

THE INFLUENCE OF CLIENT EGO
STRENGTH, CLIENT SEX AND
THERAPIST SEX ON THE FREQUENCY,
DEPTH, AND FOCUS OF
CLIENT SELF-DISCLOSURE

Dissertation for the Degree of Ph. D.
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PAUL WILLIAM HYINK
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**The Influence of Client Ego Strength, Client
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ABSTRACT

THE INFLUENCE OF CLIENT EGO STRENGTH, CLIENT SEX, AND THERAPIST SEX ON THE FREQUENCY, DEPTH, AND FOCUS OF CLIENT SELF-DISCLOSURE

By

Paul W. Hyink

Client self-disclosing behavior as represented by 895 segments taken from the psychotherapies of 28 clients seen at a university counseling center was examined. Fourteen male and fourteen female clients were selected according to their ego strength (Es) scores on Barron's Es Scale administered as part of the MMPI prior to therapy to form a group of high Es male and female clients and a group of low Es male and female clients. Client-therapist groups were then compared in order to test the following three hypotheses:

I. Clients with high Es scores on Barron's scale would a) engage in self-disclosure more frequently, b) explore themselves more deeply, and c) focus their exploration more extensively on general aspects of the Self and their relationship with family members than clients with low Es scores on Barron's scale;

II. Male and female clients would a) not differ significantly in the frequency with which they engaged in self-disclosure, but b) female clients would explore more deeply and focus more extensively on general aspects of the Self and their relationship with family members than male clients; and

III. Therapist sex by itself or in interaction with client sex would have no significant relationship to client self-disclosure.

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The results indicated that when paired with male therapists high Es clients disclosed more frequently than low Es clients. Moreover, high Es clients explored more deeply when paired with male therapists. When paired with female therapists high Es male clients focused more extensively on general traits of the Self, while high Es female clients focused more extensively on their relationship with family members. These results were discussed in terms of the possible differential impact of male and female therapists upon client dependency and interview stress.

Then too, the results indicated that depth of self-disclosure was a function of Es in female clients, but not male clients. As expected, high Es female clients were found to disclose more deeply than high Es male clients, particularly when seen by male therapists. These results appeared consistent with societal definitions of male and female roles, at the time these clients were seen. Finally, behavior consistent with these role definitions was not found among low Es clients suggesting psychopathology among undergraduate clients may be closely associated with role confusion or failure to establish a clear sexual identity.

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AND THERAPIST SEX ON THE FREQUENCY,
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By

Paul William Hyink

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INTRODUCTION

While Freud recognized the need for rigorous investigation of the rich and complex process of psychotherapy as early as 1920, empirical research methods were not vigorously or systematically applied to such events until the 1940's when interest emerged as a function of the work of Carl Rogers and his students (Strupp, 1962). Since that time there has been a proliferation of conceptual, methodological, and technological approaches to psychotherapy research with little or no consensus as to a model or pattern for investigating the psychotherapeutic process (Colby, 1964). Moreover, the burgeoning literature presently concerned with psychotherapy research has not produced a corresponding increment in our understanding of the therapeutic process. In fact, Rogers (1967) has observed that researchers have paid relatively little attention to the actual phenomenon of therapy or the processes which are thought to be the agents of change, but instead have been concerned with assessing client behavior in terms of personality states, conflicts, or specific verbal content at certain points in time.

In separate appraisals of psychotherapy research, Dittman (1966) has suggested that researchers become more general in their thinking about help-seeking and help-giving so that they can become specific in what they are talking about when they study such processes. Meanwhile, Kiesler (1966) has argued that theorists and investigators alike must cease making uniformity assumptions regarding clients and therapists if research is to yield more definitive results.

While these divergent points of view are difficult to reconcile, the extent to which the results of a single investigation can be replicated and extended to various clients and/or therapists is a matter for empirical research to determine. Therefore, while the present investigation was based upon a broad conceptualization of the psychotherapeutic process, the author examined this process within various client-therapist groups.

Conceptualization of Psychotherapy

Individual psychotherapy can be broadly conceived of as process in which one person (the therapist) seeks to help a second person (the client or patient) explore his inner thoughts and feelings and the external circumstances which give rise to them in order to develop and expand his consciousness so that he will be able to feel more deeply and gain an increased sense of freedom and direction in choosing that which is most self-fulfilling or satisfying. Such a view of psychotherapy has also been proposed by May (1958), Rogers (1959), Bugental (1965), and many others.

At the heart of such a conception of the psychotherapeutic process stands client self-disclosure, for it is through disclosing one's inner experience to another that one comes to a sharper awareness or increased consciousness of one's self. According to Sullivan (1953), one cannot know one's self except in relation to others, and one has information about one's experiences only to the extent that one has tended to communicate them to another. Somewhat more boldly Jourard (1964) has said, "It seems to be an empirical fact that no man can come to know himself except as an outcome of disclosing" (p. 5). In addition, Culbert (1970) has pointed out that failure to disclose one's self eliminates important opportunities for feedback and resolution of

intra- and interpersonal conflicts. Moreover, he notes it is impossible to receive confirmation and acceptance of one's self by others without engaging in self-disclosure. Thus, client self-disclosure has been considered by many to be the central goal of the psychotherapeutic process.

In psychoanalytic theory this process is described in terms of the patient free associating and exploring preconscious and unconscious material (Munroe, 1955). In client-centered theory the therapeutic process is conceived of as facilitating the client's exploration of strange, subjectively dangerous feelings which have been denied to awareness because of their threat to the structure of the self (Rogers, 1959). Among existentialist thinkers client self-disclosure is often discussed in terms of the exploration of aspects of the client's feared internal and external reality which have given rise to defensive and constrictive maneuvers by which the client forestalls his own authenticity (Bugental, 1964). Finally, learning theorists as well give importance to the client's progressive self-disclosure during which the client is encouraged not to suppress frightening or shameful material so that associated anxiety and/or repression can be unlearned or extinguished (Dollard and Miller, 1950).

Empirical research evidence also supports the important role of client self-disclosure in psychotherapy and behavior change. Peres (1947) found that successful patients made almost twice as many personal references over the course of therapy as unsuccessful patients. When comparing early and late interviews from successful and unsuccessful cases, Braaten (1958) discovered that the more successful cases showed a significant increase in the number of self-references, particularly of a private nature. Kirtner and Cartwright (1958), Wagstaff, Rice

and Bulter (1960), and Truax et al (1961) using different methodologies and working independently all report the tendency to explore internally and focus on feelings and life experiences was the characteristic which led to the greatest success in their respective samples of patients in therapy. More recently, Rogers et al (1967), Truax (1968), Tausch et al (1969), and Peterson (1972) have also found significant relationships between self-disclosure and various measures of improvement. Thus, there is strong, consistent evidence of both a theoretical and empirical nature that affirms self-disclosure as a central process in successful psychotherapy.

For this reason client self-disclosing behavior was selected as the principal dependent variable and focus of the present investigation. This selection would certainly appear to meet Rogers' criticism of much of the earlier psychotherapy research. Moreover, client self-disclosure can be meaningfully related to a broad view of psychotherapy as proposed by Dittman. Finally, the present investigation addresses itself to client self-disclosure in several client groups as suggested by Kiesler. Before describing this research any further, however, previous research pertaining to client self-disclosure will be reviewed in order to establish the background for the present study. This review is presented in Chapter One while a description of the author's investigation begins with Chapter Two.

CHAPTER ONE

AN OVERVIEW OF THE LITERATURE ON FACILITATING SELF-DISCLOSURE

In light of the established importance of self-disclosing behavior in the psychotherapeutic process it is not surprising to find many investigators concerned with the role of therapists or interviewers in facilitating client self-disclosure. For example, Rogers et al (1967) using a correlational methodology found that clients of therapists possessing high levels of empathy, warmth, and genuineness explored themselves more deeply than patients of therapists possessing low levels of these traits. Similarly, Tausch et al (1969) related therapist empathy to both client self-disclosure and improvement and found that the higher the therapist's level of empathy the higher the patient's level of self-exploration and the greater the patient's degree of improvement. Then too, Truax (1968) viewed the level of client self-disclosure as a response class and the momentary levels of therapist empathy, warmth, and genuineness as reinforcers. He reports that patients receiving high levels of differential reinforcement for self-exploration showed greater over-all self-disclosure and greater improvement than did patients receiving low or negative levels of differential reinforcement. Moreover, the therapists' mean levels of empathy, warmth, and genuineness were unrelated to their use of these conditions as reinforcers. Thus, both the therapists' general level of empathy, warmth, and genuineness and his differential use of these conditions have been shown to facilitate client self-disclosure.

Investigators concerned with the therapists' role in promoting client self-disclosure have also focused on what Jourard (1964) has termed the "dyadic effect" or the relationship between therapist self-disclosure and client self-disclosure. In this connection, Jourard and Jaffe (1970) systematically varied the disclosing behavior of an interviewer and found a significant relationship between the length of time the interviewer disclosed and the duration of interviewee self-disclosures. Then too, Vondracek (1970) reported a similar correspondence between interviewer input and interviewee output with respect to content areas discussed. Moreover, Gary and Hammond (1970) found the same reciprocal relationship regarding the level of intimacy of interviewer and interviewee disclosures.

While studies into the "dyadic effect" raise a question as to whether it is the interviewer's disclosing behavior itself or some other aspect of the interpersonal communication which facilitates interviewee disclosing behavior, Powell (1968) compared interviewer disclosure statements with both approval-supportive statements and reflective statements within an operant conditioning paradigm and found interviewer self-disclosure statements the most effective in increasing interviewee disclosing behavior. Then too, Bundza and Simonson (1973) presented subjects with one of three transcripts of a simulated psychotherapy session on which client comments were held constant while therapist comments were systematically varied to provide for a No Self-Disclosure condition, a Warm-Support condition, and a Self-Disclosure condition. Subjects reading the Self-Disclosure transcript expressed the greatest willingness to disclose. Thus, these studies suggest that it is the act of interviewer self-disclosure and

not just his warmth, approval, or support that is the crucial factor in promoting interviewee self-disclosure. Moreover, such interviewer disclosures appear to both elicit and reinforce interviewee disclosure in a manner that is more effective than more traditional expressions of support, approval, or understanding.

A third group of investigations, employing an operant conditioning paradigm, like Truax (1968) and Powell (1968) already mentioned, further attest to the ability of interviewers to selectively influence many classes of verbal behavior including statements of self-reference and personal feeling by controlling their responses to such client statements (Verplanck, 1955); Merbaum, 1963; Ince, 1968). Indeed, Williams and Blanton (1968) report such a verbal conditioning technique was as effective as traditional psychotherapy in increasing client expressions of feeling over nine sessions. In a review of such studies, however, Heller and Marlatt (1969) note that positive conditioning effects occur primarily when the interviewer remains minimally responsive, so that the usefulness of the verbal conditioning analogy in understanding the facilitation of self-disclosure in more interactive helping relationships remains limited. In a similar vein Bandura (1962) also questioned the efficacy of operant conditioning arguing that differential reinforcement simply operates as a cue to interviewees in an otherwise ambiguous situation.

A fourth group of empirical studies would seem to support Bandura's contention that simple requests, instructions, or questions can be more effective than non-directive statements in manipulating discussion of personal feelings within an interview setting (Merbaum and Lukens, 1968); Frank and Sweetland, 1962). Gendlin (1969) has also

urged therapists to facilitate client self-exploration by means of a focusing technique, and McMullin (1971) in an empirical investigation found interviewees engaged in more self-exploration when he used this technique while offering low empathy, genuineness, and positive regard than they did when he simply offered high levels of these same conditions. Thus, the latter group of studies dealing with interviewer interventions of a directive nature suggest such interventions can be more efficient in facilitating client self-disclosure in active interview situations than interviewer responses used as differential reinforcement or responses simply offering high levels of empathy, warmth, and genuineness.

Convergent support for the utility of such directive interventions is also available from a number of other sources. First, Truax (1963), and Warren and Rice (1972) have demonstrated positive effects when clients have been instructed in self-disclosing behavior prior to therapy or during the early sessions. Secondly, Berenson et al (1968) in a series of studies found therapists who offered high therapeutic conditions also confronted clients more often and in a different manner than therapists offering low conditions. In addition the former therapists more often focused their clients' self-exploration on relationships with persons who theoretically seemed more important to the etiology or maintenance of their disordered behavior (Mitchell and Mitchell, 1968a) and were more likely to refer client statements to themselves (Mitchell and Mitchell, 1968b).

The various groups of studies reviewed thus far certainly suggest a variety of useful methodologies and serve to identify important therapist variables. Nevertheless, they all are based on uniformity

assumptions regarding clients or interviewees and thus their usefulness in clarifying the relationship between therapist interventions and self-disclosure in specific client groups is limited. Moreover, many of the studies have utilized a single interviewer and are otherwise based on uniformity assumptions regarding therapists so that possible relationships between therapist personality variables and particular interventions are largely un-known from these studies. The importance of such relationships was attested to in a notable study by Ashby et al (1957) in which the authors indeed found interaction effects between therapist personality variables and particular techniques on measures of client defensiveness. Finally, when still other studies concerned with the facilitation of client self-disclosure are considered, the findings frequently appear more complex, contradictory, or uninterpretable.

For example, a number of investigators have studied the relationship between interviewer empathy, warmth, and genuineness and interviewee self-disclosure by dividing an experimental interview into three time periods and manipulating either the therapeutic conditions offered by the interviewer or the level of self-disclosure of the interviewee. When Holder, Carkhuff, and Berenson (1967) employed such a design and had the interviewer intentionally lower the therapeutic conditions he offered during the middle period, subjects who as interviewers had previously demonstrated high levels of empathy, warmth, and genuineness did not lower their level of self-disclosure whereas subjects who as interviewers had previously demonstrated low levels of empathy, warmth, and genuineness did respond with lower levels of self-disclosure. Such results suggest the relationship between the therapeutic conditions offered by interviewers and client self-disclosure may depend on certain client variables.

Moreover, when Piaget, Berenson, and Carkhuff (1967) repeated the Holder et al experiment they obtained similar results when using an interviewer possessing high levels of empathy, warmth, and genuineness. However, when the same authors used an interviewer possessing moderate levels of the therapeutic conditions neither group of subjects maintained their level of self-disclosure through the second period of the interview. Then too, their level of self-disclosure continued downward in the third portion of the interview when the interviewer attempted to raise the level of the conditions he offered. Thus, the relationship between the therapeutic conditions and client self-disclosure may also depend on certain therapist variables. The latter statement also finds support in studies by Carkhuff and Alexik (1967) and Friel et al (1968) in which different interviewers reacted very differently in terms of the conditions they offered when interviewees intentionally lowered their level of self-disclosure during the middle period of an experimental interview. Thus, as a group these studies demonstrate the necessity of avoiding uniformity assumptions regarding clients and therapists and suggest that the relationship between therapist empathy, warmth, and genuineness, and client self-disclosure may be a complex function involving both client and therapist variables. Indeed, in some instances hostile, curt, impatient interviewers have elicited more negative self-disclosures than friendly, warm interviewers (Ganzer and Sarason, 1964). Sarason and Winkel (1966) also found that the less favorably interviewees rated interviewers the more likely it was they would talk about personally meaningful material.

Convergent evidence of the important effect of interviewer and interviewee variables on self-disclosure is also available from studies

employing Whitehorn and Betz's A-B SUIB Scale which allows investigators to classify therapists or interviewers according to their interest in manual-technical activities. Those with little interest in such activities are referred to as type A persons while those with high interest in such activities are referred to as type B persons.

Carson, Harden, and Shows (1964) used sixteen type A and sixteen type B undergraduates as interviewers of eight subjects with a Distrusting-Hostile-Expecting Harm (DHH) set and eight subjects with a Trusting-Friendly-Expecting Help (TFH) set. Eighteen modified items from Jourard's Questionnaire were used by the interviewers to elicit interviewee self-disclosure. The greatest self-disclosure was obtained in interviews involving DHH subjects and type A interviewers, and TFH subjects and type B interviewers leading the authors to suggest that self-disclosure might be facilitated when clients and therapists complement one another. These results were in part confirmed by Berzins et al (1970) who employed a similar methodology with addicts serving as subjects and hospital aides as type A and type B interviewers.

While such studies certainly suggest there is something about the A-B dimension that differentially facilitates self-disclosure among specific types of subjects, little is known yet about what personality variables the A-B categories actually measure or what there is about these categories that leads to greater self-disclosure with some types of interviewees. Seidman (1971), however, has found that type A interviewers offer higher "therapeutic conditions" to avoidant, suspicious, extrapunitive, schizoid subjects than to intro-punitive, neurotic subjects; while type B interviewers offer higher "therapeutic conditions" to neurotic subjects than to schizoid subjects.



Contrasting interactional results were obtained by Persons and Marks (1970) who employed prison inmates and college students as interviewers of groups of prison inmates who manifested different personality traits on the MMPI. While both groups of interviewers were equally effective in eliciting self-disclosure, they were effective with different inmate groups. In addition, the most effective student interviewers manifested different personality traits than the most effective inmate interviewers. However, five of the six interviewers elicited the most intimate self-disclosure from inmates who had the same high point code on the MMPI as they themselves did, suggesting that self-disclosure may be facilitated when interviewers and interviewees have similar personality traits. While this specific conclusion is in need of confirmation by subsequent research, such studies certainly lend support to the notion that personality variables often influence self-disclosing behavior and the corresponding need to avoid uniformity assumptions regarding clients and therapists.

Bloch (1971) has also suggested considerable caution is warranted in interpreting and applying the generally positive experimental research findings regarding the effectiveness of interviewer self-disclosure in facilitating client self-disclosure. Many investigators have found self-disclosing behavior particularly effective in increasing the disclosing behavior of persons who otherwise score low on Jourard's Self-Disclosure Questionnaire (Pasternack and VanLandingham, 1972; Jourard and Landsman, 1960; Certner, 1971; and Jourard and Resnick, 1970). Indeed, when Doster and Strickland (1971) presented information about an interviewer to subjects, those previously rated low on self-disclosure disclosed more than those previously rated high on self-disclosure.

Then too, although research concerned with the influence of modeling on self-disclosing behavior has yielded mixed results (Heller and Marlatt, 1969; Fuller, 1971; Klepper, 1971; and MacDonald, 1972), McNeal (1971) utilizing two groups of subjects based on an Anxiety Preference Questionnaire, found low emotional subjects increased their disclosing behavior to a level similar to high emotional subjects after watching a subject engage in self-disclosure in an interview situation. Thus, information about an interviewer, interviewer self-disclosure, and/or "modeling" all appear to affect the disclosing behavior of some interviewees more dramatically than others. While the above studies would all suggest such interventions are most effective with persons who typically rate low on measures of self-disclosure, such a conclusion would again seem premature; for when Shimkunas (1972) had interviewers use a self-disclosure technique with three groups of subjects, interviewer self-disclosure led to increased bizarre verbalizations in two groups of schizophrenics while it led to increased self-disclosure in a non-psychotic group of subjects.

A number of studies also suggest group size and other situational factors may influence the effectiveness of interviewer self-disclosure. In a study by Drag (1969) interviewer self-disclosure led to greater interviewee disclosure in a four person group, but was ineffective in two and eight person groups. Likewise, Fuller (1971) reports self-disclosure by T-group leaders had no significant effect on the self-disclosing behavior of members of a ten person group. While Weigel et al (1972) found self-disclosure by group leaders was often perceived negatively by group members, Bundza and Simonson (1973) report therapists portrayed as making self-disclosure statements in

individual therapy sessions were rated as highly nurturant. Similarly, Johnson and Noonan (1972) report self-disclosing behavior led to increased trust. Therefore, how interviewer self-disclosure is perceived may well depend on who employs this intervention, and under what circumstances, as well as the person's attitude toward this intervention. Moreover, a number of studies already cited have suggested that some interviewees may be more responsive to a negatively perceived interviewer while others may be more responsive to a positively viewed interviewer.

Thus, the relationship between interviewer self-disclosure and interviewee self-disclosure would also appear dependent on client and therapist variables which too often have not been taken into account in previous investigations. Moreover, most such studies have been conducted in laboratory settings and have not been based on actual psychotherapy sessions so that the appropriateness of generalizations to self-disclosing behavior within the psychotherapeutic process itself remains an issue for further empirical research to decide. Nevertheless, some contemporary schools of psychotherapy, especially those influenced by existentialism and the human potential movement, have broken the dictum of the non self-disclosing therapist and permit, if not encourage, therapist self-disclosure without regard to client or therapist differences (Johnson, 1971; Truax, 1971; Weiner, 1972).

Finally, in contrast to those studies supporting directive-focusing interventions, a number of studies suggest that some clients may engage in the most self-disclosure when interviewers are ambiguous or non-directive and/or behave in ways that create client anxiety rather than comfort. Heller et al (1966), for example, found subjects with a prior set toward admitting inadequacies and weaknesses discussed their

problems most openly when the interviewer was either passive and friendly or completely silent. In a further study, subjects with a prior set toward disclosure of personal material engaged in the most self-disclosure under the interview condition that provided the least feedback to subjects (Heller, 1968). In addition, Jacobson (1968) found highly dependent subjects engaged in self-disclosure more freely with "reserved" interviewers who were non-responsive and who often looked away from them than with "friendly" interviewers who maintained eye contact and appeared expressive and encouraging through smiles, nodding, leaning forward, etc.

Silver (1970) has also reported a study in which subjects engaged in the most self-disclosure under interview conditions that were quite different from those in which they were the most comfortable. Similarly, Pope and Siegman (1965) found questions of low specificity and questions related to anxiety arousing topics led to greater productivity than highly specific questions or questions related to neutral topics. Finally, Truax (1969a) has shown that therapists who focus on defense mechanisms get moderately good results even though they may offer generally low levels of empathy, warmth, and genuineness; and that therapists who focus on sources of threat and anxiety in the client obtain results that are almost identical to those obtained by offering accurate empathy (Truax, 1969b).

Such results have led Heller (1971) to suggest that subjects whose defensive style allows them to be more open in expressing personal concerns do so more frequently under moderately stressful interview conditions than in more subjectively pleasant or less threatening conditions. Thus, a client's defensive style or the extent to which he typically engages in self-disclosure may be a critical factor in whether

or not he is likely to engage in self-disclosure under stressful conditions or under more supportive-nurturant or less threatening conditions. At any rate, such studies, like those cited earlier, clearly support the need to avoid uniformity assumptions regarding both clients and therapists if research into self-disclosing behavior is to become more meaningful and precise.

CHAPTER TWO

AN INVESTIGATION OF THE RELATIONSHIP BETWEEN CLIENT SELF-DISCLOSURE AND SELECTED CLIENT AND THERAPIST VARIABLES

Previous research has established client self-disclosure as a central aspect of the psychotherapeutic process and personality change. While considerable effort has gone into identifying and measuring the effectiveness of a variety of therapeutic stimuli in facilitating self-disclosing behavior, much of this research has been based on uniformity assumptions regarding clients and therapists and/or has been conducted in laboratory settings. Consequently, the results often appear contradictory and have questionable applicability to specific psychotherapeutic settings. Moreover, little as yet is known about what client or therapist variables might be particularly relevant to the facilitation of self-disclosing behavior by the various therapist interventions or styles.

The purpose of the present investigation, therefore, was to examine and compare self-disclosing behavior within several client groups using recordings of actual psychotherapy sessions. In particular the present investigator sought to compare these client groups with respect to (a) frequency of self-disclosing behavior, (b) modes of self-disclosure, and (c) the focus of self-disclosures. Finally, it was hoped that these client groups could be compared with respect to the interrelationship between their self-disclosing behavior and certain therapist characteristics and interventions.

Client Variables

Ego-Strength (Es). While only one of many client variables one could select for such a study, ego strength was chosen because of its theoretical relevance to self-disclosure and demonstrated relationship to the outcome of therapy (Barron, 1953). Historically, the Ego has always been thought of as an unconscious, non-experiential agency of the mind, safeguarding our coherent existence, or sense of selfhood, by screening and synthesizing all the impressions, emotions, memories, and impulses which seek to enter our thoughts and demand our action (Erikson, 1968). It is the Ego then which organizes our self-experiences on various levels of consciousness and controls the manner and extent to which such experiences will be distorted or allowed admission into consciousness.

Moreover, Anna Freud (1965) has noted that ego strength is inversely related to the extent to which the Ego must protect a person from threatening aspects of the Self by means of rigid or intense defenses. Such defenses would oppose self-disclosure to the extent that this process involves becoming aware of aspects of one's self-experience which have previously been blocked from awareness because they were felt to be too threatening to the self. Therefore, inasmuch as ego strength reflects the quality and quantity of defensive operations, clients with high ego strength might be expected to have a different defensive style from clients with low ego strength.

Then too, self disclosure would seem to require an ability to focus inward, delay acting on impulses, handle internal and external stimuli on a realistic basis, and express thoughts and feelings. All these operations are typically conceptualized as important ego functions and indications of ego strength (Arlow and Brenner, 1964). Similarly,

Rappaport (1951) has theorized that the state of one's Ego determines the extent to which one's thinking is dominated by relatively autonomous motivational forces. Self-disclosure in therapy would appear to be facilitated by an attitude or set of conforming to the explicit or implicit directions to "talk about yourself and your problems." Therefore, the more solid the organization of the client's Ego, the more likely it will be that his associations and behavior will be consistent with and governed by this mental set or attitude.

For the purpose of this research, Barron's (1953) Ego Strength Scale was selected as the operational measure of client ego strength. This scale of sixty-eight items was selected because of its demonstrated relationship to many of the specific skills that collectively have been conceptualized under the heading of ego strength. In addition, this scale was developed and has been validated in previous psychotherapy research as a predictor of client response to psychotherapy (Barron, 1953; Wirt, 1955; Holmes, 1967).

Client Sex. The male-female dichotomy has thus far received scant systematic attention in the research literature on psychotherapy. However, this variable was included in the present study because of its relevance to self-disclosure generally. Jourard's (1962) position that females disclose more than males is often quoted in the literature on self-disclosure as a recognized fact. Many other investigations employing Jourard's Self-Disclosure Questionnaire have likewise found consistent support for this belief (Jourard and Laskow, 1958; Jourard and Richman, 1963; Himmelstein and Lubin, 1966; Pedersen and Higbee, 1968; and Pedersen and Breglio, 1968; Ramsey, 1972; and Rivenbark, 1971).

However, when slightly different measures of self-disclosure have been used, no global quantitative differences related to sex have emerged (Frankel, 1970). Moreover, in interview situations the results have been mixed. Vondracek and Vondracek (1971) did not find sex differences in actual self-disclosure. Certner (1971) also failed to find sex differences on his measures of self-disclosure when subjects were placed in same sex groups, but found females became defensive about disclosing to male peers when placed in mixed groups. Meanwhile, Doyne (1972) and Vondracek (1970) both reported males disclosed more than females in their respective studies, although male disclosures tended to be of a confessional nature while females disclosed more in the area of feelings and personality.

Therapist Variables

Participating Stance. This therapist dimension deals with the manner in which the therapist relates to the client or the extent to which he engages in therapist self-disclosure. Some therapists have argued that the therapist should present himself as a human being and share his own feelings, conflicts, and fantasies with the client (Whitaker and Malone, 1953; Mullan, 1955; Jourard, 1971; and Weiner, 1972). When the therapist controls his feelings and denies his own conflicts, they believe he is bound to be remote and distant, and hence incapable of a mutual, experiential relationship with his client. Moreover, when he analyzes and responds only in terms of the client, these writers believe he separates himself from his clients as a human being and treats him like an object. A considerable number of experimental studies, reviewed earlier, have supported the effectiveness of

interviewer self-disclosure in eliciting and reinforcing client self-disclosure. The latter studies, however, have typically made uniformity assumptions about clients and therapists. This therapist variable was therefore selected for the present study in the hopes that greater precision regarding the utility of this intervention might be gained.

For the purposes of this study a Participating Stance was contrasted with a Responding or Non-participating Stance so that therapist responses were dichotomized as belonging in one class or the other. Supportive, reflective, and analytical therapist statements were all included within the Non-participating class as were more casual or informal comments by therapists as long as they referred to the client or preceeding client statement and not the therapist's own inner experience or self.

Therapist Sex. While in clinical practice consideration is frequently given to therapist sex in assigning clients, this therapist variable has also received scant attention in psychotherapy research. In laboratory or experimental interviews, however, interviewer sex either by itself or in interaction with subject sex has been found to have little effect on self-disclosing behavior (Vondracek, 1970; Vondracek and Vondracek, 1971; Rivenbark, 1971). Moreover, Wyrick and Mitchell (1969) report male and female counselors did not differ in the therapeutic conditions they offered a male and female actor playing the role of "a student with a problem."

Outside of interview situations, however, West (1971) found more self-disclosure reported in reference to same sex friends than opposite sex friends. Among a slightly older group of subjects, Ramsey (1972) found a general preference for female peers over male

peers. Finally, Certner (1971) in a laboratory study found college women in mixed groups reacted acutely to the presence of male peers and directed their disclosures to other women. A similar reaction or preference for disclosing to same sex peers was not noted among males, however. Thus, sex would appear to be a significant factor in relatively casual situations although its overall importance would appear to be reduced within the more formalized roles of interviewer and interviewee. Therapist sex is included in this study in order to evaluate both its general relevance within psychotherapeutic settings and its particular relevance regarding the use of therapist self-disclosure or a participating stance by therapist.

Statement of Hypotheses

Client Propositions

Separate hypotheses were advanced regarding the relationship between client self-disclosure and each of the client variables selected for the present study. These hypotheses were as follows:

Hypothesis I--First, it was hypothesized that clients who rated high on Barron's Ego Strength Scale prior to psychotherapy would (a) engage in self-disclosing behavior more frequently, (b) explore themselves more deeply, and (c) focus their self-exploration more extensively on aspects of self and/or their relationship with parents and other family members than clients who rated low on Barron's Ego Strength Scale. This hypothesis is based on the theoretical relationship between ego strength and self-disclosure discussed earlier. Moreover, although the results have been quite inconsistent, a number of empirical investigations have found support for Jourard's (1964)

view of self-disclosure as a "symptom of health" (Lind, 1971; Granoff, 1971; Vosen, 1966; and Hekmat and Theiss, 1971). Finally, since Barron's Es Scale has proven to be a predictor of success in psychotherapy, and self-disclosure has been established as a central aspect of successful therapy, it seemed reasonable to predict the hypothesized positive relationship between client ego strength and client self-disclosure.

Hypothesis II. Secondly, it was hypothesized that male and female clients would (a) not differ significantly in the extent to which they engaged in self-disclosure, but (b) would show differences in how deeply they explored themselves and the frequency with which they focused on aspects of self and/or their relationship with parents and other family members. Specifically, it was predicted that female clients would explore themselves more deeply and focus more on aspects of self and/or their relationship with parents and other family members than male clients. In essence, this hypothesis predicted that differences in male and female disclosing behavior would be qualitative rather than quantitative. This speculation finds support in the work of Doyne (1972), Frankel (1970), and Vondracek (1970) discussed earlier.

Finally, the present investigation sought to explore interaction effects between client sex, client ego strength, and self-disclosure in psychotherapy. Carlson (1971) has argued that the general research literature supports the notion of sex differences in ego functioning. Gutman (1965) has also suggested that ego strength may have a different meaning in female subjects than in male subjects. In an empirical study of a related nature, Himmelstein and Lubin (1966) indeed have reported finding the relationship between self-disclosure and scores on the K-scale of the MMPI to be different for females than for males.

Moreover, research concerned with the relationship between self-disclosure and mental health, which Himelstein (1964) and Chu (1967) found significantly related to scores on Barron's Es Scale, also suggests sex differences although the specific findings have been far from consistent (Stanley and Bowers, 1966; Pedersen and Higbee, 1968; and Pedersen and Breglio, 1968).

Therapist Propositions

Hypotheses were also advanced regarding the relationship between self-disclosing behavior and the two therapist variables selected for the present investigation, namely therapist sex and therapist stance or self-disclosure.

Hypothesis III--Regarding therapist sex it was predicted that this variable either by itself or in interaction with client sex would have no significant relationship to client self-disclosure. This prediction was based upon the earlier findings of Vondracek (1970), Rivenbark (1971), and Wyrick and Mitchell (1969).

Hypothesis IV--Likewise, it was predicted that therapist stance by itself would have no significant overall relationship to client self-disclosure. This prediction is counter to the experimental studies discussed earlier which have demonstrated the effectiveness of interviewer self-disclosure in eliciting or reinforcing self-disclosing behavior by interviewees. As noted in that review, however, such studies have typically been conducted in laboratory settings and have been based on uniformity assumptions regarding interviewers and interviewees. Consequently, Bloch (1971) has questioned the direct application of such findings by therapists. Hypothesis IV then represents an empirical test of such laboratory findings within a psychotherapeutic setting.

Client-Therapist Propositions

Finally, the present investigation sought to explore some of the interaction effects between therapist stance, therapist sex, the two client variables and client self-disclosure in the hope that more precise findings regarding the effectiveness of therapist self-disclosure might result. The specific hypotheses that were tested are described below.

Hypothesis V. It was predicted that therapist self-disclosure would be positively associated with self-disclosing behavior in low ego strength clients, while being unrelated to, or negatively associated with, self-disclosing behavior in high ego strength clients. This hypothesis is based on the supposed impact of therapist self-disclosure and the assumption that these two client groups differ in their defensive styles. Theoretically, high ego strength clients are thought to be more "open" to talking about their problems and better able to respond to the implicit or explicit expectations of the psychotherapeutic setting. A series of studies discussed earlier has led Heller (1971) to conclude that such clients engage in the most self-disclosure under moderately stressful interview conditions. Additional studies by Blackburn (1970), Fritchy (1971), and Silver (1970) also support the notion that anxiety and discomfort can promote or lead to more intimate self-disclosure in interview situations.

Meanwhile, low ego strength clients theoretically are considered to have defensive styles which oppose a controlled, realistic exploration and disclosure of self-experiences. A "relaxation" of their rigid defenses under interview conditions which are perceived as non-threatening and nurturant might be expected to facilitate their engaging in self-disclosure. Previous research and theorizing has suggested that

therapist self-disclosure may serve to promote the latter interview conditions rather than the former (Bundza and Simonson, 1973; Johnson and Noonan, 1972; Ellison, 1972).

Hypothesis VI. The second interactional hypothesis predicted that therapist self-disclosure will be more positively associated with client self-disclosure when client and therapist are of the same sex than when they are of the opposite sex. This prediction was made on the assumption that therapist and client sex will in part influence how therapist self-disclosure is perceived and reacted to by the client. Therapist self-disclosure and the related reduction in social distance might be perceived in a manner that would encourage greater identification in relationships where client and therapist are of the same sex. On the other hand, when client and therapist are of a different sex such a reduction in social distance might at least initially be perceived as a seductive act and lead to heightened defensiveness on the part of the client. This speculation finds support in an analogue study by Jourard and Friedman (1970) in which self-disclosure by female subjects dropped off when a male interviewer "reduced the interpersonal distance" between himself and such subjects while no such effect was observed among the male subjects. Finally, keeping in mind the rationale offered in support of Hypothesis V, it was expected that the hypothesized difference in the relationship between therapist self-disclosure and client self-disclosure in therapist-client dyads of the same sex and therapist-client dyads of the opposite sex would be greatest in low ego strength clients.

CHAPTER THREE

RESEARCH DESIGN AND PROCEDURES

Source of Data

The tape recorded therapy sessions utilized in the present investigation were part of a library of fifty-five tape recorded psychotherapies developed at the Michigan State University Counseling Center. All the clients were undergraduate university students who came to the counseling center requesting counseling for personal and/or social problems. The clients were initially seen in a screening interview in which it was determined if the prospective client would be seen in psychotherapy at the counseling center. If accepted, clients were asked to participate in the center's research project by consenting to have their psychotherapy sessions taped. Moreover, they were asked to take personality tests prior to therapy, during the course of therapy, and following therapy. These clients were then seen in individual therapy sessions typically held once a week, with the length of therapy varying but seldom exceeding twenty sessions. Most of the clients were assigned to therapists participating in the research project on the basis of available time with final assignment of clients contingent upon acceptance by the therapists.

Subjects

The fifty-five psychotherapies in the Michigan State library were screened on the basis of four criteria: (a) the client was administered the Barron Es Scale as a part of the MMPI prior to therapy,

(b) the client was involved in four or more therapy sessions, (c) the client's therapy had been terminated, and (d) not more than two of the client's sessions were known to be missing from the tape library.

The clients involved in the psychotherapies which met these criteria were then ranked according to their Es scores. Male and female clients were ranked separately, and the male clients and female clients having the seven lowest and seven highest ego strength scores, in their respective groups, were selected as subjects for the present investigation. The mean Es scores for high ego strength clients was 51.3, while the mean Es score for low ego strength clients was 38.7. Moreover, a check of the number of deviant clinical scales on the complete MMPI showed a significantly greater degree of pathology existed within the low ego strength group of clients. This result was consistent with the findings of Wirt (1955) who reported a significant relationship between scores on Barron's Es scale and the general elevation of the MMPI profile.

The mean Es scores and average length of therapy of each client-therapist group are presented in Table I. Consistent with results reported by Holmes (1967) female clients tended to have lower ego strength scores than their male counterparts. Moreover, male clients of female therapists attended fewer sessions than other clients. Finally, a check of therapist experience revealed that one client in each client-therapist group was seen by a senior staff member while no more than one client in any of the groups was seen by a practicum student. The remaining clients were seen by first or second year interns at the counseling center.

Table 1

Es Scores and Average Length of Therapy of
the Eight Client-Therapist Groups

Clients with Male Therapists	Average Length of Therapy	Mean Es Scores
Hi Es Male Clients (N-5)	12.8	52.8
Hi Es Female Clients (N-5)	11.0	50.4
Lo Es Male Clients (N-6)	11.3	41.0
Lo Es Female Clients (N-4)	14.5	37.5
Clients with Female Therapists		
Hi Es Male Clients (N-2)	8.0	51.5
Hi Es Female Clients (N-2)	11.5	50.5
Lo Es Male Clients (N-1)	5.0	40.0
Lo Es Female Clients (N-3)	12.3	36.3

Sampling Procedure

The twenty-eight psychotherapies of the client-subjects described above provided the data for the present study. These psychotherapies consisted of a combined total of three hundred and thirty interviews. Unfortunately, twenty-one of these interviews were not recorded or were missing from the tape library at the time this study was done. Another four tapes were inaudible. Thus, the present investigation was based on the remaining three hundred and five recorded therapy sessions.

Little is yet known concerning the bias or error introduced into psychotherapy research through various sampling procedures. However, Karl and Abeles (1969) have shown that client behavior varies during the course of an interview, and that certain client behaviors occur more frequently in certain portions of an interview than in others. Moreover, in regard to self-exploration Kiesler et al (1965) have found that such trends are different for different client groups. Thus, inasmuch as the present investigation was primarily concerned with self-disclosing behavior in different client groups over the course of psychotherapy, the author devised a structured sampling procedure in which three-minute samples were taken from the first, middle, and last third of each psychotherapy session. Moreover, the location of each sample was systematically varied around the mid-point of each third insuring that samples would be drawn from nearly all portions of the interviews for each client involved in five or more therapy sessions. Since each interview was divided into equal thirds, however, the actual length of the interview ultimately determined the precise sample location.

Finally, in employing this sampling procedure the three hundred and five interviews were placed in a random order, and the three samples

from each interview were recorded on special scoring tapes. Approximately half of the interview samples were recorded in their natural sequence, while approximately half of the interview samples were recorded in reverse sequence. No information concerning the client, therapist, therapy session, sample location, or sample sequence was included on the scoring tapes. Samples from the same therapy session were simply separated by a break in the recording while samples from different therapy sessions were separated by a comment such as "next client".

This sampling procedure resulted in nine hundred and fifteen three minute samples of interview material. Each of these samples was then coded for both client self-disclosure and therapist stance.

Coding System

Client Self-Disclosure. Previous attempts to identify and measure self-disclosing behavior have taken a variety of forms. Questionnaires regarding self-disclosing behavior have typically differentiated such behavior in terms of specific content and the "target" toward whom the disclosure was directed (Jourard, 1964). Then too, Taylor and Altman (1966) have furnished researchers with a basis for assessing the intimacy of self-disclosures according to content. Information about one's work, interests, hobbies, and attitudes toward politics or current events for example are typically considered less intimate than disclosures concerned with one's own body, personality, emotions, or relationships with others.

Within psychotherapy research, self-disclosing behavior has sometimes been operationally defined as personal or self-references

(Peres, 1947; Braaten, 1958). Self-exploration, a concept closely related to self-disclosure, has been defined by Truax and Carkhuff (1965b) as a process of focusing internally and coming to know and verbalize one's beliefs, values, motives, perceptions, fears, and the nature of one's relationships and life choices. Both of the latter researchers have also offered scales for the measurement of depth of self-exploration based on how willingly, openly, and fully clients focus on and probe their inner experiences and feelings (Truax, 1962; Carkhuff, 1967).

The use of personal references would hardly seem to adequately define all that is meant by self-disclosure. While self-exploration as defined by Truax and Carkhuff (1965b) is a more adequate description of all that is involved in self-disclosing behavior, it might be argued that self-exploration and/or a coming to know one's self does not necessarily include disclosing one's self-experiences to another. Moreover, the scales designed to measure the depth of self-exploration are rather narrowly based on specific values and questionable statistical practices. Then too, Hurley (1967) has suggested that how self-disclosing a person should be rated depends more upon the direction of his motivation and intent than it does upon the amount of verbalization, level of insight, or appropriateness of the self-conception.

In light of these criticisms the author decided to adopt a more descriptive approach to the coding of client self-disclosing behavior which nevertheless took previous research efforts into account. In devising a coding system for the present investigation, the author utilized a broad theoretical conception of the Self as one half of the human mind--the other half being the Objects. In this sense, the Self was thought of as an experiential structure within the mind consisting

of all that a person comes to feel about himself as an object of others and experience within himself in relation to others. Self-disclosure, in turn, was conceptualized as a process of attending to one's self-representations or self-experiences in relation to non-self referents, and attempting to clarify and share these with some other. A copy of the author's coding system is contained in Appendix A.

Client statements then were first scored for the presence or absence of self-disclosure depending on whether or not the client was focusing on self-representations and experiences or object-representations (non-self material). Only when the content of a client's statement referred to experiential or structural elements of his Self was he judged to be engaged in self-disclosure.

Secondly, whenever a client was judged to be engaged in self-disclosure his disclosing behavior was rated for Mode of Disclosure according to the coding manual prepared by the present investigator in which four modes or styles of disclosing behavior were delineated. These four modes of disclosing behavior were based on (a) the apparent relevancy and degree of differentiation of the self-material, (b) the nature and intensity of the client's defensive operations around disclosing the material, and (c) the direction of his motivation for engaging in self-disclosing behavior as gleaned from his interaction with the therapist. Where a client's disclosing behavior could not be adequately or fully characterized as representing a single Mode of Disclosure, client statements were given an intermediate rating. These four modes of disclosure approximate the levels of self-exploration described by Carkhuff (1967) and provide a measure of depth of self-exploration.

Finally, whenever possible client self-disclosing statements were also coded for the role system referred to following a schema devised by Lennard and Bernstein (1960) and modified somewhat for the present investigation. Specifically, client self-disclosure statements were coded according to whether the client self-experiences were in relation to Non-human Objects (work, school, current events, etc.), Peripheral Objects (individuals or groups other than family, spouse, or therapist), Family members (parents, siblings, spouse), Self as an Object (general experiences, traits, etc.), or one of the other role systems delineated by Lennard and Bernstein (1960).

Therapist Stance. This dimension of therapist behavior was concerned with the manner in which the therapist related to the client. As discussed earlier, two mutually exclusive categories were defined, namely a Participating Stance and a Responding Stance. While Truax and Carkhuff (1965b) have offered a related dimensional concept in therapist transparency and Barrett-Lennard (1962) have referred to a therapist's "willingness to be known", such concepts are more broadly defined than the author's participating stance. In the present investigation a participating stance was defined in a manner that parallels client self-disclosure. Thus only those therapist statements referring specifically to the therapist's self-representations or self-experiences were coded as reflecting a participating stance. All other therapist statements were coded as reflecting a responding stance. Thus, a participating stance was viewed as synonymous with interviewer self-disclosure as defined in the laboratory studies reviewed earlier. Moreover, this definition was thought to be consistent with Jourard's

(1971) suggestion that because of the "dyadic effect" of self-disclosure therapists should reverse their usual interviewing procedures and disclose themselves as fully as they expect their clients to reveal themselves.

Coding Procedure

In order to establish the inter-rater reliability of the above coding system, the investigator and a reliability scorer, a relatively inexperienced therapist with a master's degree in psychology, met for approximately sixteen hours over the course of three weeks and scored several training tapes containing various samples of client-therapist interaction. At the end of this period of time they had achieved correlation coefficients ranging from .68 to .82 on the various dimensions of client self-disclosure. Since the samples utilized during this initial period did not contain evidence of a participating stance on the part of therapists, however, no corresponding estimate of the rater's reliability in coding therapist behavior was obtained although both raters reviewed and discussed hypothetical examples of such therapist behavior with a high level of agreement as to the definition of such a stance. None of the tapes used during this procedure were included as part of the data analyzed in this study.

Following this period of training, the investigator attempted to code all of the samples contained on the specially prepared scoring tapes for both client self-disclosure and therapist stance. Twenty of the samples could not be scored for client self-disclosure, however, inasmuch as they were either inaudible or in several cases contained a continuous therapist statement. These samples were ultimately dropped from the study.

The reliability scorer also independently coded 300 of the 895 samples comprising the data on which the results are based, in order to obtain additional inter-rater reliability estimates. These samples were arbitrarily taken from the beginning, middle, and final portions of the scoring tapes.

Method of Comparing Client Groups

In order to compare the self-disclosing behavior of eight client groups previously described and evaluate the predictions set forth in Hypotheses I, II, and III, proportions were derived for the frequency, modes, and focus of self-disclosing behavior found within each of the eight groups of clients. This was accomplished by observing the frequency with which each aspect of self-disclosure occurred within a particular client-therapist group relative to the total number of respective samples scored. Using such proportions as estimates of the corresponding population proportions, the null hypothesis, $P_1 = P_2$, was then tested by means of a chi-square approximation. This procedure was reviewed and approved by Dr. Raymond Frankmann, statistical consultant within the department of psychology at Michigan State University.

CHAPTER FOUR

RESULTS

Appendix B contains a breakdown by client-therapist groups of the author's coding of the 895 samples scored for client self-disclosure. Self-disclosing behavior was found to be present in 632, or 70.6%, of the samples. Moreover, it was possible to code 509 of the latter samples, or 79%, for role system.

While one of the purposes of the present investigation was to study the relationship between client self-disclosure and therapist stance, only ten samples contained any evidence of a participating stance on the part of therapists. Thus, it was necessary to drop this therapist variable from the study.

Scoring Reliability

The inter-rater reliability coefficients achieved during the scoring procedure are presented in Table 2. In establishing the reliability coefficient for Mode of Disclosure ratings, the scale was collapsed by including all intermediate ratings within the next highest major mode category. Thus, the ratings were grouped according to the highest Mode of Disclosure judged to be present during the three-minute sample. Since the reliability rater tended to utilize somewhat higher ratings when differences occurred, this grouping served to increase the inter-rater reliability slightly more than other ways of collapsing the scale.

Table 2

Reliability Estimates Based on Author's and
Reliability Rater's Independent Coding of 300 Samples

Presence of self-disclosure	.80 ^a
Mode of self-disclosure	.65 ^a
Role system (percent of agreement)	
Self	85%
Family	84%
Peripheral	94%
Non-human	89%

^aproduct moment correlation significant at less than .01

While the degree of association in each instance was far greater than that expected on the basis of chance, Truax and Mitchell (1971) have pointed out that such reliability estimates are not closely tied to predictive validity in the sense that they do not reflect whether or not a coding system is able to discriminate differential client process or outcomes. Thus, in order to further assess the present coding system and the reliability of the coding procedures, ratings for each client were compiled separately for odd and even interviews. Clients were ranked from one to twenty-eight on even interview scores and on odd interview scores for presence of self-disclosure, and Modes 1 and 2 of the author's self-disclosure scale, and rank correlations were obtained. The resulting rank correlations of .41, .37, and .39 respectively, all of which were significant beyond .05, suggested the present coding system was capable of differentiating among clients with a moderate degree of reliability even though a sizable proportion of these rankings were based on a relatively small number of samples.

Client Propositions

Hypothesis I predicted that clients with high ego strength scores on Barron's scale would (a) engage in self-disclosure more frequently, (b) explore themselves more deeply, and (c) focus their exploration more extensively on aspects of self and/or their relationship with family members than clients with low ego strength scores on Barron's scale. This hypothesis was tested in two groups of male clients and two groups of female clients in order to control for the influence of client and therapist sex. Table 3 shows the results of the X^2 tests used to compare the self-disclosing behavior of the high and low ego strength clients within these four groups.

The results indicated that high ego strength male clients of male therapists showed a very strong trend to engage in significantly more self-disclosure than low ego strength male clients with male therapists, but did not explore more deeply or focus more extensively on the self and/or family role systems. High ego strength female clients of male therapists not only engaged in significantly more self-disclosure but also explored more deeply than their low ego strength counterparts. However, high ego strength female clients of male therapists did not focus their exploration on the self or family role systems to a degree that was significantly different from that of low ego strength female clients of male therapists.

High ego strength male clients of female therapists did not differ significantly in their disclosing behavior from low ego strength male clients with female therapists either in terms of the frequency with which they engaged in self-disclosure, their depth of exploration, or the extent to which they focused on the self and/or family role systems.

Table 3

Summary of Comparisons Between High and Low Es Clients

Hypothesis I	Frequency	Mode	Self	Family System
Clients with Male Therapist				
Hi Es Male Clients Lo Es Male Clients	$\chi^2-3.8149^c$ H > L	$\chi^2-.4078$ L > H	$\chi^2-.691$ L > H	$\chi^2-.6681$ L > H
Hi Es Female Clients Lo Es Female Clients	$\chi^2-4.4560^a$ H > L	$\chi^2-13.6929^b$ H > L	$\chi^2-.5765$ L > H	$\chi^2-0.0000$ L > H
Clients with Female Therapist				
Hi Es Male Clients Lo Es Male Clients	$\chi^2-1.56$ H > L	$\chi^2-.9760$ L > H	$\chi^2-.0124$ L > H	$\chi^2-2.2362$ L > H
Hi Es Female Clients Lo Es Female Clients	$\chi^2-.1959$ H > L	$\chi^2-.4194$ L > H	$\chi^2-7.1146^b$ L > H	$\chi^2-2.8989$ H > L

^a prob. less than .05

^b prob. less than .01

^c prob. less than .06

However, this comparison was based on a relatively small number of samples. The only significant difference among high ego strength and low ego strength female clients with female therapists appeared in the extent to which they focused on the self system. In this instance the direction was contrary to that predicted by Hypothesis I inasmuch as the low ego strength females with female therapists focused more extensively on the self system than their high ego strength counterparts.

Thus Hypothesis I received very inconsistent support across the four client groups. Client ego strength was significantly associated with the frequency with which clients engaged in self-disclosure only in those groups with male therapists. Moreover, whether or not client ego strength was associated with the depth with which clients explored depended both on the sex of the therapist and the sex of the client. Finally, client ego strength appeared negatively associated with the extent to which female clients with female therapists focus on the self system.

Hypothesis II predicted that male and female clients would not differ significantly in the frequency with which they engaged in self-disclosure, but would show specific differences in the mode, or depth, with which they explored themselves. In addition to exploring more deeply it was predicted that female clients would focus more of their exploration on the self and/or their relationships with family members. This hypothesis was tested in two groups of high ego strength clients and two groups of low ego strength clients in order to control for the influence of client ego strength and therapist sex. Table 4 shows the results of the X^2 tests used to compare the self-disclosing behavior of the male and female clients within these four groups.

An inspection of Table 4 shows that within the two groups of low ego strength clients no significant differences were found between male and female clients. Within the two groups of high ego strength clients, male and female clients did not differ significantly in the frequency with which they engaged in self-disclosure. However, high ego strength female clients with male therapists explored more deeply than their male counterparts. Moreover, high ego strength female clients with female therapists showed a moderately strong trend (prob. less than .11) of a similar nature.

Meanwhile, high ego strength male and female clients of male therapists did not show any significant differences in the extent to which they focused their exploration on either the self or family role systems. On the other hand, with female therapists high ego strength male clients focused more extensively than high ego strength female clients on the self system, while high ego strength female clients showed a strong trend (prob. less than .07) toward focusing more extensively than high ego strength male clients on the family role system. While the latter finding is consistent with the prediction in Hypothesis II, the former result is in the opposite direction from that predicted.

Hypothesis II then received support across all four client groups insofar as male and female clients did not appear to differ significantly in the frequency with which they engaged in self-disclosure. However, only high ego strength female clients of male therapists clearly explored more deeply than their male counterparts. While high ego strength female clients of female therapists showed a similar trend, they also showed a trend to focus more extensively on the family role system. Nevertheless, the only significant difference between male and female clients within the four groups in regard to focusing on the self

Table 4

Summary of Comparisons Between Male and Female Clients

Hypothesis II	Frequency	Mode	Self	Family System
Clients with Male Therapist				
Hi Es Male Clients Hi Es Female Clients	$\chi^2-.1177$ M > F	$\chi^2-11.8546^a$ F > M	$\chi^2-.0913$ F > M	$\chi^2-1.4152$ F > M
Lo Es Male Clients Lo Es Female Clients	$\chi^2-.5064$ M > F	$\chi^2-1.7122$ M > F	$\chi^2-.1256$ F > M	$\chi^2-.1748$ F > M
Clients with Female Therapist				
Hi Es Male Clients Hi Es Female Clients	$\chi^2-1.2947$ M > F	$\chi^2-2.5683^b$ F > M	$\chi^2-13.3884^a$ M > F	$\chi^2-3.3119^c$ F > M
Lo Es Male Clients Lo Es Female Clients	$\chi^2-.0636$ M > F	$\chi^2-.5987$ F > M	$\chi^2-.8403$ M > F	$\chi^2-1.5912$ M > F

^a prob. less than .01^b prob. less than .11^c prob. less than .07

and family role systems was contrary to the prediction made in Hypothesis II in that high ego strength male clients of female therapists focused more extensively on the self system than their female counterparts.

In order to further clarify the results obtained in connection with Hypotheses I and II from the point of view of the interaction between client sex and client ego strength, client groups were ranked on frequency of self-disclosure, mode or depth of disclosure, and the two role systems considered under Hypotheses I and II. These rankings are presented in Table 5. A dotted line was inserted between groups wherever the previous results indicated one or more of the groups tended to differ significantly from one or more of the other groups within the same ranking.

An inspection of Table 5 suggests the rankings generally reflect client ego strength rather than client sex. When differences between male and female client groups occurred, however, they were more apparent among high ego strength clients, ie. high ego strength male and female client groups tended to differ from one another more than low ego strength male and female client groups. Stated differently, it might be said that low ego strength client groups tended to be more closely associated with client groups of the opposite sex than with their high ego strength counterparts.

Therapist Propositions

As indicated earlier one of the original purposes of the present study was to systematically observe the relationship between therapist stance and client self-disclosure within various client-therapist groups. However, insufficient evidence of a participating stance on the part of therapists was found to proceed with this aspect of the investigation.

Table 5
 Ranking of Client Groups According to Therapist Sex

Clients with Male Therapists				
Ranks	Frequency	Mode	Self System	Family System
I	Hi Es Males	Hi Es Females	Lo Es Females	Lo Es Females
II	Hi Es Females	Hi Es Males	Lo Es Males	Lo Es Males
III	Lo Es Males	Lo Es Males	Hi Es Females	Hi Es Females
IV	Lo Es Females	Lo Es Females	Hi Es Males	Hi Es Males
Clients with Female Therapists				
I	Hi Es Males	Lo Es Females	Hi Es Males	Lo Es Males
II	Hi Es Females	Lo Es Males	Lo Es Males	Hi Es Females
III	Lo Es Females	Hi Es Females	Lo Es Females	Lo Es Females
IV	Lo Es Males	Hi Es Males	Hi Es Females	Hi Es Males

Nevertheless, it was possible to assess the influence of therapist sex on client self-disclosing behavior.

Hypothesis III predicted that therapist sex by itself or in interaction with client sex would have no significant relationship to client self-disclosure. The influence of therapist sex was already suggested in the assessment of Hypotheses I and II, where several significant relationships and/or trends were found between either client ego strength or client sex and self-disclosure among clients of a therapist of one sex but not the other. In order to assess the relationship between therapist sex and client self-disclosure, while controlling for client ego strength and client sex, however, Hypothesis III was tested within two groups of male clients and two groups of female clients. Moreover, two additional comparisons were made between male and female clients with therapists of the same sex.

Table 6 contains the results of these six comparisons. As predicted in Hypothesis III, no significant differences related to therapist sex emerged in regard to the frequency with which clients engaged in self-disclosure, although high ego strength male clients of male therapists showed a trend (prob. less than .10) toward disclosing more frequently than high ego strength female clients with female therapists. However, both high ego strength male and female clients of male therapists explored more deeply than high ego strength male and female clients of female therapists. Thus, therapist sex did appear to be significantly related to depth of exploration among high ego strength clients.

Then too, while therapist sex did not appear to make a significant difference in the extent to which either high ego strength or low ego

Table 6

Summary of Comparisons Between Clients of
Male Therapists and Clients of Female Therapists

Hypothesis III	Frequency	Mode	Self	Family System
Hi Es Male Clients				
With Male Therapist	$\chi^2-.02660$	$\chi^2-8.2099^a$	$\chi^2-.8586$	$\chi^2-.7501$
With Female Therapist	M > F	M > F	F > M	M > F
Lo Es Male Clients				
With Male Therapist	$\chi^2-.5047$	$\chi^2-.7640$	$\chi^2-.1581$	$\chi^2-.4904$
With Female Therapist	M > F	M > F	F > M	F > M
Hi Es Female Clients				
With Male Therapist	$\chi^2-2.1745$	$\chi^2-9.0858^a$	$\chi^2-10.8889^a$	$\chi^2-.4595$
With Female Therapist	M > F	M > F	M > F	F > M
Lo Es Female Clients				
With Male Therapist	$\chi^2-.0862$	$\chi^2-.2997$	$\chi^2-4.0196^b$	$\chi^2-1.7981$
With Female Therapist	M > F	F > M	M > F	M > F
Therapist of Same Sex as Client				
Hi Es Male Clients	$\chi^2-3.2911^c$	$\chi^2-2.1632$	$\chi^2-10.2598^a$	$\chi^2-2.459$
Hi Es Female Clients	M > F	M > F	M > F	F > M
Lo Es Female Clients				
Lo Es Male Clients	$\chi^2-.8724$	$\chi^2-.3135$	$\chi^2-1.2661$	$\chi^2 1.1465$

^a prob. less than .01

^b prob. less than .05

^c prob. less than .10

strength male clients focused their exploration on the self or family systems, significant differences did emerge among high ego strength and low ego strength female client groups. In both instances female clients of male therapists focused significantly more of their exploration on the self system than female clients of female therapists. Finally, high ego strength male clients of male therapists were also found to have focused more extensively on the self system than high ego strength female clients of female therapists. Thus, Hypothesis III was clearly not supported in at least three of the four client groups. Only among low ego strength male clients did therapist sex appear to be relatively independent of the various aspects of disclosing behavior.

Finally, the comparisons made in connection with Hypothesis III served to clarify some of the results reported in connection with Hypothesis II. Under Hypothesis II, it was found that high ego strength female clients explored more deeply than high ego strength male clients when both had male therapists. When high ego strength males and high ego strength females, each with therapists of the same sex were compared in connection with Hypothesis III, however, no significant differences were found with regard to depth of exploration. Thus, whether or not high ego strength female clients explore more deeply than high ego strength male clients would appear to depend to a marked degree on an interaction between client and therapist sex. Both high ego strength male and high ego strength female clients appeared to explore deepest when paired with male therapists.

Finally, in order to explore interaction effects between the three major variables assessed in Hypothesis I, II, and III and compare the self-disclosing behavior of the eight client-therapist groups

utilized in the present study, the groups were ranked on frequency and mode of self-exploration, and the two role systems employed in this investigation. These rankings are presented in Table 7.

An inspection of Table 7 clearly suggests complex interactions among client ego strength, client sex, and therapist sex and client self-disclosure. Moreover, the interactions among these variables appear different across the various aspects of self-disclosing behavior. Particularly notable, however, is the difference between high ego strength clients of male therapists and high ego strength clients of female therapists with respect to mode of disclosure. Then too, clients of female therapists, particularly those with high ego strength, showed divergent trends in regard to the extent to which they focused their exploration on the self and family role systems while clients of male therapists did not. A further discussion of these interactions follows in the next chapter.

Meanwhile, the present statistical results suggest that when male clients were paired with male therapists, high ego strength males tended to disclose more frequently than low ego strength males but their actual disclosures did not differ significantly from those of low ego strength males. However, when high ego strength males were paired with female therapists they did not explore as deeply as they did when they were paired with male therapists. The self-disclosing behavior of low ego strength male clients, meanwhile, appeared less dependent upon the sex of the therapist. Finally, when paired with female therapists, high and low ego strength male clients did not differ significantly in either the frequency, depth, or focus of their disclosing behavior.

Table 7
Ranking of Eight Client Groups

Ranks	Frequency	Mode	Self System	Family System
I	Hi Es Males-M	Hi Es Females-M	Hi Es Males-F	Lo Es Males-F
II	Hi Es Males-F	Hi Es Males-M	Lo Es Males-F	Hi Es Females-F
III	Hi Es Females-M	Lo Es Males-M	Lo Es Females-M	Lo Es Females-M
IV	Lo Es Males-M	Lo Es Females-F	Lo Es Males-M	Lo Es Males-M
V	Hi Es Females-F	Lo Es Males-F	Hi Es Females-M	Hi Es Females-M
VI	Lo Es Females-M	Lo Es Females-M	Hi Es Males-M	Hi Es Males-M
VII	Lo Es Females-F	Hi Es Females-F	Lo Es Females-F	Lo Es Females-F
VIII	Lo Es Males-F	Hi Es Males-F	Hi Es Females-F	Hi Es Males-F

When female clients were paired with male therapists high ego strength females not only disclosed more frequently but also explored more deeply than low ego strength females. High and low ego strength female clients did not differ significantly, however, in the extent to which they focused on the self and/or family role systems. When high ego strength females were paired with female therapists, however, they did not explore as deeply or focus on the self system as extensively as they did when they were paired with male therapists. Low ego strength female clients also did not focus on the self system as extensively when they were paired with female therapists. Finally, the high and low ego strength female clients of female therapists did not differ significantly in either the frequency or depth of their disclosing behavior, but the low ego strength female clients focused more extensively on the self system than the high ego strength female clients. Thus, once again it was the self-disclosing behavior of the high ego strength female clients that appeared most dependent upon the sex of the therapist.

Finally, client sex differences in disclosing behavior were found among high ego strength clients, but not among low ego strength clients. When both were paired with male therapists, high ego strength female clients explored more deeply than high ego strength male clients. High ego strength female clients of female therapists also evidenced a similar trend. Then too, when both were paired with female therapists, high ego strength female clients did not focus as extensively as high ego strength male clients on the self system, but evidenced a strong trend to focus more extensively than high ego strength male clients on the family role system.

CHAPTER FIVE

DISCUSSION

Previous attempts to study self-disclosing behavior have frequently been based on uniformity assumptions regarding clients and therapists. Consequently, the results have often appeared contradictory or confusing in nature and have had questionable applicability to specific psychotherapeutic situations. However, little is yet known about what client or therapist variables might be particularly relevant to such investigations, nor how they might interact to obscure the effects of any single variable.

The present research was concerned with examining client self-disclosure within various client-therapist groups in order to shed further light on such issues. The specific variables studied included client ego strength, client sex, and therapist sex. While the investigator had hoped also to concern himself with the relationship between therapist stance and client self-disclosure within the various client-therapist groups, the data did not contain sufficient evidence of therapist self-disclosure to carry out this aspect of the study.

When the three hypotheses were assessed across various client-therapist groups the results did not offer consistent support for any of the predicted relationships between single major variables and client self-disclosure. Instead, the data suggested self-disclosure was most often dependent on a complex interaction between client ego strength,

client sex, and/or therapist sex. This result clearly supports Kiesler's (1966) position concerning the need to avoid uniformity assumptions in designing and interpreting psychotherapy research. Moreover, research investigators and theorists alike will need to consider such interactions in arriving at a clearer understanding of the psychotherapeutic process. Thus, in this discussion of the present results special attention will be given to explicating the interactions and theorizing as to their significance in the hope that such ideas will serve to stimulate future research.

Client Ego Strength

Client ego strength was selected for the present study because of its theoretical relevance to the process of self-disclosure and demonstrated relationship to therapeutic outcomes. The results provided very inconsistent support for predictions that clients with high Es would engage in self-disclosure more frequently, explore more deeply, and focus their exploration more extensively on the Self and Family role systems than clients with low Es. Indeed, the relationship between client Es and self-disclosure appeared much more complex than what is suggested by such predictions inasmuch as the results were frequently dependent upon client and/or therapist sex.

Specifically, high Es clients appeared more reactive to therapist sex than low Es clients. Differences in disclosing behavior related to therapist sex were more frequent among high Es client groups than low Es client groups. Then too, when differences between male and female client groups emerged, they also were found between high Es male and female clients but not low Es male and female clients. Indeed, low

Es client groups showed some tendency to be more closely associated with client groups of the opposite sex than with their high Es counterparts, (see Table 5). Thus, the importance of client ego strength as a variable in the present research appeared in the extent to which it interacted with client and therapist sex rather than having any direct relationship to client self-disclosure.

This result indeed was similar to those obtained in more general empirical tests of the relationship between self-disclosure and mental health where the results have also been inconsistent or limited to specific targets, areas of content, sex of discloser, or some combination of these (Taylor and Frankfurt, 1965; Truax and Wittmer, 1971; Stanley and Bowens, 1966; Pedersen and Higbee, 1968; Pedersen and Breglio, 1968; Hamilton, 1971; Persons and Phillip, 1970; Granoff, 1971; and Lind, 1971). Clearly then research does not support the notion that relatively healthy persons, or persons with high Es are necessarily more "open", or more self-disclosing, than persons with more pathology and/or low Es. While high Es clients may theoretically possess defensive styles which allow them to be more "open" to disclosing than low Es clients--high Es clients in all of the client groups disclosed more frequently than their low Es counterparts although some differences did not differ significantly from what might have been expected on the basis of chance--high Es clients may also exercise more discrimination and/or autonomous control in respect to their disclosing behavior.

Then too, the present interaction between client Es, client sex, and/or therapist sex may well reflect the developmental stage and associated struggles of the particular client population utilized in

the present study. Ego strength and its association with pathology may in large measure reflect the extent to which undergraduates have been able to consolidate and integrate their accrued self-experiences to form a secure sense of identity. Indeed, the present data suggests that high Es clients are more differentiated with respect to their sexual identities than are clients with low Es. Moreover, role confusion (Erikson, 1950) is suggested among low Es client groups to the extent that they tend to be associated with client groups of the opposite sex. Finally, this finding may also reflect the author's use of Barron's scale as the measure of ego strength inasmuch as Chu (1967) has found heterosexuality to be a significant dimension of this instrument.

Client Sex Differences

When the same data are viewed from the perspective of client sex, it becomes apparent that male clients tended to be less reactive to therapist sex than female clients. Moreover, differences related to ego strength were less pronounced among male clients than among female clients. Thus, ego strength and therapist sex appeared to influence self-disclosing behavior most dramatically among female clients, while the influence of these variables was least pronounced among male clients. The significance of this observation can be questioned from a statistical point of view, however, inasmuch as the trend is certainly not pronounced. Nevertheless, it suggests that ego strength may have a somewhat different meaning in males than in females. Specifically, it might suggest that while high Es clients are generally more responsive or sensitive to the emotional and/or interpersonal nuances that characterize the psychotherapeutic process than clients with low

Es, this sensitivity is particularly marked among female clients. Such theorizing would be consistent with that of Carlson (1971) and Gutman (1965). Moreover, in laboratory studies of self-disclosing behavior, Certner (1971) and Jourard and Friedman (1970) also found female subjects to be more reactive to their experimental variables than male subjects.

Meanwhile, the present data offered more direct evidence of differences in disclosing behavior between male and female clients. Again these differences were most apparent among high Es clients who it has been suggested may be the most clearly differentiated with respect to sexual identity. In essence Hypothesis II predicted qualitative differences rather than quantitative differences in the self-disclosing behavior of male and female clients. This prediction was based on previous investigations of sex differences by Doyme (1972), Frankel (1970), and Vondracek (1970). Within the two groups of high Es clients no significant differences were found among male and female clients with respect to the frequency with which they engaged in self-disclosure. Thus, Jourard's (1962) position that females disclose more than males was not supported. However, female clients with male therapists explored more deeply than their male counterparts, and female clients with female therapists showed a moderately strong trend of a similar nature in spite of the fact that neither high Es male or female clients explored as deeply when paired with female therapists.

These results then supported the investigator's position that males and females would not differ with respect to the frequency with which they disclosed, but would show differences in respect to the manner in which they disclosed aspects of their self-experiences.

Perhaps this difference reflects the extent to which males tend to be more analytical and employ intellectualization and obsessional defenses whereas emotionality and hysterical defenses are more common among females after the manner in which male and female roles have been defined within our society. The present results also suggest that previous reports of quantitative differences in male and female disclosing behavior, most of which have been based on Jourard's Questionnaire, may simply reflect the measurement bias of a particular instrument.

Hypothesis II also predicted differences in the extent to which male and female clients would disclose aspects of the Self as an Object (general traits, attitudes and behaviors that are relatively independent of specific relationships) and self-experiences in relation to family members or family role system). Once again the results suggested an interaction between client Es, client sex, and therapist sex. From the data presented in Tables 3 and 6 it can be seen that the extent to which male clients focused on the Self as an Object was relatively independent of ego strength and sex of therapist. However, both ego strength and therapist sex appeared strongly related to the extent to which females disclosed general characteristic of the Self. The rankings presented in Table 6 clearly suggest, however, that both low Es females and high Es females tended not to focus on the Self as an Object when paired with female therapists. This tendency was simply more pronounced among high Es females. Thus, among high Es clients with female therapists, male clients were found to focus more extensively on the Self as an Object than female clients, (see Table 4).

Alexander and Abeles (1968) reported an inverse relationship between focusing on the Self as an Object and dependency on the

therapist. Perhaps, then, dependency was an important issue, particularly among clients of female therapists. If so, the data would suggest male clients tend to avoid dependency on either male or female therapists; whereas female clients, particularly those with high Es, avoid dependency on male therapists, but express dependency with female therapists.

When attention is turned to the extent to which clients disclosed self-experiences related to members of the Family role system, the data suggest a somewhat similar interpretation. In this instance, when high Es clients were paired with female therapists female clients tended to disclose more self-experiences related to members of the Family role system than high Es male clients, (see Table 4). Again, this difference may reflect the previous speculation concerning differences in dependency needs among high Es male and female clients inasmuch as high Es female clients might naturally remain more dependent on family members than high Es male clients. The rankings presented in Table 7, however, suggest a trend for low Es clients of female therapists to be associated with high Es clients of the opposite sex. This would suggest that low Es males may be more dependent on members of the Family role system than low Es females. Thus, client ego strength may not only reflect the degree to which clients have achieved a differentiated sexual identity but also the degree to which they have resolved dependency needs in a manner that is in keeping with their particular sexual identity as set forth within the society.

Furthermore, since low Es male clients with female therapists focus on both the Family system and the Self system to a high degree, it might be suggested that while low Es male clients remain involved

and dependent upon family members they resist transferring or focusing this dependency on a female therapist and thus also focus on the Self system in a manner similar to their high Es counterparts. Analogously, it could be suggested that while low Es female clients are pathologically cut off or "independent" from family members in contrast to their high Es counterparts, they seek dependency satisfactions when paired with female therapists.

These speculations would also find some support from Alexander and Abeles (1968) who reported that dependency within the Family system appeared most closely associated with dependency in relation to the therapist. However, the present speculations would suggest that transference of dependency would be most pronounced among high Es female clients with female therapists and least evident among low Es male clients with female therapists.

Male and Female Therapists

While Hypothesis III predicted therapists' sex, by itself or in interaction with client sex, would not be significantly related to client self-disclosure, the results obviously did not support this prediction. Again therapist sex appeared to influence client self-disclosure most among high Es female clients and least among low Es male clients, (see Table 6). Moreover, both high Es male and female clients of male therapists disclosed deeper than high Es male and female clients of female therapists. Finally, high Es male and female client groups appeared more differentiated in respect to the extent to which they focused their exploration on the Self or Family role systems when females served as therapists than when males served as therapists.

While these results strongly suggest male and female therapists created different interview conditions for their clients either by their mere presence or through their style of interviewing, such comparisons do not clarify how interviews conducted by male therapists might have differed from those conducted by female therapists.

Previous speculations have suggested, however, that dependency may have been an important issue among clients of female therapists and that the manner in which high Es male and female clients focused their exploration, when both were with female therapists, might reflect their sexual identities regarding the management of dependency. Conversely, it might then be suggested that female therapists differed from male therapists in the extent to which they stimulated, approached, or otherwise dealt with client dependency. Moreover, following Heller's (1971) position that clients whose defensive style allows them to be more open to disclosing do so more readily under relatively stressful conditions rather than under subjectively pleasant or less threatening conditions, it might be suggested that interviews conducted by male therapists were in some way more stressful to clients since both high Es male and female clients explored more deeply when paired with male therapists. Combining the two speculations then, the data would be relatively consistent with a suggestion that female therapists were viewed as offering more nurturant support than male therapists and therefore activated dependency issues while providing interview conditions that were subjectively pleasant. Then too, the relative lack of differentiation between male and female clients of male therapists in regard to the focus of their self-exploration might suggest that male therapists took a more active role in directing

their clients' self-exploration than female therapists. A more reflective non-directive style of interviewing on the part of the female therapist could also be expected to result in less threatening interview conditions.

Clearly, however, such speculations have only face validity and can only be evaluated through further research efforts. Moreover, it is possible that research based on more contemporary psychotherapy data would find very different interactions between client ego strength, client sex, therapist sex, and self-disclosure inasmuch as male and female roles in many respects have been re-defined within our society in the last decade. Moreover, with the rise of the women's liberation movement the significance of therapist sex might be quite different, particularly for female clients, today than it was ten years ago when the present clients were seen.

Finally, the investigator's failure to find evidence of therapists' utilizing a participating stance or engaging in self-disclosure might similarly be time-bound. While writers such as Whitaker and Malone (1953) and Mullan (1955) began to encourage therapists to share their own self-experiences with clients in the 1950's, this non-traditional school of thought might also have received wider acceptance within established counseling centers in recent years as a result of the increased interest in existentialism, the work of Jourard (1971), and the rise of the human potential movement. Again, however, these observations remain for future research to clarify.

CHAPTER SIX

SUMMARY

Client self-disclosing behavior as represented by 895 segments taken from the psychotherapies of 28 clients seen at a university counseling center was examined. Fourteen male and fourteen female clients were selected according to their ego strength (Es) scores on Barron's Es Scale administered as part of the MMPI prior to therapy to form a group of high Es male and female clients and a group of low Es male and female clients. Client-therapist groups were then compared in order to test the following three hypotheses:

I. Clients with high Es scores on Barron's scale would
a) engage in self-disclosure more frequently, b) explore themselves more deeply, and c) focus their exploration more extensively on general aspects of the Self and their relationship with family members than clients with low Es scores on Barron's scale;

II. Male and female clients would a) not differ significantly in the frequency with which they engaged in self-disclosure, but
b) female clients would explore more deeply and focus more extensively on general aspects of the Self and their relationship with family members than male clients; and

III. Therapist sex by itself or in interaction with client sex would have no significant relationship to client self-disclosure.



The results indicated that when paired with male therapists high Es clients disclosed more frequently than low Es clients. Moreover, high Es clients explored more deeply when paired with male therapists. When paired with female therapists high Es male clients focused more extensively on general traits of the Self, while high Es female clients focused more extensively on their relationship with family members. These results were discussed in terms of the possible differential impact of male and female therapists upon client dependency and interview stress.

Then too, the results indicated that depth of self-disclosure was a function of Es in female clients, but not male clients. As expected, high Es female clients were found to disclose more deeply than high Es male clients, particularly when seen by male therapists. These results appeared consistent with societal definitions of male and female roles, at the time these clients were seen. Finally, behavior consistent with these role definitions was not found among low Es clients suggesting psychopathology among undergraduate clients may be closely associated with role confusion or failure to establish a clear sexual identity.

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APPENDICES

Appendix A

A MANUAL FOR THE CODING OF SELF-DISCLOSING BEHAVIOR

by Paul Hyink, M.A.

The manual represents an attempt to provide a system by which self-disclosing behavior, as it occurs in unstructured interview situations, can be described and reliably evaluated. The system is based on three aspects of disclosing behavior, namely a) frequency of self-disclosure, b) mode, or depth, of self-disclosure, and c) the objects associated with the self-experiences.

Concept of the Self

The Self emerges in interview situations as a structure within the human mind which has both location and continuity (Kohut, 1971). The Self refers to one's own physical and mental self in contrast to the surrounding world of objects. It includes psychic representations of one's appearance, anatomy, physiology (bodily self), and of one's feelings, thoughts, wishes, impulses, and attitudes (mental self). It depicts one's behavior, ideals, values, and the effectiveness of one's self-critical functions. It consists of the sum total of one's experiences with persons who possess antithetical and/or complementary properties and who therefore serve as non-self-referents. As such, then, the Self can be thought of as a synthetic reference point for a multitude of corresponding object-representations, or as one half of the human mind--the other being the objects (Jacobson, 1964).

The Process of Self-Disclosure

Self-disclosure is conceptualized as a process of focusing one's self representation or self-experiences in relation to non-self-referents and sharing these with some other. Within the present coding system a person is judged to be engaged in self-disclosure when, from his verbal statements, it can be inferred that his attention is directed primarily toward his Self, or self-experiences, rather than objects. In turn, ratings of Mode, or depth, of a person's disclosures are based upon a) the nature of the material disclosed, b) level of self-awareness conveyed in the disclosure, and c) the direction of his motivation in sharing aspects of his Self. Finally, self-disclosures are coded for the Object representations associated with the disclosed self-experiences, using a modified version of a system devised by Lennard and Bernstein (1960). (see below)

I. Categories of Object-Representations (Role Systems):

Whenever possible self-disclosure statements are coded for the Object representations associated with the disclosed self-experiences. The primary focus of these categories is the self-object relationship or role system explicitly referred to by the speaker. If the scoring unit contains references to more than one class of Objects, score in the lower category.

A. Family Members (Fam.):

This category includes all persons with whom the speaker shares membership within a family unit, eg. spouse, children, parents, siblings.

B. Peripheral Objects (PO):

This category refers to persons of social systems other than the speaker's family, eg. dates, friends, employer, teachers, national figures, etc.

C. The Self (Self):

This category is employed when the speaker's self-disclosure statements refer to the Self as an object rather than self experiences in relation to other objects or persons. Included are expressions of the speaker's view of his own personality, behavior, traits, etc. as well as expressions of feelings or attitudes which are so general in nature as to be relatively independent of specific relational experiences or objects.

D. Non-Human Objects (NHO):

This category refers to all non-human aspects of the speaker's environment which are separate and distinct from the Self, eg., weather, events, facts, material objects, school, etc.

II. A Self-Disclosure Scale

A. Absence of Self-Disclosure (ASD)

Whenever the speaker's attention is primarily focused on non-self-referents statements are scored as ASD. Discussions or statements of non-self material even though they may indirectly reveal aspects of the Self or the speaker's external surroundings are included.

Examples.

C1: If Dad doesn't like what I'm doing, he just grumbles about it. (ASD)

C1: My parents always ask if I'm getting enough sleep. (ASD)

C1: My boss is a really nice guy. (ASD)

C1: Yea, it was a small town, must have had only 16,000 people, you know, and one store where everyone shopped. (ASD)

B. Self-Disclosure Evident (SDE)

Whenever attention is primarily focused on Self representations and/or self-experiences statements are scored SDE to indicate the presence of self-disclosing behavior. Moreover, such disclosing behavior is characterized further by means of Mode ratings and the Object representations associated with the disclosed self-experiences.

1. Mode I (Remote Self-Disclosure). In Mode I the speaker tentatively focuses on the Self or his self-experiences in relation to others, but his disclosures are vague or general in nature and he does not appear strongly motivated to clarify or communicate his self-experiences.
 - a) Content. Here the person communicates aspects of his inner experience, but such self-disclosures are of a non-intimate nature, are not particularly revealing of the Self, or appear to have little direct bearing on the person's underlying problem. Moreover, in disclosing his self-experience the person may depersonalize the experience by suggesting the experience is general, natural, or extremely common. The speaker may also give a blow-by-blow accounting of events involving himself.
 - b) Self-Awareness. Defensive operations in Mode I include a) denial of self-experience where the person indicates what his subjective experience is not rather than what it is, b) extreme intellectualization or rationalizing, and/or c) an unwillingness to "own" or accept responsibility for elements of the Self.

Thus, self-disclosures at Mode I are frequently qualified by comments such as "maybe", or "it could be...." Then too, a person may talk of the Self as a product of external circumstances, heredity, or his environment. The tendency toward marked intellectualization common at Mode I is observed in the use of theoretical, abstract, or highly cognitive terms when referring to the Self. Finally, the intensity of defensive operations at Mode I are sometimes apparent in a marked discrepancy between the person's verbal communication and his accompanying affect, eg. a person recalling a sad event in his life in a giddy or excited tone of voice.

C. Interaction

Interaction in Mode I often contains role elements of a "defendant", "prosecuting attorney", or "judge". Anxiety and tension is usually apparent in disclosing behavior with the speaker frequently attempting to justify his inner experience in some way. Speaker attempts to control the interaction, passively or actively, are also common at Mode I. When an alliance exists between the parties self-disclosures typically are discussed as non-self material.

Examples:

- Cl: Then I said I was hurt, and asked him to take me home, and he did without saying a word.
(SDE-I-PO)
- Cl: Well, anyone is a little frustrated, I mean, not really angry, but yea, isn't that normal? (SDE-I-Self)
- Cl: How do I feel? I don't know, it's hard to say. I think my parents wouldn't understand. I don't know.
(SDE-I-Fam)
- Cl: I got a B on my math test, so I guess I can relax a bit now. (SDE-I-NHO)

2. Mode II (Objective Self-Disclosure)

In Mode II the person rather openly discloses aspects of his self-experience in a descriptive fashion. However, he characteristically does so in a detached manner. Nevertheless, client disclosures at Mode II suggest reflective and/or introspective attitudes that are not typical of Mode I. Moreover, client motivation in disclosing is less ambiguous.

- a) Content. The content of Mode II is clearly personal and differentiated, although descriptions of self-experiences are typically cast in the past tense. Discussions of personal history, dynamics, life style, etc. are common here. Self-disclosures are typically problem centered with an attempt to analyze or clarify the experience further.
- b) Self-Awareness. Intellectualization and rationalization are less intense when they appear in Mode II. "Distancing" or "objectification" are more common defensive operations. The speaker seeks to look at his self-experience as if it were not a part of him, as if it were an object. Rather than justifying or qualifying his experience, however, the client appears motivated to examine and understand the nature of his self-experiences.

- c) Interaction. The alliance is more complete so that the interaction often involves the two parties together looking at the speaker as an object. The speaker discloses, and joins the other in scrutinizing and elaborating and expanding the self-material in order to achieve greater clarity or differentiation.

Examples:

- Cl: I was also jealous of my brother; he was their favorite. (SDE-II-Fam)
- Cl: I try to do more than I can and just get overly involved. (SDE-II-Self)
- Cl: With gals I'm ok, I mean I usually come on as the life of the party, the "cool cat". (SDE-II-PO)
- Cl: My mother and father fought alot, and I remember trying to get 'em to make peace. Somehow that seemed to be my role in the family. I guess 'cause I was always afraid they'd get a divorce or something. (SDE-II-Fam)

3. Mode III (Experiential Self-Disclosure)

In Mode III the speaker's self-disclosures typically convey his present inner experiences in a tentative, grappling, searching manner as he attempts to openly communicate his subjective experiences with the other.

- a) Content. The content of Mode III typically involves disclosure of the mental self. The exploration and disclosure of personal reactions, feelings, and values are characteristic of Mode III, though self-material is often conflictual in nature. Moreover, the client may qualify his comments or make other remarks which suggest some awareness that he has construed his experience in a personal, if not unique, manner. Finally, the content of Mode III often concerns a recognition of new subjective experiences or experiences previously denied access into the Self.
- b) Self-Awareness. Mode III speakers have shed the defensive operations of Modes I and II and are more identified with their own self-experiences. Thus, speakers may feel they are not just describing or talking about themselves, but exposing their private Self. Hesitation, a sense of vulnerability, and increased anxiety are often apparent. Nevertheless, such subjective discomfort is tolerated and accepted as one aspect of their present self-experience.



- c) Interaction. The interaction at Mode III can be described as person-to-person communication marked by an open sharing of private thoughts and feelings. Then too, this process is often accompanied by sense of amazement.

Examples:

- Cl: I feel as though others might hurt me somehow if I really just said what I felt.
(SDE-III-Self)
- Cl: I guess I want to be babied; yea, that's it, sort of just let someone take care of me for a change. (SDE-III-Self)
- Cl: I've been kind of depressed lately, sort of weepy and stuff, ever since last weekend when they forgot my birthday. (SDE-III-Fam)
- Cl: I'm just all confused lately, scared I guess to make a decision. Sort of like I feel trapped. I don't want to stop seeing him and yet I don't want to get so serious either.
(SDE-III-PO)

4. Mode IV (Integrated Self-Disclosure)

Mode IV self-disclosures typically convey a clear awareness and acceptance of the Self as a dynamic structure, open to change.

- a) Content. Mode IV disclosures are characterized by a greater recognition by the speaker that he construes his experiences. Often this awareness is apparent as current perceptions are counterposed with earlier ways of viewing things. Moreover, while there is a commitment to and identification with one's immediate experience, there is implicit recognition of the likelihood of change as further experiences are integrated into the Self. Then too, the speakers disclosures do not suggest marked incongruities or splits within the Self, but rather an acceptance of ambiguity and uncertainty and the full range of experiences and emotions that characterize human nature.
- b) Self-Awareness. Speakers on Mode IV appear confident and are less involved with conflictual self-experiences. They appear free to disclose themselves as they are without hesitation. Thus, their disclosing behavior frequently comes as a straightforward personal reporting of their inner experiences and appears motivated by a desire to be known.

- c) Interaction. The interaction is typically less formal than what is found on Mode III; and the affective tone is lighter. While speakers share self-experiences readily, there is less urgency or inner press to do so.

Examples:

Cl: I had a really neat time with my parents this weekend. I don't know really what was different, but somehow I could see them more as people, you know, not just as my parents. It was like I could really be myself, not just their daughter. (SDE-IV-Fam)

Cl: I have the feeling I'm going to be able to do more things that I know I should do. In fact, I'm excited about working out some new ways of coping with the things that used to get me down. It's sorta like setting out on an adventure, not sure just what lies ahead, but knowing you can manage. (SDE-IV-Self)

Cl: I just feel good, I mean like free, free from that sense that somehow I never measured up to what my parents wanted. Somehow it just doesn't matter so much anymore. (SDE-IV-Fam)

III. Further Examples:

The following samples serve to illustrate the present coding system as employed with short samples of interview material. Such samples can be coded as a unit in a manner that is most representative of the disclosing behavior evidenced. Where evidence of more than one mode of disclosure is contained in such samples, the coder may wish to give intermediate ratings. However, when the object of the speaker's self-experience changes multiple coding is recommended.

Cl: What do you want me to talk about today?

Th: Whatever is on your mind.

Cl: Well, nothing much has happened since last time. (ASD)

Cl: My roommate had a terrible time last week.

Th: Oh?

Cl: Yea, she has been going with this guy for about four months now and suddenly he decided to break up with her.

Th: That can be quite upsetting.

Cl: She was so broken up she couldn't study or anything, and everything I said to her seemed to only irritate her more.

Th: So the two of you had some trouble getting along too?

Cl: Not really, anyway, this weekend I guess she's planning on going home. (ASD)

Cl: I come from a small town you know, the kind of place where everyone knows everyone else's business.

Th: You mean it's hard to have much privacy there?

Cl: Well, my father likes it there since he's lived there all his life, but my mother is from Chicago and would like to move to some place that has more cultural activities and stuff. She also hates the one department store where everyone has to shop. (ASD)

Cl: I came here because this was the closest school, more than anything else.

Th: If you had it to do over again, now?

Cl: Oh, I like it here and all, I mean I like the people here, and the atmosphere, the location, and things like that.

Th: Uh huh.

Cl: I think most of the people are friendly, and I seem to get along with them. I certainly don't seem to have any real problem with anyone. There's really no reason for anyone not to like it here. (SDE-1-NHO)

Cl: I find I can read through things, and then can't remember what I've read. I seem to be getting dull or something. I have a low comprehension.

Th: What do you think about all this?

Cl: Well, I never thought there was anything really wrong with me until I read through this. Now, I don't know.

Th: Then somehow the description in the text....

Cl: Yes, I brought the text with me. Would you like to read it? (SDE-1-Self)

Th: So in some ways, to be angry is bad?

Cl: Umm, you mean, just for a generalization?

Th: In a general way. I think in relation to your folks, let me put it that way.

Cl: (sigh) That's a tough question. I don't know. I think there may be some truth to that.

Th: I'm just saying that it makes you feel bad when you do get mad at your folks.

Cl: Yea, that's why when I go home, I like to go home, but after two weeks, you know what I mean. (SDE-I-Fam)

Cl: I usually come on as the "life of the party", the "cool cat" you know. I've never had much trouble getting along or making friends. Yet, none of my friendships are really deep, you know what I mean.

Th: Yea, I think so, like something was missing?

Cl: Yea, like everyone knows me on the outside, but yet they never really know me.

Th: Do you have something to do with that?

Cl: Well, yea, because alot of the time, you see, I'd just be putting on an act, being cool and stuff. I never really let people know how I feel, you know, inside. (SDE-II-PO)

Cl: Yea, but also sort of small, I don't know.
 Th: Is it their acceptance you want?
 Cl: Yea, but acceptance for what I am now. I mean in another year I'll be graduated and probably earning more money than my dad makes.
 Th: Does that bother you?
 Cl: I don't know, it's just that, well like all my life I guess I've tried to prove to them what I can do, you know, so they could be proud. I mean they've always encouraged me and all, but still.
 Th: Somehow you feel they've never quite accepted you the way you are. (SDE-II-Fam)

Cl: I've always been sort of a loner, although I like to have other people around.
 Th: Uh huh.
 Cl: I can remember feeling somehow I was different from others. I think alot of it comes from the way I was raised, you know, my parents were very religious and I can remember wondering why other parents would let their kids drink and stuff, you know. I would never have thought of doing anything like that.
 Th: Somehow that made you feel different.
 Cl: Well, yea, because, well I'd never go with any of the other guys, you know. I mean I'd play ball and stuff with 'em, but then they'd go out and well I'd just hang around awhile and then go home. I was always conscious of doing the "right thing", being responsible. (SDE-II-PO)

Cl: I realized the other day I sort of feel nobody really cares about anybody else.
 Th: Oh, tell me about it.
 Cl: I don't know. I was just watching people, you know, like I could see them but they couldn't see me. It seemed like they were all strangers somehow, kinda weird really.
 Th: And you, how did you feel?
 Cl: Sad, and alone, and like I wanted to scream or just shake someone and say, "hey, let me know you, let me be your friend."
 Th: You felt all alone.
 Cl: Yea, sort of spooky like. Like I could scream and still no one would hear me, or notice I was there. (SDE-III-PO)

Cl: I guess I've been scared to let anyone know how I really feel, you know, like they could hurt me or something if I did.
 Th: So you've learned to sit on your feelings, keep them inside, is that it?
 Cl: Well somehow being too emotional was always bad, a sign of weakness. I still sorta feel that way, I guess.
 Th: You weren't supposed to have feeling in your family?
 Cl: Not exactly that, but you know, so you got problems, everyone's got problems. It isn't going to do any good to cry about them.

- Th: Sometimes people feel better after they cry.
- Cl: Every once in a while I get this real lump in my throat, like you do just before you cry, but then I somehow get my mind off of whatever is bothering me. (SDE-III-Self)
- Cl: Well, we've been going together for almost a year now, and I don't want him to think I'm cold or not interested in sex, cause it's just that I am not sure I'm ready to get that serious.
- Th: Has he suggested having sex?
- Cl: Well, yes and no. He hasn't come right out and asked me to go to bed with him, but...
- Th: You feel he would like to, but you're not sure how you feel, is that it?
- Cl: Yea, part of me really wants to just give in to him, and get married or something, but part of me says no.
- Th: Uh huh. You sort of don't know which way to go, or how you really feel.
- Cl: Yea, I went home last weekend and you know, I think it's kinda strange but somehow my mom and dad were different. I mean somehow they seemed different to me.
- Th: In what way?
- Cl: I don't know. It's kinda hard to explain, but in a way they seemed easier to get along with.
- Th: You mean they were more accepting?
- Cl: Well, they still sort of babied me and all, but somehow it didn't bother me, like it used to, you know.
- Th: Perhaps you're seeing them differently, kinda like you can a-cept them better the way they are.
- Cl: Yea, like I can see them as real people rather than just parents, and it was sorta like we were friends, you know. (SDE-IV-Fam)
- Cl: I feel like I sorta lost something, like a crutch maybe.
- Th: Uh huh.
- Cl: I'm glad I don't have it anymore, but still it's like a new experience for me.
- Th: You don't have to limp around, yet you're not sure you can run, is that it?
- Cl: Yea, sort of. I mean I know now where I want to go and stuff, where before everything seemed confused, but I see it's up to me, where before...
- Th: Before there was always someone to blame, or your past.
- Cl: Yea, now I see how what you are, or become, sorta depends on you, it's up to you.

IV. Coding of the Interviewer Statements:

The present coding system also can be used for the coding of interviewer statements in a manner that parallels the coding of interviewee statements. When used for this purpose, however, each interviewer statement, as bounded by preceding and succeeding speeches by the interviewee, is considered the scoring unit.

Interviewer comments such as "uh huh" and "I see" are ignored in scoring interviewer statements, however, unless they are strongly stated and convey more than a listening or receptive attitude.

Examples:

- Cl: I've always been a little shy at parties with
alot of people.
- Th: Uh huh, I know how that feels, I'm like that too.
(SDE-II-Self)
- Cl: I can remember crying myself to sleep almost every
night wondering if my folks would make it home.
(SDE-II-Fam)
- Th: I gotta feeling you may still need to cry. (ASD)*
- Cl: My parents will be so upset about my grades, I don't
even want to go home. (SDE-I-Fam)
- Th: I can remember just how upsetting grades can be.
My father was a teacher on top of it. (SDE-I-NHO)
- Cl: I just felt crushed when she said that. (SDE-II-PO)
- Th: Really let down, huh, cut down? (ASD)
- Cl: All my life I've done what they wanted, never really
paying any attention to my own feelings. (SDE-II-Fam)
- Th: Well, you're beginning to see how that ties you up.
You're ahead of me in that respect. I was almost
thirty when one day I decided I had to be me and
follow my feelings. (SDE-II-Self)

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*Note: Interviewer words "I feel", "it seems to me", etc.
do not necessarily reflect self-disclosure. Such words
reflect professional opinions and/or a style of phrasing
interventions more than a disclosure of interviewer's
personal self-experiences.

Appendix B

A Breakdown by Client-Therapist Groups of the Investigator's Coding

Client Groups	Self-Disclosure Ratings										Totals		Pole System				Totals	
	0	-1	1	1±	-2	2	2±	-3	3	Samples Scored	NHO	PO	CO	Self	Samples Scored			
Hi Es Male Clients																		
With Male Therapist (N-5)	38	4	58	12	10	41	2	1	6	172	24	21	22	51	118			
With Female Therapist (N-2)	10	2	22	3	3	3				43	1	7	3	15	26			
Hi Es Female Clients																		
With Male Therapist (N-5)	36	2	42	3	14	29	12	2	11	151	7	18	22	39	86			
With Female Therapist (N-2)	23	2	25	5	5	7		1	1	69	2	14	9	3	28			
Lo Es Male Clients																		
With Male Therapist (N-6)	59	9	55	19	12	25	2	7	1	189	10	22	26	55	113			
With Female Therapist (N-1)	6	1	4	1	1	2				15		1	3	5	9			
Lo Es Female Clients																		
With Male Therapist (N-4)	54	6	52	2	12	23	1	1	4	155	4	14	20	40	78			
With Female Therapist (N-3)	37	6	28	3	5	18	2	1	1	101	8	15	8	20	51			
Totals for 28 Clients	263	32	286	48	62	148	19	13	24	895	56	112	113	228	509			
Percent of Total	29.4	3.6	32.0	5.4	6.9	16.5	2.1	1.4	2.7	100%	11.8	21.2	22.0	45.0	100%			



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