of the treatments, the acquisition measure was repeated, and the interest in making a self-referral measure was administered. During the two-week interim, a record was kept of the number of self-referrals for counseling made by the one hundred and eighty subjects.

It was hypothesized that the subjects who received the modeling treatment procedures would score higher on acquisition (immediately and over time), on performance, and on interest than would the subjects who received the information-only treatments. It was also hypothesized that the subjects who received information-only treatment procedures would score higher on each measure than would the subjects who received the placebo-control treatment

procedures. Additional hypotheses were formulated to investigate the effect of sex, grade-level, and building on acquisition, performance, and interest. Hypotheses were also stated to investigate all interactions between treatments and sex, grade-level, and building on acquisition, performance, and interest.

Statistical analyses were done using an analysis of variance program, treating the acquisition measures within a repeated measures design. The differences predicted for treatments were investigated using planned comparisons. The interest measure was treated within an analysis of variance design. It was also planned to treat the performance measure within an analysis of variance design, but the failure to obtain meaningful differences warranted no further statistical procedures.

No significance was obtained for any of the sources of variation for the analysis of variance performed on the data from the interest measure. The mean level of response indicated that the subjects were on the average "Not sure" of their likelihood to make an appointment to see a counselor.

There were no differences in the level of acquisition responses produced by the modeling treatment as compared to the information-only treatment, either immediately or over time. The information-only treatment produced a higher level of acquisition responses than the

placebo-control procedures, immediately following treatment ($\bar{X}$ = 5.500) and after a two-week interval ($\bar{X}$ = 3.756). Both $\bar{X}$ values were significant at the .05 level. The mean level of acquisition responses differed for subjects grouped according to sex (F = 17.091), grade-level (F = 4.943), but not according to building (F = .975). Statistically significant effects were found for the treatment by measure (time) interaction (F = 3.535), and sex by measure (time) interaction (F = 6.44). These effects were significant at the .05 level. The treatments did not interact with sex, grade-level, or building. A fourth order interaction of building x grade-level, or building. A fourth order interaction of building x grade-level x sex x treatment x measure (time) (F = 2.721; $p < .05$) was thought to be spuriously significant and attributed to a Type I error.

Discussion

Statements are often made in counseling literature about the effect of information on the behavior of clients. Many of the traditional approaches to counseling place a high premium on the role of information as a means of effecting change. Previous studies indicate that specific information about counseling has an effect on the expectations of, and attitudes for counseling, on the students' perception of the counselors' role and the counseling service, and for producing counseling contact.

This study was conducted within the context of Bandura's (1965, 1969) contiguity theory of observational learning, in which he distinguishes between response acquisition and performance. Response acquisition refers to the learning of modeled behavior in cognitive, representational forms; that is, retrievable images and verbal codes which serve a mediational function for later reproduction. Performance refers to the person's willingness to do that which he has learned and this, Bandura suggests, is governed by the nature of the reinforcement and consequences. Bandura (1969) proposes that model characteristics, possessing different probabilities of reinforcement, serve to focus attention to the modeling cues. The verbal and imaginal coding process is thus facilitated by the presence of attentional factors.

The results of this study may be interpreted within this framework. The level of response acquisition for both the modeling and the information-only group was higher than the placebo-control group. This result was not unexpected, inasmuch as the control group did not receive specific information about the counseling and self-referral process.

The modeling treatment contained attentional variables in the form of model characteristics. No significant differences, however, were measured between the modeling and the information-only group. It is possible

that the use of headphones in the language laboratory for the administration of the treatments was a novel procedure which served to indiscriminately focus the attention of the subjects on the content of the audiotapes. The modeling presentation, using a dialogue among three models, may have contained extraneous cues which made it a less orderly presentation than the narrative style used to present the information-only treatment. Ascribing counselor status to the narrator may have facilitated the verbal and imaginal coding process.

It is quite probable that the significantly higher level of acquisition responses obtained for female as compared to male subjects, should be interpreted as an indication of the developmental differences between sexes of this age-level. However, the stability in the level of the acquisition response for females over the two-week time interval is an interesting and unexpected result. Because the treatments were short and administered only once, the expected result would have been a gradual decrease in response over time. Repeated observation of this phenomenon would be necessary before any conclusions could be reached.

Bandura (1969) also proposes that the performance of responses learned through modeling depends on the nature of the reinforcement the model or observer receives. In this study, the differences obtained for performance

were not meaningful. The presence of vicarious reinforcement did not significantly affect the performance level of the subjects in the modeling treatment. There may be several possible explanations for this finding. The subjects in this study were students who had not made a self-referral for counseling during the 1969-1970 school year. The non-self-referral behavior of the subjects was well established before the study began. The performance behavior that was solicited in this study would occur, presumably, only if sufficiently favorable circumstances and consequences were perceived by the subjects. The subjects may also have had to believe that they had a problem or topic that they could discuss with a counselor. The treatment experience may have been too passive, too indirect, or too short an experience to be effective. In addition, the performance criterion of volunteering for counseling required an extensive time commitment from the subject, for which the decision to perform might only have resulted from a more direct and repeated administration of the treatments. It is also possible that the two-week interval allotted for obtaining the performance measure was not a sufficient length of time for the desired results to occur.

The lack of significance for the level of interest response among the subjects is consistent with the lack of results on the performance measure. Not only did

performance not occur, but subjects reported a general uncertainty of their likelihood for seeking counseling in response to a set of possible social situations which were known to have resulted in self-referral for other middle school students. It is possible that the time interval between treatments and this measure was too long to obtain more positive results. The interest level, if measured immediately following treatments, may have been higher.

Implications

The results of this study must be understood and interpreted in terms of the particular treatments, population, and measures used. The range of external validity is determined by the above, and therefore caution is advised in making implications from the results for other settings and conditions.

Implications for Research

Presentation of information about the counseling and self-referral process has been shown to have an effect on the acquisition response level of the experimental subjects over a two-week time interval. Research measuring the acquisition response level over a longer period of time could help to establish the range of effectiveness on knowledge of the treatment procedures.

In this study, the modeling treatment consisted of student models who presented the information and displayed their intent to perform the desired behavior for

which they were reinforced. This was in contrast to a narrative style of information and encouragement to perform the desired behavior and without reinforcement. Future research could in addition look at the comparative effects of a narrative style of presentation by a student, and three way conversation among counselors, both with and without reinforcement. Future research could also investigate the use of different treatment content, which could include a recording of a student actually making an appointment and the initial conversation with the counselor. This more direct approach might have a different effect on performance. The type of reinforcement used and the method by which it is given might also be varied.

Further research attention might be given to the efficacy of these treatments at the beginning of the school year to all students before patterns of self-referral or non-volunteer behavior have been established. The criterion measures, especially the performance measure, could be collected over a greater period of time. Two weeks may simply not be long enough for performance to occur in any significant degree. Additionally, a repeated measure of the level of interest would help to assess the effect of treatments over time.

Implications for Practice

This study demonstrated that brief audiotaped presentations of information by means of modeling and

narration are effective means of increasing the level of specific knowledge about counseling and the self-referral process. Even though no differences were obtained in the response levels of performance or interest, the treatments used do have utility as a viable and efficient method of presenting information. Treatments such as this may be useful when counselor time is at a premium.

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APPENDICES

APPENDIX A

NARRATOR:

Today you have the opportunity to hear from three students who are currently enrolled in the East Lansing school system. You will hear a three way conversation between Mike, Tom, and Peggy. These students consented some time ago to have their conversation recorded so that you could hear the important information they discussed.

LET ME TELL YOU A LITTLE ABOUT EACH ONE.

Mike is a senior this year at the East Lansing High School. Several years ago he was enrolled at the East Lansing Junior High School. Since then, Mike has done a number of outstanding things. He does well in school and has been accepted by Michigan State University to begin his studies there this fall. He is a leader in his class and well liked by his fellow students. He is popular with both boys and girls because of his friendly, relaxed way with people and pleasing personality. He fits in well with almost every group at the high school.

Mike has participated in several sports while in high school and earned an athletic letter for his activities. He enjoys watching those sports that he does not participate in. Mike's teachers recognize him as a leader and appreciate his gentlemanly behavior around

school. Mike is well qualified to speak to us, because things have not always been easy for him and I think we can learn from his comments.

Tom is currently a student in your building. He knows Mike pretty well because they live on the same street. Mike told me that in many ways Tom reminds him of himself when he was in middle school. At the time of this conversation, Tom was not sure of himself, and sometimes wished that he could do something about his behavior.

Tom is doing average work this year, but thinks he can do better. He has several good friends, but would like to be more popular. He is interested in sports, and takes part in tribals whenever he has the chance. He likes the summertime because he enjoys fishing, camping, swimming, and just tramping through the woods. In the winter, he tries his hand at skiing, skating, and playing hockey.

Peggy is also a student in middle school this year. She does well in school, but knows she has to work to achieve good grades. She wants to be popular and respected by both boys and girls, but still feels a little uncomfortable and giggly when she's with boys. She loves to ride horses, swim, bike ride, and have slumber parties. She spends some of her babysitting money on records and new clothes. Her mother thinks she spends a lot of time on the phone, but Peggy is trying to be sensible about it.

Mike, Tom, and Peggy are typical students who felt that it was worthwhile to record their conversation so they could share their experiences and thoughts with you. Maybe another reason they were eager to participate was that they all got time off from their classes to make this recording.

So far in this conversation, Mike, Tom, and Peggy have been getting better acquainted and have told each other all about their interests and activities. This is where I got my information about them. Let's listen carefully to the rest of the conversation.

Tom: One of the reasons Peggy and I wanted to talk to you was because we have a lot of questions about some of the things we're experiencing right now.

Peg: And we figured you'd know all about it because you've been through all of that a couple of years ago.

Mike: OK! I'll tell you whatever I know.

Tom: Well, first of all, we're both in middle school right now and neither of us have had much experience with counselors. We hear different things about seeing them. Some say we should and some say we shouldn't.

Peg: See . . . when we were in elementary school we didn't really have counselors at our school. There were some people that would talk to some of the kids sometimes, but only a few people ever saw them.

Tom: I think they were called social workers, weren't they?

Mike: Yeah . . . I think so . . . school social workers.

Peg: OK . . . but anyway, we never saw them or anything.

Tom: Some of the kids used to say that you would have to be in trouble or have some kind of problem before they'd talk to you.

Mike: Well . . . that might be partly true. But you don't have to be a kook or anything.

Tom: That's one of the things I wanted to ask you about. . . . Some of the kids here said that counselors

only saw people who really had problems. Is that true?

Mike: No . . . who told you that? That's not true at all. . . . I mean, they might see some kids who were having problems . . . but you don't have to be weird or anything like that, just regular kids like us that want to talk about something. But you know . . . that's interesting. I used to hear some of the fellows talk about that same kind of thing . . . and for a little while, I didn't know if that was true or not. . . . But I found out myself that it isn't.

Tom: But how come some people think that?

Mike: Take a guess!

Tom: . . . ummm . . . gosh, I don't know.

Mike: Peg?

Peg: I don't know either.

Mike: Well . . . I suppose it's because when some people don't know much about something . . . they might make up stuff. Like for years, ancient people didn't dare sail too far out on the ocean because they thought the world was flat and you would sail off the edge. . . . So everybody believed it for a while.

Tom: And then all it took was for somebody to finally try it to prove that it wasn't flat.

Mike: Right! But until then, everybody just figured it was true. Don't you think that kind of thing still goes on today?

Peg: Yeah . . . but in different ways. Like when I was younger, I used to think that there were bears under my bed.

Tom: And I used to believe in ghosts!

Mike: Right! That's a good example of what I'm talking about. But what did it take for you to stop thinking that?

Peg: Hmmm . . . well, for one thing, just getting older seemed to help.

Mike: Sure, that makes a difference because when you get older you start thinking more for yourself. You start figuring out what could be true and what probably isn't. You guys are a lot more experienced and smarter, and you think things through. . . . Like this business about counselors. Do you have any idea about what counseling is really like? . . . you know, what kinds of things happen when you go to see a counselor?

Peg: Not really . . .

Tom: I don't think so . . . only what I've heard from some of the kids.

Mike: OK . . . so what have you heard?

Tom: Well, like Peggy says . . . you really have to have a problem before you should see them.

Mike: Wrong! That's absolutely wrong. But see . . . you just believe what somebody once told you. Why do you think somebody told you that?

Peg: I think it could've been because maybe somebody didn't like the counselor.

Mike: Could've been . . . but maybe not . . . anyway do you only like the people that somebody else likes?

Peg: No . . . not really. I like to make up my own mind about whether I like somebody or not.

Mike: Sure. I think most people do.

Tom: I know . . . but I mean . . . wouldn't you think I was kind of dumb if I told you I want to see a counselor?

Mike: Why?

Tom: Well . . . I don't know . . . a fellow like you would probably think I ought to figure out any problems or troubles I had by myself . . . wouldn't you?

Mike: Heck no! I'd probably think you'd be pretty stupid if you didn't go talk to a counselor. After all, what's so bad about asking some one else to help you figure something out?

Tom: Oh, I don't know. . . . A fella likes to think he's independent . . . you know . . . grown up, mature stuff like that.

Mike: OK, but what can be more grown up than to be able to know when you need help or when you don't. . . .

I mean if something's bugging you, why not talk it over with someone who will listen to you and can help you figure it out?

Peg: But how do you know a counselor can help you?

Mike: How do you know they can't? I used to hear the same thing . . . not only about counselors but about teachers too. But both of them can help you out if you just give them a chance.

Peg: Yeah, but isn't it different with teachers?

Mike: Oh, I don't know. You just have more information about teachers . . . I think counselors are helpers much in the same way teachers are . . . let me think of an example. . . . Let's say that you're having trouble with a particular type of math problem. Even though you've listened to the explanation, and you've been able to do your other math assignments, this time you're really stumped. You don't know where to start. Now there are a couple of things that you could do. You could just sit there and hope that the teacher will notice that you're having trouble.

Tom: But that doesn't work very well, because there are a lot of other people in the room that the math teacher is also working with, and in the meantime, you're wasting time and just getting further behind.

Mike: Right! So you realize that doing nothing doesn't get the job done. You have to take some kind of action. Like what might you do as a first step?

Peg: Well . . . uh . . . I might raise my hand, or go up to the teacher's desk and ask for help.

Mike: Absolutely! If you don't have the faintest idea of what's going on you might say something like "I don't get it."

Tom: But sometimes I understand part of the problem.

Mike: Then tell her what it is that you understand and where it is that you get stumped. . . . But in either case, you have recognized an important fact . . . that when you are having difficulty with something, you have to take some kind of action . . . and when you take action, it's very important to go to someone whom you know can help you. . . . In the example of the math problem which I just gave you, even if you didn't have the faintest idea of what was going on, all you had to do was to let the correct person know about your problem. Because your math teacher is an expert in mathematics, he or she could then step by step help you discover the information you need to know to solve the problem.

OK?

Tom: OK. I get it. You too, Peg?

Peg: Yup!

Mike: That's good! Because then it'll be easy to show you how counselors are helpers, too. . . . Look, you've got to figure that everybody in the school system has been given the job that they are expert in, right? . . . OK. So what do teachers do? What are they expert in?

Peg: Teaching . . . telling us important information and . . . uh . . . helping us learn and how to learn better.

Mike: Right. What about . . . uh . . . say . . . the principal?

Tom: Well, I guess he knows all about running the school . . . you know . . . making sure everything goes alright so teachers can teach without being bothered . . . and uhmm . . . so we all have a better place to learn in?

Mike: Sure. You guys know that, because you've seen what they do ever since you started school. But now what about counselors? Do you know what they do?

Peg: You already said they were helpers, but I guess I don't know much else.

Mike: OK, so listen . . . I'll tell you about what they do. You've probably heard it said that when you have a problem, when you're facing a difficult situation or decision, or when you have some feelings (good or bad) about something, it's a good idea to talk to someone about it. In the school, counselors

are there to specifically so that you will always have someone to talk with about these kinds of feelings and experiences. They are the experts in helping you understand what is happening and assisting you in reaching decisions about what you should do. Just like having trouble in math, if you just sit there, no help will come. Counselors are helpers when you take action. You have to go up to them and say "I don't get it." And then step by step, the counselor will help you in discovering how to figure the situation out.

Tom: Yeah . . . it's starting to sink in. If I have some thing I want to talk about, I've got to let somebody know about it.

Mike: Right!

Peg: But, Mike . . . I mean . . . what . . . what kind of things do you talk to a counselor about?

Mike: Oh . . . in many ways, I guess you can talk to them about whatever you want. You should talk to them when you have a problem you can't figure out.

Peg: Problems? I don't think I have any problems.

Mike: Really? That depends on what you call a problem, doesn't it?

Peg: I don't know. I always thought something had to be serious . . . I mean really serious before I'd say I had a problem.

Mike: Hmmm. That's not true for me. I figure a problem is just something you're not sure of . . . not knowing what to do next. I suppose it could be serious, but it doesn't have to be. It could be just like the math problem I mentioned before. You might always have been able to figure out something before, but now you're stuck, and you're not sure where to start.

Tom: Or like you said, you've partly figured it out already, but you need a little help and maybe more information?

Mike: That's right, Tom.

Peg: Ohhh, then I've had problems before that I could have used some help with. Like a couple of weeks ago my best friend suddenly told me that we weren't friends anymore. I mean, I was really shocked. I couldn't figure out what was going on.

Mike: That was probably 'cause your feelings were hurt, and you couldn't figure anything out because you were too upset.

Peg: I guess so. At first I was just shocked and hurt, and then I got angry at her . . . so now I just don't talk to her anymore and figure she had no business saying that and wasn't really much of a friend anyway.

Mike: OK, maybe that's true . . . but have you figured out yet why it happened?

Peg: . . . No, not exactly . . . Why? . . . Do you think it was my fault?

Mike: Oh, I don't know about that, but sometimes the cause of some problems happen pretty gradually. Even though you think everything is going all right, all of a sudden . . . Bam! you've got a problem.

Peg: . . . Well, we'd have an argument once in awhile.

Mike: OK! So maybe those were little signs that trouble was going to happen. Counselors know that problems don't have to be big ones to be worth talking about. It's often easier to prevent big problems from happening by talking over the smaller ones. Counselors are very helpful people with whom you can talk over both big problems and the little signs of trouble that you know about.

Tom: You mean that Peggy could have gone to see a counselor and talked about those little trouble signs? Or at least when the big trouble broke out?

Mike: You bet! As a matter of fact, since things still don't sound real good between Peg and the other girl--she should still make an appointment to talk it over with a counselor. . . . I would!

Peg: You would?

Mike: Sure, you've got nothing to lose and everything to gain!

Peg: Well . . . maybe I will.

Mike: Now that's what I like to hear!

Tom: . . . Mike, you said that you could talk to a counselor about anything. What other kinds of stuff do you mean?

Mike: Let me think a minute . . . Well, let me tell you something that happened to me . . . the reason I first went to see a counselor. See, I didn't always do so well in school. As a matter of fact, I was doing pretty lousy. I had this teacher I didn't care for, and I always thought she was picking on me. I was almost flunking out. I used to get kicked out of class once in awhile. And then . . . I don't know . . . one day I just got sick of it and started to think about how I was only hurting myself. I figured it was time for me to do something about it. So I got smart one day and decided I'd pay a visit to this counselor. I didn't know if anything would happen, but nothing much was happening the way it was.

Tom: Weren't you kind of worried? . . . I mean, you didn't know the counselor or anything.

Mike: Yeah, I guess so. It probably would've been better if I had known him before hand, but it worked out OK.

Peg: Like what happened?

Mike: Well, I guess he knew that I was nervous. So he was real cool. . . . We sat around for a little

while and talked and got to know each other. And after awhile he asked me what was going on. . . . So pretty soon I told him that I was getting messed up and he offered to help me get squared around.

Tom: Gee . . . that sounds pretty easy.

Mike: It was! Nothing to it! And I felt pretty great that it was my idea to make the appointment . . . like I was in control . . . you know, responsible for what was happening.

Tom: Peg? You know, we ought to do the same thing.

Peg: Yeah . . . I think so!

Mike: Terrific idea! I sure hope you do. A lot of my friends had the same experience that I did . . . I can remember one of my friends had real strict parents. I mean they really clamped down on him, and he fought with them all the time. They'd fight about when he should do his homework . . . how late he could stay out . . . the size of his allowance. He could only go to a couple of the school dances and they'd never let him have a boy-girl party until he was older.

Tom: Sounds like somebody I know.

Peg: Did this guy go to a counselor to talk about it?

Mike: Sure did! He saw his counselor quite a bit and gradually began to understand his own feelings as well as why his parents acted that way. The

counselor's help made it possible for him to decide what he could do to handle the situation.

Tom: Sounds like a pretty good deal.

Mike: It is! And there are a lot of other things you could see a counselor about, too. I think all of us are concerned about something . . . you know . . . things you think about now and then without having it really bother you like a problem might. Like I used to wonder about what other people thought of me . . . you know? If I did or said something in class, I'd think maybe somebody would laugh.

Tom: I know it. I didn't enter the talent show because I was afraid I might goof and make a fool of myself. I put off doing my school work, when I know I shouldn't.

Mike: It's sort of like . . . like knowing that doing as well as you can in school is important, but not feeling like doing the work right now.

Peg: Sometimes I get the feeling that I'm different from everybody else, because sometimes I have different ideas about things . . . but another thing I think about alot is how to make myself more appealing to other people.

Mike: Well, that's what I mean. Everybody's got something they're concerned about. . . . One of my buddies was afraid to try out for the basketball team when he

got to high school because he always figured everybody else was better than he was.

Tom: He should have seen a counselor.

Mike: Well, he did and it's helped, because a counselor is an ideal person to talk to about these kinds of things. The counselors are in the same building you are everyday and pretty much know the situation you are in. They talk to dozens of students each month, often about the same type of concerns that you have, and can talk knowingly about your experiences and feelings. I know a lot of kids who after talking about their problems find out that they are not so dumb and different after all.

Peg: I think we're getting a lot better understanding of what counselors do already.

Tom: We sure are.

Mike: That's good! But you don't only have to talk about problems or stuff you're concerned about . . . I mean you could make an appointment sometime to just get acquainted, or talk about the stuff you're interested in.

Tom: Like a hobby you have or something great you just did?

Mike: Exactly.

Peg: I'm taking a trip with my mother this summer. Could I talk about that?

Mike: Sure! Or maybe you need some information about something they might know about. . . . You know, it's kind of funny . . . I get honked off sometimes about some of the things that happen. And my counselor told me once that if I didn't talk about the things that made me angry, it could affect my other behavior. . . . So . . . every once in awhile I just go into his office and spout off . . . you know, blow off some steam.

Peg: You do that?

Mike: Sure . . . we talk it all out, and try to figure out something I can do about the situation.

Tom: And your counselor lets you do that?

Mike: Sure. Your counselor would too. They're very flexible people. You figure out what you want to talk about, make an appointment, and they'll talk with you about your thing. If they can't help you, they'll help you figure out where you can get help.

Peg: OK. So what will happen when I go to see my counselor?

Mike: Well, I can't predict exactly what will happen step by step when you visit your counselor. But I can tell you about how counselors try to operate. They see their job as one of listening to you and trying to understand how you think and feel about things. They don't try to make decisions for you, but by discussing something with you, may help you

to figure out all the things that must be considered in making a decision. Since making a decision is not always the final step, the counselor will help you find ways to carry that decision out. . . . Now if you were listening carefully, you already know that you have a part in counseling too. You have to help the counselor understand how you think and feel. Even though you will have the counselor's help, you are the one that will have to make a decision and actually do the things necessary to carry out that decision.

Peg: That's really about the same as it is with school work. Like your example with that math problem, even though the teacher may help you understand how to do it, you still have to do the actual work. . . . But not everybody has to see a counselor, do they?

Mike: No, but it's a good idea--if nothing else, then just for the experience. You take part in counseling on a voluntary basis. Because you are able to choose when you want to see a counselor, you also have the freedom to quit whenever you wish. Since counselors have a great deal more experience with the things that happen in counseling, they can tell whether or not you are making progress. If you feel that it's time to call it quits, you should talk this feeling

over with them and then decide if you wish to continue or quite.

Tom: What about the stuff you tell a counselor? Don't they tell anybody?

Mike: Nope. They don't report your conversations to anyone unless you give them your permission. Of course, if you made the counselor finally believe that you were going to do something so serious that you would be hurting yourself or others, he would probably tell you that if you were really planning on doing this that he would have to talk to someone else about it. Then, if you still planned on doing something and told him so . . . in a way, you would be giving him permission to tell someone else who could help you or stop you. Those situations don't happen very often . . . sort of the same kind of thing a doctor might run into.

Tom: Yeah, my dad said that if a doctor knew that unless you got medical attention, you would be in serious trouble, but you refuse to get help--he might tell someone else about it to convince you that you should.

Mike: Right, but ordinarily neither doctors or counselors have any reason to discuss your situation with anyone else. . . . Well, listen, we've talked about a lot of things, but there's something you've got to remember. When you're faced with a problem or

tough situation, there are three things you can do. . . . One, you can do nothing. . . . Two, you can pretend that the problem doesn't exist, and try to cover up and make excuses . . . or three, you can attack the problem and try to figure out what to do about it. . . . The third one is the one that gets results, but it involves recognizing and admitting to yourself that you have a problem. And it also means that when you are unable to figure it out alone, that you're willing to talk to someone else about it. It's not good enough to sit and wait and hope that someone will notice your troubles, but you should take the action. By taking the initiative, you're going to feel more in control, more responsible.

Tom: That's what I'm going to do. Take some action.

Peg: Yup. That's for me too!

Mike: That's great! Just great! . . . Do you know where to go?

Peg: Sure, there's a counselor assigned to our team.

Mike: OK, that's good, but you know that you can see either one of the counselors. They're only assigned to your team so that if you don't have a preference, you know who your counselor is. But if you think you can talk easier to one than the other, take your pick. Some of the stuff you might want to talk about might be less embarrassing with one than the

other. Or maybe it's easier for you to talk with men than women, or with women than men.

Peg: You're sure it doesn't matter?

Mike: Absolutely. . . . You know, I was thinking. Do you guys know where the counseling office is in your school?

Tom: Sure. Right next to the main office. There's a small sign over the separate entrance to that area.

Peg: And there's a small lounge or waiting area right outside the counselors office. I've never been there before, but I've looked in the door.

Mike: Do you know exactly what to do to make an appointment?

Tom: Sorta.

Peg: Not really. What do I do?

Mike: The whole things is very easy. You stop in and see the counseling secretary any time that you have a few extra minutes. Often this means just before school, after school, or during your lunch break. Some teachers also let you out of class for a few minutes so that you can make an appointment. The counselor usually has a short waiting list so your appointment may be scheduled for a few days from when you make the appointment. But in the case of an emergency, a problem that just can't wait, the counselors will try to see you that same day.

Their daily schedules usually allow for such an event.

Tom: You see the counselor sometime during the day, don't you?

Mike: Sure, kids get out of class all the time, but that means that since you're missing your class that hour, you're still responsible for meeting your teacher's requirements. If you schedule your appointment carefully each time, you can usually pick a time during which you can best afford to miss a class.

Peg: What about missing a test?

Mike: Same deal. If it's an important test and your talk can wait a day or so, it's usually best to re-schedule your appointment than to miss the test. But you can be the judge of whether or not it would be too difficult to make up a test.

Tom: Gee, Mike. It's really been great talking this over with you!

Peg: Yeah, it sure has!

Mike: I've enjoyed it too! It's the same kind of feeling I get when I talk stuff over with my counselor. It happens so often that you get to thinking about something and you wish you could just talk to somebody about it.

Tom: That's when you make an appointment to see your counselor, right?

Mike: That's right, Tom! They're the most helpful people I know. I always feel better when I talk to them.
. . . So . . . what about you guys! . . . What are you going to do?

Peg: I'm going to make an appointment with a counselor as soon as I can. . . . You know, talk over all the things I mentioned to you.

Mike: That's terrific, Peggy! What about you, Tom?

Tom: Same thing! I'm going to make an appointment, too . . . you know, tell him about the things that have been happening lately and how I feel about some of the stuff.

Mike: Hey, how about that? That's great! You guys are really on the right track! Keep it up!

APPENDIX B

Narrator: Today we have the opportunity to hear from somebody who is quite special, Mr. James Wilson. Mr. Wilson is a counselor who has an interest in our school and wants to share some information with you. He has been a middle school counselor for several years and is interested in helping students get more out of school. Let's all pay close attention to his talk.

Mr. Wilson: Thank you! As a middle school counselor, I have noticed that not all students really know or understand what counseling is all about. Some of you may not know what kind of things students talk to counselors about or even how to make an appointment.

By this time, I am sure that you all do know one thing--that when you don't have enough information about something, those things are sometimes frightening, or make you feel unsure and uneasy. For example, you have probably studied about ancient or primitive people who because they didn't understand that the world was round, dared not venture too far out on the ocean for fear of sailing off of the edge of the world. You're not afraid of that, because you have more information. You know the world is round, and that it is impossible to sail off.

I think the same kind of fear exists today, but in a different way. People are afraid of the unknown, whether it's meeting a person that they don't know, or going to some place new. Think about a new situation which you may have experienced . . . like your first day at a new school in a strange town . . . or getting a new teacher. Don't you think you'd worry about whether the teacher will be nice or whether you'll find new friends? Some of you may think all of that would be pretty exciting, but you'd probably be nervously excited. Think about trying out for the basketball team for the first time . . . or think about entering the talent show. . . . If you decided not to at the last minute, it would probably be because you were afraid you might not be good enough . . . or because of what you think people might say if you goofed.

If you could be absolutely sure ahead of time that things would work out fine, or that if you made a mistake people wouldn't think you were stupid . . . then you wouldn't be as afraid, or nervous, or nervously excited. When you try something new, most of you would probably say afterward that there was really nothing to worry about. That's because you have better information after you try something than before you try it.

That's the way it often is with students when they think about counseling. Often you do not have enough information about what counseling is really like . . . or

. . . you may have incorrect information about what actually happens in counseling. The result is that you never wind up making an appointment to see a counselor when, in fact, you could use their help.

Today, I'd like to tell you a few things about counseling, so that you will be better informed.

First, I'd like to tell you what counseling is.

Second, I'll mention some of the kinds of things kids talk about with counselors.

Third, the kind of people who come to see counselors.

Fourth, the reason why you should make an appointment to see a counselor.

Fifth, how counseling works and your responsibilities.

Finally, the steps you take to make an appointment with the counselor.

OK! What is counseling all about? Some of you do not have a very good idea of what counseling is because you have insufficient information about what really goes on.

Let's start first with the counselor. Why does the school have counselors anyway? To begin with, counselors are helpers, much in the same way teachers are. You all have had a lot of experience with teachers, but not all of you have had that much experience with counselors. So let

me give you an example of how both teachers and counselors are helpers.

Let's say that you are having difficulty in math, and you don't understand how to do a particular type of math problem. Even though you've listened to the explanation, and you've been able to do your other math assignments, this time you're really stumped. You don't know where to start. Now there are a couple of things that you could do. You can just sit there and hope that the teacher will notice that you're having trouble. That doesn't usually work very well, because there are a lot of other people in the room that the math teacher also is working with, and in the meantime, you're wasting time and getting further behind. So you realize that doing nothing doesn't get the job done. You have to take some kind of action. As a first step, you would probably raise your hand or go up to the teacher's desk and request help. You might even say something like "I don't get it!" if you don't even have the faintest idea of what's going on. . . . Or if you understand part of what it is that you're trying to learn you might tell the teacher just what it is that you do understand and where it is that you get stumped.

In either case, you have recognized an important fact--that when you are having difficulty with something, you have to take some kind of action . . . and when you take action, it's very important to go to someone whom you

know can help you. . . . In the example of the math problem which I just gave you, even if you don't have the faintest idea of what was going on, all you had to do was to let the correct person know about your problem. Because your math teacher is an expert in mathematics, he or she could then step by step help you discover the information you need to know to solve the problem.

Now that example is very easy to follow, and it will help you to understand how counselors are helpers, too. Each person in a school system, whether teachers, or principals, or counselors, have been given the job that they are expert in. The principal knows how to run the school and provide a good atmosphere for students and teachers to work in; teachers are expert in presenting important information and helping students to learn and improve their skills; counselors are trained in helping students learn more about their own behavior, how to solve personal and social problems, and how to use information about themselves, other people, and the world to make better decisions about what to do.

In short, counselors are helpers. . . . You have probably heard it said that when you have a problem, when you are facing a difficult situation or decision, or when you have some feelings (good or bad) about something, it's a good idea to talk to someone about it. In the school, counselors are there specifically so that you will always

have someone to talk with about these kinds of feelings and experiences. They are the experts in helping you understand what is happening and assisting you in reaching decisions about what you should do.

But think about that example again of you having difficulty with a math problem. If you just sit there, no help will come. Counselors are helpers when you take action. You have to go up to them and say "I don't get it!" And then step by step, the counselor will help you in discovering how to figure the situation out.

(Pause)

Counseling can mean different things to different people, so let me give you a better idea of what counseling can be for you by describing the kinds of things that students see counselors about. In many ways, as you shall see, the counseling office is a place where you can talk about whatever you want.

Some of the things that students talk to counselors about are properly called problems. The only trouble with describing some of the things you might talk about as problems is that some students think that you can call something a problem only if it's very serious. That's not true. A problem can also simply be something that you're not sure of, not knowing what to do next, or something that you've mostly figured out but want to be sure of. It's just like the math problem I mentioned before. You might

always have been able to figure out something before, but now you're stuck, and you're not sure where to start. Or you've figured it out part of the way, but you need more information and help to figure it out from there.

Did you ever have the experience of having a good friend suddenly say that he or she doesn't like you anymore? It's kind of shocking and makes you wonder what's going on. When it first happens, you might not be able to figure out what may have caused the breakup, and because your feelings are hurt you might have difficulty in figuring out how it happened or whose fault it is. Some problems happen so gradually that it is difficult to discover the cause. But there are little trouble signs that often indicate that trouble is brewing. Like every now and then saying unkind things about others, or just not being very happy or pleasant to be with. When you notice little signs like that, it is a good idea to talk it over with someone. Counselors recognize that problems don't have to be big ones to be worth talking about. It's often easier to prevent big problems from happening by talking over the smaller ones. Counselors are very helpful people with whom you can talk over both big problems and the little signs of trouble that you know about.

During the past couple of years, middle school students have talked over a lot of different kinds of problems with me. A lot of students have said that as they

grow up, they experience difficulties with their parents. Some say that their parents don't understand them, or give them privileges they think they deserve. A lot of arguments arise over things like how late you can stay out at night, when you should do your homework, whether or not you can have a boy-girl party at your house, or have a date to the school dance, or the size of your allowance. A lot of hard feelings can result. It might seem that the only thing you can do about it is to complain that it's due to the generation gap; but a much more effective procedure would be to talk the situation over with someone like a counselor and try to understand your feelings, your parents' feelings--and try to decide what could be done to handle the situation most maturely. There are a lot of other situations which fall into this same category, but I'll only mention a few:

1. Having difficulty with making or keeping friends.
2. Getting into arguments with friends, hurting their feelings, and getting your feelings hurt as well.
3. Having trouble with your brothers and sisters--perhaps even having to babysit with them and not liking it.
4. Disliking a teacher.
5. Having the feeling that you're always picked on.

6. No doing well in school.

7. Not enjoying your classes or special areas.

These are only a few of the kinds of problems students could talk over with a counselor.

Not everything you don't understand is really a big problem or even the start of one. Some of the things you might think about might more properly be called concerns-- something that you think about now and then without having it really bother you like a problem might. I think all students are concerned about something. Here are some examples of things you might be concerned about:

1. What do other people think of me?
2. Do other people think about the same kinds of things as I do or am I different?
3. What kinds of things will happen to me as I get older?
4. Will I make a fool of myself if I goof my piece in the talent show?
5. How come I'm afraid to try out for the basketball team?
6. What kind of experiences will I have in high school?
7. Does doing well in school really make a difference later on?
8. Why do I always put off doing my school work when I know I shouldn't?

9. What can I do to make myself more pleasant and appealing to other people?

Counselors are ideal people to talk to about these kinds of things, because the counselor is in the same building you are everyday and pretty much knows the situation you are in. They talk to dozens of students each month, often about the same type of concerns that you have, and can talk knowingly about your experiences and feelings. I can recall a number of students, who after talking about their problem found out that they are not so dumb and different after all.

So far I've talked only about talking over problems and concerns with counselors. But there are still other types of conversations that take place between students and counselors. Some of you may want to talk about something great that has happened to you. You might have a terrific hobby or project going that you would like to share with someone. Perhaps you're planning on taking a vacation that you're really excited about. There are a lot of happy experiences that you can share with counselors too.

Another possibility is that you need information about something and don't know where to get it. The counselor can be a big help in assisting you with how to proceed.

Some students that I know need a place to come and blow off some steam, to get rid of their angry feelings caused by something that's happened. When you don't get

your anger out, it often affects your other behavior. I remember one student who used to come in every couple of weeks and spout off about all the things he would get angry over. Sometimes they were personal difficulties and sometimes he was disgusted with the way some of his friends treated other people. Anyway, we talked them all out, and then agreed on something he could do about it.

(Pause)

Ok. I've been talking about how counseling is used by some students. But of course, every person is an individual and maybe I didn't give an example of how you want to use the counseling service. . . . Look, the counselors at your school are very flexible people. You can decide what it is that you want to talk about, make an appointment to see one of the counselors, and the counselor will talk to you about your thing. Each person can get the kind of help he wants, or be helped in where to go to get that help.

Because you don't see your counselors every day like you do your teachers, you might have to go a little out of your way to see them. Since you are never sure of when something might happen to upset you, it's a terrific idea to make an appointment even when you don't have a pressing problem. In that way, you can get to know the counselor, what he or she is like, and the ways in which they can help you when you need them most.

Perhaps some of you wonder about what kind of people make appointments to see their counselor. Some of you may have had the idea that only the kooks see counselors. Not at all! I think that it is the mature boy, the mature girl--students who have a sense of responsibility for themselves, those who want to act independently, those who are smart enough to realize when they could use a little help--these are the students who come to talk to a counselor. You all have found out from experience in the classroom that when you don't understand something, you tell someone about it, you ask questions and seek answers from someone who can help you. That's one of the important ways in which you learn. The same thing is true in counseling. You can learn about your own and other people's behavior by discussing situations you don't understand. Some people are reluctant to admit that they are having difficulty with something, and feel that it is a sign of weakness if they go to someone else to seek a solution. In fact, it's exactly the opposite. It's a sign of strength and courage.

There are always three things that you can do when faced with a problem situation:

1. You can do nothing.
2. You can pretend that the problem doesn't exist, and try to cover up and make excuses.
3. You can attack the problem and try to figure out what to do about it.

The last possibility is the one that gets results, but it involves recognizing and admitting to yourself that a problem exists. And it also means that when you are unable to figure it out alone, that you are willing to talk to someone else about it. It's not good enough to sit and wait and hope that someone will notice your troubles, but you should take the action whenever possible. By taking the initiative, you will feel more in control, more responsible.

(Pause)

It would be impossible to predict precisely what will happen step by step when you visit your counselor. But I can tell you about how counselors try to operate. They see their job as one of listening to you and trying to understand how you think and feel about things. They don't try to make decisions for you, but by discussing something with you, may help you to figure out all the things that must be considered in making a decision. Making a decision is not always the final step. The counselor will help you find ways to carry that decision out. . . . If you were listening carefully, you already know that you have a part in counseling too. You have to help the counselor understand how you think and feel. Although you will have the counselors help, you are the one that will have to make a decision and actually do the things necessary to carry out that decision. That's really about the same as it is with

school work. When you have trouble with that math problem, even though the teacher may help you understand how to do it, you still have to do the actual work.

There are a few other things that I should mention. Students take part in counseling on a voluntary basis. Because you are able to choose when you want to see a counselor, you also have the freedom to quit whenever you wish. Because counselors have a great deal of experience with the things that happen in counseling, they can tell whether or not you are making progress. If you feel that it's time to call it quits, you should talk this feeling over with them and then decide if you wish to continue or quit.

The things that you talk over with a counselor are confidential. They don't report your conversations to anyone unless you give them your permission. Of course, if you made the counselor finally believe that you were going to do something so serious that you would be hurting yourself or others, he would probably tell you that if you were really planning on doing this that he would have to talk to someone else about it. Then if you still planned on doing something and told him so, in a way, you would be giving him permission to tell someone else who could help you or stop you. Those situations don't happen very often. It's similar to the rare experiences a doctor has. If a doctor knows that unless you get medical attention, you would be

in serious trouble, but you refuse to get help--he might finally tell someone else about it in an effort to save your life. But ordinarily neither doctors or counselors have any reason to discuss your situation with anyone else.
(Pause)

What about you? Where can you go when you want help? In the two East Lansing Middle schools, Hannah and MacDonald, there are two counselors in each building. Each counselor, one a male and the other a female, is assigned to work with specific teams. This is done only so that those students who have no preference know who their counselor is. But some of you may have a definite preference. It might be easier for you to talk with men than women, or with women than men. Perhaps the kind of problem or concern that you have would be less embarrassing when discussed with a particular counselor. You might like one counselor's personality better than the other's. Whatever the reason, you may choose the person you want to see, regardless of the team you are in. The counselors understand that you may have a preference. You need not worry about hurting anyone's feelings because the counselors will understand.

(Pause)

Because some of you may be new to this building and some of you have never really explored all the nooks and crannies of your school, I want to be sure that you know where the counselors are located. The counseling offices

are located next to the main school office. There is a separate entrance to the counseling area, with a small sign above the door. There is a small lounge or waiting area outside the counselors' offices. There is a full-time counseling secretary who will assist you in making an appointment with the counselor of your choice. The procedure is very easy. You can stop by any time that you have a few extra minutes. Often this means just before school, after school, or during your lunch break. Many teachers will also permit you a few minutes of class time so that you can make an appointment. Usually the counselor has a short waiting list so your appointment may be scheduled for a few days from when you make the appointment. But in case of an emergency, a problem that just can't wait, the counselors will try to see you that same day. Their daily schedules usually allow for such an event.

The actual appointment is scheduled for sometime during the regular school day. This means that you will miss a portion of your team time or a special area. You are responsible, of course, for meeting your teacher's requirements, but by making your appointment carefully each time, you can usually pick a time during which you can best afford to miss a class. If a test is scheduled for your appointment time, it is usually best to reschedule your appointment than to miss the test. But you can be the judge of whether or not it would be too difficult to make up a test.

There's one more thing I'd like to say. I think all of you could profit from talking to a counselor. It really feels great to talk over something you've been thinking about with somebody. I hope all of you will make an appointment to see a counselor as soon as you can.

APPENDIX C

From time to time, it has occurred to some of the teachers in the East Lansing school system that the students in our schools have very little idea of the changes that have taken place in our community over the years. I am speaking specifically of the historical changes in the schools and the size of the community. Part of this, I am sure, is because our community is an unusual one. The City of East Lansing and Michigan State University are somewhat interdependent. The growth of the University has a direct bearing on the growth of the community. As more and more students enroll in the University, more businesses are attracted to East Lansing and able to flourish. Then, too, the size of the city as it grows has its own effect. The larger a city grows, the more people are attracted to it. Size has a way of begetting size. Big cities are thought by many people to have more advantages than small towns.

Many of our students are also newcomers to the East Lansing area. Some of the students at MacDonald and Hannah Middle Schools are spending their first year in the East Lansing community, and know very little about either the city or the school system. Some of you may have

lived here in this community all of your life but never have been specifically informed about the history of your town or schools.

Today we want to do something about this omission. For this reason, some little known facts about the city and the schools will be presented to you today. Listen carefully to what you are about to hear. I will speak slowly and clearly since there is a lot of information for you to hear.

I am quite sure that there is no student listening today who knows very much about the history of East Lansing and the East Lansing schools. For example, the name of our city was not always East Lansing. At one time, the name of our city was Agricultural College, Michigan. Of course, at that time it was a very small village.

In 1910, the first census counted only 802 residents. The size of the city was about 1,100 acres of which 700 acres belonged to Michigan Agricultural College. The size of East Lansing, with regard to the amount of land or people included within the city limits grew very little until about 1957. In the last thirteen years, sizeable tracts of land were annexed to the city as the population began to grow swiftly. By 1959, the city limits included 4,300 acres, which is almost seven square miles. Slightly over three square miles, however, were owned by Michigan State University. A call to the City Planning Office

revealed that in 1970, the land size of East Lansing is approximately nine square miles with an estimated 58,000 residents.

In 1900, as is true today, many of the residents of the community were associated with Michigan State University. In those early years, Michigan State University was known as Michigan Agricultural College. The letters MAC are still visible on the smokestack of the power plant on the campus.

The Marble School was located exactly where the present Marble School is located, at the southwest corner of Hagadorn Road and Burcham Drive. The Marble School was first built in 1860, and has been rebuilt and enlarged several times. The Brick Yard School was located near the intersection of Clippert Street and Highway M-78. The only difficulty with the children attending either of these two schools was that they were located some distance from Michigan Agricultural College. Because the winters in Michigan are cold and transportation was poor in those days, school was not well attended. The people that could afford to hire a private tutor would do so, especially during the winter. Those who could not afford a tutor often would keep their children home. Because of this situation, the people of the community decided in the 1900s to start a new school district which would be better able to serve the educational needs of the people.

Because this decision had been made rather quickly, there was not time nor money available to buy land and build a more centrally located school building. So in the Fall of that year, classes were held in the Y.M.C.A. room in the north west corner of the first floor of Williams Hall. Williams Hall was a building on the campus of Michigan Agricultural College which burned down in 1916. It was located near Beaumont Tower and was used as a men's dormitory at that time.

This one room temporary school had an enrollment of 23 children in grades one through six. The first teacher was Miss Carmelita Hill who later married a man named Hall. This naturally made her name Mrs. Carmelita Hill Hall. She was paid \$28 a month for her instruction, which does not sound like very much today. But I suppose that it was adequate for the year 1900. Today teachers make more than that in a day.

In 1901, the land for the school where the Central school building now stands was purchased for \$250. The builders worked fast to put up a one room building, out houses (there was no modern plumbing then), and to drill a well. All of this was done for less than \$1,400. But all of this was not ready by the time school started in the Fall, so this time the children went to school for a while in part of a barn which stood about where Yakeley Hall on the Michigan State University campus is now. The

barn was partly refurnished but nevertheless, it was still a barn. Early in 1902, the new building was ready and the children moved in to this school. The school actually looked more like a small brick home with several white pillars by the front door. A wooden fence surrounded the school yard. But the following year, the fence was cut up into firewood to heat the school room during the cold winter.

In 1904, the school could no longer contain all of the children, and so the fourth, fifth, and sixth grades were moved into a three story rooming house called the White Elephant. This building stood on the corner of Michigan Avenue and Harrison Road. This building was not well heated so on the cold days school was cancelled.

The next year, a second story was added to the Central school building and all the grades were together again. More rooms were added as the population of Agricultural College, Michigan, grew. In 1907, the name of the village was changed to East Lansing, Michigan. After several additions had been made to the Central School, it burned down in 1916. Once again temporary quarters had to be found. This time the classes were held in the facilities of the Peoples Church, which was then located just east of Abbott Road and Grand River. In the meantime construction was begun again on the Central School site. Two later additions were made to this building and this

structure stills stands as the present Central School building.

Up until 1909, East Lansing did not have a high school. The few students who went to high school had to travel to the city of Lansing to finish the ninth through twelfth grades. The first East Lansing High School class graduated in 1913--all seven of them.

During the 1920's, the first kindergarten in East Lansing was established on Valley Court. A war surplus building was moved to this location for this purpose.

The next building to be constructed was the Liberty Hyde Bailey School, in 1922. Two later additions in 1942 and 1950 expanded the school to its present size. The school can accomodate up to 475 pupils. In 1927, a new high school was built between Abbott Road and Forest Street. This building was later to be used only for the junior high school and in remodeled form, is the present John A. Hannah Middle School.

After the end of World War II, many more married students enrolled in Michigan State University. To accommodate the growing population of school children in the area, the Red Cedar School was built in 1948. Two rooms were added in 1951 and 1953, a large addition was built and the school floor plan revised. The school can accommodate close to 500 students. Because approximately 80 per cent of the students attending Red Cedar School

come from faculty and student housing, Michigan State University paid 80 per cent of the cost of the school. As East Lansing grew rapidly toward the northwest, a grade school was built in that area. This school located on North Harrison Road and just south of M-78, the Glencairn School, was built in 1952. Two rooms were added in 1954. The school can accommodate about 330 students. In 1956, the new East Lansing High School was built on a fifty acre tract of land known as Burcham Woods. It was at this time that the old high school on Abbott Road was used exclusively as a junior high school--grades 7 and 8. Between March of 1968 and October of 1969, this building was extensively remodeled and put into use as the Hannah Middle School. During that time, all of the students attended classes in the new C. E. MacDonald Middle School. All of you who enrolled in school beginning this Fall remember that classes were held in half day shifts for the first month of school.

Hannah Middle School is unchanged in appearance only from the outside. Listen to a list of things which used to be:

--The original building used to extend only as far as Room 105.

--The gymnasium used to be the auditorium. The auditorim was added in 1936.

--The school cafeteria used to be where Rooms 103-105 are now.

--Rooms 102C and part of 103 used to be the main office.

--The Band and Choir area was formerly a garage which was unattached to the present building.

--The locker room area used to be the boiler room.

--The cafeteria was added in 1967 as well as a new boiler room, but the boiler room was first used as a classroom.

--The elevator shaft area used to be an open court to which the office areas had window access.

--The boys locker room used to be the girls locker room.

--The language laboratory at one time was the stage area of the gymnasium. That's the reason you have to climb steps to get into the lab.

--The whole north end of the school was added in 1937.

--The teacher's office in 205 1/2 used to be a stair landing.

--The counselors' offices used to be part of the library.

--The superintendent's office was located in the Music area until 1956.

--Britain Field, located on Abbott Road immediately in front of Hannah Middle School was the high school football field. Bleachers were located on the south side

of this field. This recreational area was named for Dr. Charles H. Britain, who personally cared for the grounds, and gave the players free medical service, if necessary.

All of you are familiar with the C. E. MacDonald Middle School. It is the newest building in the East Lansing School system. The up-to-date architectural styling places the classrooms around the Learning Center, which contains a good supply of books, reference materials, audio-visual equipment, and many other learning aids.

The school is located on a large tract of land which allows for further expansion as enrollment figures grow with the size of the city.

If you can remember most of the things you've just heard, you will know a lot more about the history of our city and schools than the average citizen of East Lansing.

APPENDIX D

MEMORANDUM

TO: SIXTH GRADE HOMEROOM TEACHERS

FROM: BUILDING PRINCIPAL

SUBJECT: PROCEDURE FOR (DATE) (TIME)

On (day) morning, the following procedure will apply to your homerooms only.

DO NOT DISMISS YOUR HOMEROOM UNTIL THE FOLLOWING IS ACCOMPLISHED:

1. Take attendance immediately, using the regular absence report form.
2. An eighth grade student will be waiting outside your room to take the absence report to the office immediately.
3. Read off the list of 15 males and 15 females who are to report to the Language Laboratory (Room), instead of their first hour class.
4. Within several minutes, a list of names will be read over the Public Address system. These students are also to report to the Language Laboratory instead of their first hour class. The names read will be those to replace any absentees.

5. When the above is completed, the homeroom can be dismissed.

TO: SEVENTH AND EIGHTH GRADE TEACHERS

FROM: BUILDING PRINCIPAL

SUBJECT: PROCEDURE FOR (DATE) (TIME)

Attached is a list of 15 males and 15 females who must report to the Language Laboratory (Room) today at (time) . Please read the names in your homeroom today and make it clear that they must go to the Language Laboratory instead of their (number) hour class.

Because there may be absences, a list of alternates has been prepared. During the (number) hour class, prior to a.m., individual notices to report to the Language Laboratory will be delivered.

Your responsibility is to read the list of names in homeroom, and to make sure that each student who will be participating knows when and where he or she is to be at (time) .

APPENDIX E

Hi! I'm your instruction sheet!

Read me very carefully and you will know exactly what to do.

1. Find a seat with your name card on it.
Oops, watch the wires to the earphones!

Do not turn the page until you have found the seat with your name on it and are sitting down.

THANK YOU FOR BEING CAREFUL!

2. Look at the headphones. They can be adjusted to fit your head comfortably. Handle them carefully! O.K. Put them on so that the wires and microphone is to the left side of your head. Someone will see to it that the volume level is correct. If the volume level is too loud or soft, say nothing but raise your hand now and someone will help you.

The record album you are hearing is "The Beatles Songbook" played by the Hollyridge Strings. If the volume is satisfactory, turn the page.

3. Relax! Really! But do not talk or remove your headphone at any time until a person specifically tells you that it is time to remove them! That will be just before you go back to your room. I will tell you this. You will be listening to several things that have been tape recorded. You might also hear music once in a while and then more tape recordings. If this happens, don't let it throw you for a loop. All 30 of you in this room will be having the same kind of experience for the next half hour or so.

Turn the page!

4. If you have read me correctly, this is what you all know.
- A. You are now sitting in the desk with your name card on it.
 - B. You now have headphones on and have made them comfortable.
 - C. The volume has been adjusted so that it is comfortable to your ears.
 - D. You know that you will not remove your headphones until a person tells you to take them off.
 - E. You know that you will hear both recorded voices and music.
 - F. You will be here for at least 30 minutes.
 - G. You are to listen carefully to anything you hear.

Thank you for reading me carefully! You know I think you're beginning to like me but I don't know what to say. I'm kind of embarrassed so turn me face down on your desk. I appreciate it!

APPENDIX F

TO THE ADMINISTRATOR:

When everyone has been assisted with their headphones and instruction sheets turned over, say the following:

Good morning. Please raise your hand if you can hear me clearly. Thank you. You may put them down.

After it is clear that everyone is receiving sound over their headphones, say the following:

There will be a momentary delay while I turn the program on. Listen carefully because it may start at any moment. Remember to keep your headphones on at all times until you are specifically instructed to remove them.

Switch the channels on to the correct position. The three tapes must begin in sequence. The tape on track one will run for 22 minutes. The tape on track two will run for 21 minutes. The tape on track three will run for 18 minutes. As each tape is finished, switch to the music channel (track four). When all tapes are finished and listening momentarily to music, distribute the measurement materials and pencils.

While we have all of you here, I have been asked by Dr. Johnson of Michigan State University to have you all respond to a few questions. It won't take very long, but answer it the best you can. Read the instructions and then begin. Turn the sheets over when you have finished.

As individuals finish, turn music on to their headphones. When all sheets are turned over, or it is apparent that everyone has finished, switch all units to the speaker channel (All Call) and say the following:

Thank you very much for your cooperation. I hope you enjoyed the program. Notice the time. It is approximately a.m. You are to return to your regular classes. Remove your headphones carefully and lay them on your desk. Watch for the wires as you pass through the aisles.

APPENDIX G

Name _____

DIRECTIONS:

1. Print your name in the space provided above.
2. You must answer all of the following questions.
If you are not sure of your answer, give the
answer you think is correct.
3. Read carefully and work quickly.
4. You may turn the page and begin.

- T F 1. Because counselors are busy, they prefer students who have nothing to talk about to not make an appointment.
- T F 2. Counselors prefer students to have their parent's permission before talking over problems.
- T F 3. Students making an appointment for the first time must see the counselor assigned to their team.
- T F 4. It helps a student to talk about something he doesn't understand.
- T F 5. Students who are able to help themselves do not need a counselor's help.
- T F 6. Something can be called a problem only if it's quite serious.
- T F 7. If a teacher tells counselors about a student's difficulties, it is not necessary for a student to make his own appointment.
- T F 8. Counselors expect students to see them at least once a year.
- T F 9. Counselors are helpers much in the same way teachers are.
- T F 10. Counselors see their job as one of listening to students in order to understand how they feel and think.
- T F 11. Counselors would rather have you not discuss with them problems that happen at home.
- T F 12. Counseling is more effective when students volunteer for help.
- T F 13. Students all use counselors in much the same way.
- T F 14. Counselors accept the fact that most of the students who see them have serious problems.
- T F 15. Although students can see a counselor during the school day, counseling appointments can only be made before school, after school, and during the lunch period.
- T F 16. Talking over angry feelings often prevents other problems from occurring.

- T F 17. Counselors are annoyed by students who discuss small, insignificant problems that students should figure out by themselves.
- T F 18. If a student has a problem he should go to counseling.
- T F 19. The best way to solve a problem, is to take some kind of action.
- T F 20. When students are disgusted about something or with somebody, it is all right to tell a counselor about it.
- T F 21. Students know right away when they have a problem.
- T F 22. Unless students have a good reason, they must see the counselor who is assigned to their team.
- T F 23. Students who see counselors are different from regular students.
- T F 24. Students who are smart enough to realize they have a problem can always figure out what to do about it.
- T F 25. Counselors will see students with urgent problems the very same day.
- T F 26. Once a student has seen one of the counselors, he must get special permission to change to the other counselor.
- T F 27. Students can learn about their own behavior by discussing situations they don't understand.
- T F 28. In counseling, students really have to make decisions.
- T F 29. Talking over a hobby with a counselor is regarded by them as a waste of time.
- T F 30. Students can talk to counselors about anything they want as long as it is about themselves.
- T F 31. Counselors make decisions for students.
- T F 32. Things that students discuss with a counselor are not usually discussed with other people.
- T F 33. Counselors prefer to talk to students with serious problems.

- T F 34. Counselors figure students should not be nervous when they talk to them.
- T F 35. Talking over small problems does not help to prevent bigger problems from happening.
- T F 36. Normal people do not have problems.
- T F 37. Students who request help from counselors are not bright enough to solve a problem by themselves.
- T F 38. Asking for a counselor's help is a sign of growing up.
- T F 39. Counselors prefer a student to decide on his own to see a counselor.
- T F 40. Counselors do not usually notice when a student starts having trouble in school.
- T F 41. Even though counselors don't say it, they think that some of the problems students tell them about are silly or unimportant.
- T F 42. Counseling is pretty much the same for everybody no matter who the person is or what the problem is.
- T F 43. Problems can develop so gradually that it is difficult to know how or why they happen.
- T F 44. Students must have a specific problem before they see a counselor.
- T F 45. Making a decision is the final step a counselor tries to achieve when counseling students.
- T F 46. Once a student has started to see a counselor, he can quit any time.
- T F 47. Counselors will help students who are able to help themselves.
- T F 48. There are times when a counselor should tell somebody about a student's problem.
- T F 49. Counselors believe that talking something over with them is a sign of maturity.
- T F 50. It is difficult to make a counseling appointment.
- T F 51. A problem can simply be something that a student is not sure of.

- T F 52. Every student has problems or concerns.
- T F 53. Counselors usually discourage students from seeing more than one counselor.
- T F 54. Students can discuss with a counselor any problem that happens at school.
- T F 55. Teachers could be just as helpful with solving a problem if they only had more time to listen.
- T F 56. Problems go away if you ignore them long enough.
- T F 57. Students should take part in counseling on a voluntary basis.
- T F 58. Counselors believe they are experts who have a ready answer for a student's problem.
- T F 59. Students do not have the right to refuse to talk to a counselor.
- T F 60. Counselors know that they can help any student with any problem.

APPENDIX H

Key--Answers to Acquisition Measure (M_1A , M_1B)

1. False	21. False	41. False
2. False	22. False	42. False
3. False	23. False	43. True
4. True	24. False	44. False
5. False	25. True	45. False
6. False	26. False	46. True
7. False	27. True	47. True
8. False	28. True	48. True
9. True	29. False	49. True
10. True	30. False	50. False
11. False	31. False	51. True
12. True	32. True	52. True
13. False	33. False	53. False
14. False	34. False	54. True
15. False	35. False	55. False
16. True	36. False	56. False
17. False	37. False	57. True
18. True	38. True	58. False
19. True	39. True	59. False
20. True	40. True	60. False

APPENDIX I

DIRECTIONS: For the following items (A-L) circle the one response which most closely describes the way you think.

There are no right or wrong answers. You may begin.

- A. If you were having problems in getting along with your parents, how likely would you be to make an appointment to see a counselor to talk it over?

1. Definitely would
2. Probably would
3. Not sure
4. Probably would not
5. Definitely would not

- B. If you disliked a teacher and often had trouble with this teacher, how likely would you be to make an appointment to see a counselor to talk it over?

1. Definitely would
2. Probably would
3. Not sure
4. Probably would not
5. Definitely would not

- C. If you found it difficult to make and keep good friends, how likely would you be to make an appointment to see a counselor to talk it over?

1. Definitely would
2. Probably would
3. Not sure
4. Probably would not
5. Definitely would not

- D. If you were doing poorly in school and wanted to do better, how likely would you be to make an appointment to see a counselor to talk it over?

1. Definitely would
2. Probably would
3. Not sure
4. Probably would not
5. Definitely would not

- E. If your classmates teased and bothered you a lot or poked fun at you, how likely would you be to make an appointment to see a counselor to talk it over?
1. Definitely would
 2. Probably would
 3. Not sure
 4. Probably would not
 5. Definitely would not
- F. If you were angry about something that happened to you or your friends, how likely would you be to make an appointment to see a counselor to talk it over?
1. Definitely would
 2. Probably would
 3. Not sure
 4. Probably would not
 5. Definitely would not
- G. If in school you were blamed for something you did not do, how likely would you be to make an appointment to see a counselor to talk it over?
1. Definitely would
 2. Probably would
 3. Not sure
 4. Probably would not
 5. Definitely would not
- H. If you were caught for breaking a school rule and sent to the principal's office, how likely would you be to make an appointment to see a counselor to talk it over?
1. Definitely would
 2. Probably would
 3. Not sure
 4. Probably would not
 5. Definitely would not
- I. If you felt like talking to someone, but about nothing in particular, how likely would you be to make an appointment to see a counselor to talk it over?
1. Definitely would
 2. Probably would
 3. Not sure
 4. Probably would not
 5. Definitely would not

- J. If you had questions about things in school that you did not understand or needed more information about, how likely would you be to make an appointment to see a counselor to talk it over?
1. Definitely would
 2. Probably would
 3. Not sure
 4. Probably would not
 5. Definitely would not
- K. If you wanted to learn more about your own behavior, how likely would you be to make an appointment to see a counselor to talk it over?
1. Definitely would
 2. Probably would
 3. Not sure
 4. Probably would not
 5. Definitely would not
- L. If you were bored with school and not interested in school, how likely would you be to make an appointment to see a counselor to talk it over?
1. Definitely would
 2. Probably would
 3. Not sure
 4. Probably would not
 5. Definitely would not

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