

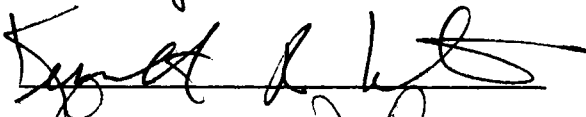
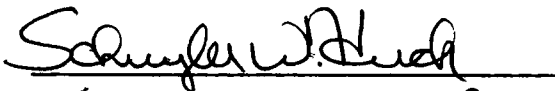
To the Graduate Council:

I am submitting herewith a dissertation written by John Barry Averitt entitled "Individual Versus Group Supervision of Counselor Trainees." I have examined the final copy of this dissertation for form and content and recommend that it be accepted in partial fulfillment of the requirements for the degree of Doctor of Philosophy, with a major in Education.



Charles L. Thompson, Major Professor

We have read this dissertation
and recommend its acceptance:



Accepted for the Council:



Vice Provost
and Dean of The Graduate School

INDIVIDUAL VERSUS GROUP SUPERVISION
OF COUNSELOR TRAINEES

A Dissertation
Presented for the
Doctor of Philosophy
Degree
The University of Tennessee, Knoxville

John B. Averitt

December 1988

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DEDICATION

I dedicate this project to my mother, Mary Averitt
Conners. I remain forever grateful for her constant
encouragement to continue toward academic achievement.

ACKNOWLEDGMENTS

In the course of this project, a number of persons have generously assisted me. I am particularly indebted to Professor Charles L. Thompson, who served as my project director. Dr. Thompson was helpful at all stages of my graduate studies at the University of Tennessee. Most importantly, he offered me a strong supervisory relationship which served both to facilitate my thinking and to provide me with academic support throughout the endeavor. I am also indebted to Professors Schuyler W. Huck, Lawrence M. DeRidder, and Kenneth R. Newton, who served on my doctoral committee. They were consistently reflective and stimulating in their support.

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Finally, I am grateful to my wife, Joy, and our two sons, Jeremy and Justin. I express my gratitude for their support and patience through my years of graduate study.

ABSTRACT

The present study consisted of an investigation of the effectiveness of individual versus group supervision of counselor trainees. Two measures of the development of a specific counseling skill (i.e., empathic responding) on the part of the counselor trainees were employed. Two additional measures addressed the feelings of the participants toward the overall process of supervision and their attitude toward their personal supervisor. The Carkhuff model of responding emphatically was selected for the study because it was easily taught and could be objectively measured. First, the persons who participated in both individual and group supervision were administered a paper and pencil pretest over the basic counseling skill of empathic responding as defined by the Carkhuff model. Following treatment all participants completed a parallel form posttest. Second, the two groups of participants presented a pretest audio-tape recording of their counseling skills. Following treatment all participants submitted a posttest audio-tape which demonstrated their counseling skills at the end of the study. The written tests and tapes were rated by a group of trained raters. Third, the two groups of participants completed a posttest semantic differential scale which reported perceptions of their overall supervisory experience. Fourth, a second semantic

differential scale was completed which reported each of the participants' perceptions of the relationship with their individual or group supervisor.

Twenty-eight persons served as counselors, 56 persons served as clients, and 4 persons served as supervisors. Analysis of covariance procedures on the written and tape tests each failed to reject the hypothesis that individual and group supervision of counselor trainees were equally effective in teaching empathic responding as defined by the Carkhuff model. Two independent samples t tests on the semantic differential measures also failed to reject the hypothesis that the individual and group participants were equally satisfied with both their overall supervision experience and their supervisor. Inter- and intra-rater reliability was high.

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CHAPTER I

INTRODUCTION

Perspective on the Problem

The training of counselors has traditionally included supervision by counselor educators as a major component. Supervision practicum is mandated by the American Psychological Association (1952) and the Association for Counselor Education and Supervision (1978) for all doctoral-level counselor trainees.

Definitions of supervision generally follow the design by Loganbill, Hardey, and Delworth: "an intensive, interpersonally focused, one-to-one relationship in which one person is designated to facilitate the development of therapeutic competence in the other person" (1982, p. 4). This and most other definitions of practicum supervision focus on the individual supervisor-supervisee, or the "master-apprentice," as the prevalent model while "auxiliary methods" may include co-supervision and group supervision (Loganbill et al., 1982, p. 6). Blocher (1983), Patterson (1983), and Wessler and Ellis (1983) noted that group supervision of counselors may serve as one alternative to the individual training model while maintaining the one-to-one process as central.

Although rarely used or tested, group supervision of counselors is reported as early as Carl Rogers' post World War II focus on counseling with returning soldiers. On the last page of their book, Rogers and Wallen (1946) concluded with: "Where skilled supervisory criticism is unobtainable, definite profit may be gained by a group of counselors studying together and analyzing and criticizing each others [sic] interviews" (p. 149). Rogers (1970) later reported on the inclusion of the formal group supervision of personal counselors for the Veterans Administration in 1946 and 1947 at the University of Chicago. He noted that this inclusion "was an attempt to tie together experiential and cognitive learning in a process which had therapeutic value for the individual" and that the groups were "so successful in a sequence of groups of personal counselors that our staff continued to use the procedure in summer workshops thereafter" (p. 4).

Both individual and group supervision are dynamic methods of personal interaction with the common element of human feedback as a learning tool. The key value in the addition of the group to counseling supervision is the expanded power of feedback via multi-interpersonal interaction. Shaw (1981) reported that significant strengths come from group interaction in fortifying the individual's ability to make improved judgments, developing improved problem solving skills, and increasing cognitive

learning. He also noted that special group techniques may increase other desirable factors such as growth in individual motivation when a group member believes that he or she may be evaluated by the group. The inclusion of a group in the present study was intended simply to introduce the application without the development of specific group techniques.

Problem Statement

Holloway and Johnson (1985); Borders and Leddick (1987, 1988); and McCarthy, DeBell, Kanuha, and McLeod (1988) reported that group supervision is common in present training settings, and that research is required on group supervision in order to understand its effectiveness as a tool in the training of counselors. However, no direct research on the effectiveness of group supervision has been done. Therefore, the present study was directed toward filling this research void.

Research Question

The principal hypothesis of the present research was that group and individual supervision are equally effective in the teaching of the specific counseling skill of empathic responding. Group supervision was defined in the present

study as the didactic and experiential training of a group of counseling trainees in a practicum setting who were learning individual counseling skills much as though they were in individual supervision. The major conceptual question for this research was: Is group supervision of counselor trainees as effective as individual supervision?

CHAPTER II

REVIEW OF THE LITERATURE

Research on Group Supervision

Reviews of research on supervision by Hansen and Warner (1971); Kadushin (1976); Hansen, Pound, and Petro (1976); Kaslow (1977); Matarazzo (1978); Daggett, Cassie, and Collins (1979); Ford (1979); Everett (1980); Leddick and Bernard (1980); Hansen, Robins, and Grimes (1982); and Russell, Crimmings, and Lent (1984) reported only one study on the effectiveness of group supervision in comparison with individual supervision.

Lanning (1971) compared the difference between individual and group supervision as each related to three relationship measures: "trainee perceptions of the supervisory relationship, trainee expectations of their own counseling relationships, and client perceptions of the trainee's counseling relationships" (p. 401). The author concluded that little evidence existed that the two methods of supervision differed statistically. The study incorporated 29 counselor trainees, 3 supervisors, and 58 clients. Lanning did not directly analyze a specific counseling skill but utilized a circuitous measure of the effectiveness of the two supervision approaches.

Borders and Leddick (1988) reported, from a nationwide survey of supervision training programs, that institutions were utilizing group supervision. They noted that out of a sample of 47 programs offering supervision courses, 18 included group supervision, two used only individual supervision, and four institutions used both individual and group supervision on a weekly basis.

Holloway and Johnston (1985) reported little experimental research on the effectiveness of group supervision of counselor trainees and stated that "it is imperative that authors and researchers of supervision begin a systematic examination of the group supervision process" (p. 383). Borders and Leddick (1987, 1988) agreed with the above conclusion, reported the extensive usage of the group supervision format, and encouraged the exploration of the unique aspects of group supervision. Furthermore, McCarthy, DeBell, Kanuha, and McLeod (1988) suggested research to examine "the comparative effectiveness of individual versus group supervision" (p 26).

Benefits from Individual Supervision of Counselors

The benefits of individual supervision for the counselor trainee have been noted by Carkhuff and Berenson (1967), Ekstein and Wallerstein (1972), and Hart (1982). The authors affirmed that individual supervision was

consistently better than control. The key value from the one-to-one relationship of supervision appeared to be the intense and individual interaction of the supervisor and trainee.

Early practicum supervision utilized didactic and experiential techniques to assist the trainee in the integration of academic and practical experience (Truax, Carkhuff, & Douds, 1964). Danish (1971) reported the emergence of the above as the basic teaching methods for the education of counselors. He defined the didactic process as teaching through the implementation of such techniques as observation and role play. He described the experiential procedure as a focus on the trainee's awareness of self which enabled the trainee to work more effectively with a client. Furthermore, individual supervision allowed the supervisor to personalize the program for a specific trainee's needs.

Borders and Leddick (1988) affirmed the conclusion by Danish about the emergence of these two methods in current practice. They noted that, out of 47 programs that offered counseling supervision courses, 30 included both didactic and experiential components, with four of those offering didactic techniques only.

Benefits of the Group Experience in Supervision

Glenwick and Stevens (1980) reported that group supervision offered distinctive process opportunities such as peer review and feedback. Shaw (1981) reported that the interaction of persons in a group setting was a powerful learning tool. He noted that group judgment was often better than individual judgment, and that groups produced an increased number, and improved quality, of problem-solving solutions over that of individual problem-solving solutions. He also stated that persons in a group setting learned faster than individuals alone and that group members tended to be more motivated about the group task. Finally, Shaw noted that two potential disadvantages persisted in group interaction: First, groups usually required more time to complete a task than did individuals; and second, group discussion often resulted in "group polarization effects" (p.79) (i.e., groups may make more risky or more cautious decisions than individuals).

Research on Empathy

Early definitions of empathy focused on conceptual content. One such example is "the ability to apprehend another person's feelings and psychologically assume another person's role without enacting that role" (English &

English, 1958, p. 178). Rogers (1975) discussed the "way of being with another person" and "entering the perceptual world of the other and becoming thoroughly at home in it" in his definition (p. 4).

Current attempts to define empathy operationally have fallen into two basic divisions--client centered and counselor centered. First, Barrett-Lennard (1962, 1978, 1981) included the client's subjective experience as a key element in defining the empathic process. In the Relationship Inventory by Barrett-Lennard (1962), the author notes:

Qualitatively it [empathic understanding] is an active process of desiring to know the full, present and changing awareness of another person, of reaching out to receive his [sic] communication and meaning, and of translating his [sic] words and signs into experienced meaning that matches at least those aspects of his [sic] awareness that are most important to him [sic] at the moment. (p. 3)

Kagan, Krathwohl, and Farquhar (1967), in the Affective Sensitivity Scale, based their instrument on the definition of empathy as "the ability to detect and describe the immediate affective state of another" (Danish & Kagan, 1971, p. 51).

Hogan's (1969) Empathy Scale measured the empathic personality rather than defining the capacity of a person to distinguish or impart empathy. He suggested that empathic responding is "to take the moral point of view" (p. 307).

The Accurate Empathy Scale (Truax, 1961) moved into the second division by shifting the focus of definition from the client's or the therapist's affective state to the therapist's behavior in the counseling process. Truax devised the scale so that a group of raters could utilize a uniform system to evaluate the level of empathy expressed by the therapist. Carkhuff and Berenson (1967) followed Truax in defining empathy:

The therapist's ability to communicate at high levels of empathic understanding appears to involve the therapist's ability to allow himself [sic] to experience or merge in the experience of the client, reflect upon this experience while suspending his [sic] own judgments, tolerating his [sic] own anxiety, and communicating this understanding to the client. (p. 2)

Truax and Carkhuff (1967) suggested that empathic responding by the counselor may be defined in terms of a behavioral and measurable construct. Carkhuff (1973, 1981) schematized empathy into a model that established distinct levels of plausible counselor responses to client statements.

Thompson and Rudolph (1988) systematized Carkhuff's conclusions into five levels. Level I responses tend to deny the client's thoughts and feelings and consist of counselor responses that do not give attendance to the client's statements. Level II responses simply give advice to the client. Level III responses reflect the client's feelings by active empathy and are the transition from

harmful to helpful responses. Level IV responses personalize the client's statements by reflecting what the client is thinking and feeling about the issue under discussion, as does level III, plus expressing an understanding of what the client wants to be different. Level V responses move beyond those of level IV toward a plan of action that will address the problem. A level V response must follow mutual agreement between the client and counselor that includes an understanding of the client's problem, the feelings behind the problem, and the client's expectations for the counseling process.

Examples of the five levels of counselor responses to a typical client statement using the Carkhuff model are noted below and are adapted from Thompson and Rudolph (1988).

Client: I am really having problems with my parents because they are getting older, and I just don't know how to help them with the changes that are occurring in their lives.

Level I response: I know what you mean, but don't worry, they will get by.

Level II response: You need to read a book I have, and tell them to get out more often.

Level III response: You are feeling helpless about supporting your parents because you just do not know how to assist them in growing older.

Level IV response: You are feeling helpless about supporting your parents because you just do not know how to assist them in growing older, and you want to find a way to do so.

Level V response: You are feeling helpless about supporting your parents because you just do not know how to assist them in growing older, and you want to find a way to do so. Let's examine what you have tried to do to help your parents and explore other options.

The classification of the counselor's responses to a client's statement in one of five levels provides an operational definition of empathy that results in a powerful, objective research tool. The Carkhuff model is not only more concrete than the other scales but measures a very different construct.

Marks and Tolsma (1986) discussed problems in empathy research. They concluded that research difficulties with empathy studies fall into four broad categories: "conceptual context, research context, data gathering, and evaluation" (p. 5). Conceptual context refers to the "researcher's values and assumptions about human functioning which, in turn, provide a rationale for a choice of a therapeutic orientation" (p. 5). Research context means selecting the appropriate research design for the population in question. Data gathering is the mode and form of the subject's response to the research instrumentation and

the sampling procedures. Evaluation refers to the method of evaluation, subjective or objective, and the characteristics of the persons making judgments about the data. The authors concluded by suggesting that researchers restrict the type of instrumentation they use to the correlated definition of empathy.

The results of the present study were based on a congruent definition and measure of an operational definition of the empathic process. The use of the Carkhuff model permitted an objective indication of the progress of counselor trainees in the acquisition of a specific counseling skill. The comparison of individual and group supervision techniques in the current study was based on the change in empathic responding in the subjects as both defined and measured by the modified Carkhuff model.

CHAPTER III

METHODOLOGY

Instrumentation

Modified Carkhuff Model

The specific counseling skill of empathic responding as operationally defined in the modified Carkhuff model was selected for the present study because it provided a counseling skill that was easily taught and objectively measured. The model, based on theory as previously outlined, was used as a tool for measuring change in the counselors and not for providing a comprehensive measure of empathy. The modified Carkhuff model was incorporated in the written pretest and posttest of counseling skills and the evaluation of the pretest and posttest audio-tape recordings.

Reliability of Carkhuff Scale

The reliability of the scale (i.e., how consistently it produced the same scores by the same persons when reexamined with an equivalent test on different occasions) in the present research was established by a measure of the inter- and intra-rater reliability of a pre-rating test of those who served as raters and via the calculation of a

procedural inter-rater reliability of the data used in the study (Tinsley & Weiss, 1975). Two previous pre-rating applications of the scale reported an inter-rater reliability of .80 (Rudolph, 1974) and .84 (Thompson & Averitt, 1988).

Validity of Carkhuff Scale

Three articles of note (Gormally & Hill, 1974; Lambert & DeJulio, 1977; Lambert, DeJulio, & Stein, 1979) critiqued the validity issues of Carkhuff's model. The authors generally agreed that Carkhuff's research failed to provide adequate detail to support his claims of the valid measure of empathic responding by his counselor trainees. The reviewers noted that the problems with Carkhuff's research were (a) varied and unclear treatment and control procedures, (b) poor rating scales, and (c) focus on changes in trainees as opposed to those in clients. No studies were noted that established the validity of the scale as a measure of the general concept of empathic responding.

The issues of how well the Carkhuff model measured the broad concept of empathy or of how client outcome was affected were not addressed in the present research because the focus was on establishing the amount of change of the specific counseling skill of empathic responding as defined and measured by the Carkhuff model. Other issues were

addressed in the present study as suggested by the above authors and others as follows:

1. complete counseling sessions were evaluated by the raters instead of excerpts to reduce the variability of conditions and other variables both within and across sessions (Lambert et al., 1979; Hill, 1982);

2. sessions were spread across time so that first interviews were limited to about forty percent of the total number of sessions (Hill, 1982);

3. the unit of measure for the raters was established as the complete response of the counselor trainee as opposed to key words or phrases (Hill, 1982);

4. complete transcripts of the sessions were made to increase the rater's objective evaluation of the counselor trainee's statements as opposed to the potential problem of inaccurate perception with audio-tape recordings (Hill, 1982);

5. female raters were selected for the present study because of the large number of female participants in the study and as a result of research that suggests that greater accuracy in the evaluation of empathic responding results from same-sex raters (Lambert et al., 1979);

6. both inter- and intra-rater reliability figures were calculated over time to assure that raters remained consistent during the rating process (Hill, 1982);

7. the scale selected for the study was previously

used by the author and specifically defined in both the training of the raters and in the application of the experimental design (cf. Thompson & Averitt, 1988; and Thompson & Rudolph, 1988). Furthermore, the scale was applied in both written trainee responses and in actual counseling performance via audio-tape recordings (Gormally et al., 1974; Lambert et al., 1979, Hill, 1982).

Counseling Skills Pretest

The Counseling Skills Pretest was a ten-item instrument (cf. Appendix A). The items ranged in length of from 12 to 49 words and were selected by the author as being typical of adult-level client statements in counseling. The statements included both positive and negative client feelings.

Each counselor was requested, in a non-timed test, to compose a brief empathic response to each of the client's statements. The pretest was evaluated by each of the raters with each individual item receiving a score of a Level I, Level II, Level III, Level IV, or a Level V response based on the modified Carkhuff model. After rating, the total score for each test was divided by the number of items on the scale, ten, and a mean value was presented which could range from 1.0 to 5.0.

Counseling Skills Posttest

Treatment was followed by a ten-item parallel-form posttest. The posttest, with items ranging in length from 11 to 61 words, also measured how well the counselor was able to formulate an appropriate empathic response to a typical client statement using the modified Carkhuff model (cf. Appendix B). The posttest was evaluated by the same procedure as the pretest.

Counseling Skills Audio-Tape Recordings

Before treatment was initiated, each counselor submitted one thirty-minute audio-tape recording of a session with his or her selected client. During treatment, three additional audio-tape recordings were completed and submitted by the counselor, one per week, and each following a supervisory session over the previous tape. The four recordings of the counselor's sessions were each supervised by either an individual supervisor (Experimental Group A) or a group supervisor (Experimental Group B).

Following the treatment, which included the four supervisory periods of either individual or group supervision and the standard class lectures, readings, and examinations on basic counseling skills, a fifth audio-tape recording was completed by each counselor with a client. The final audio-tape recording served as a posttest measure. The pretest and posttest audio-tape recordings were

transcribed on standard-size paper. Client statements and counselor questions, which were not included in the study, were not transcribed. Only the counselor's comments were included for evaluation. Each pretest and posttest tape was typed starting on a new sheet of paper so that it could be evaluated independently by the raters. Again, after rating, the mean value of the counselor's responses was reported for each counseling session and ranged from 1.0 to 5.0.

Semantic Differential Scale

Osgood, Suci, and Tannenbaum (1957) developed the Semantic Differential Scale to measure the meanings of discrete objects or concepts to various people by "having them judge them against a series of descriptive scales" (p. 83). The chief hypothesis of the scale was that some specific elements of meaning could be calculated by rating objects or ideas with respect to bipolar adjectives. The authors reported the emergence of three major factors: (a) "evaluative," which referred to social judgments; (b) "action," which referred to physical sharpness or abruptness; and (c) "potency," which referred to toughness. The authors concluded that the evaluative factor held a leading place in meaningful judgments and accounted for the largest percentage of the total variance.

The items selected for the present study (cf. Appendix C) included nine items, seven of which came from the three

major categories as identified via factor analysis in Osgood, et al. (1957):

1. "good-bad," "valuable-worthless," and "pleasant-unpleasant" were identified as "evaluative" in nature and demonstrated pure factor loadings of .75 or above;
2. "hot-cold," and "active-passive" were identified as "action" variables and were indicated by factor loadings of .46 or higher;
3. "happy-sad," and "weak-strong" were identified as "potency" variables but reflected considerable evaluative meaning. (pp. 36-39)

Osgood, et al., (1957) reported high reliability and validity figures for the scale. In the present application, two sets of nine variables were presented to the participants on the same page using a seven-point Likert-type scale for each set of bipolar adjectives. The first scale requested feelings about the overall supervision experience and the second requested feelings about the participant's personal supervisor. The "high low" direction of the variables were staggered to avoid response sets. The total of the scores for each of the two scales, which could range from seven to sixty-three points, was divided by the number of items on each scale, nine, and produced a total mean score of from 1.00 to 7.00 for each of the two scales.

Participants

The participants in the present study were 25 female and 3 male graduate students enrolled in Educational Psychology 5890, Counseling Theories and Techniques, in The Department of Educational and Counseling Psychology at The University of Tennessee, Knoxville. The study was conducted during the spring and summer quarters of 1988. The graduate-level education experience of the participants ranged from a minimum of 3 quarter hours to a maximum of 27 quarter hours, including the present course, with a mean number of graduate quarter hours of 6.7. The counseling theories and techniques course was the first counseling theory course for all participants. Three participants in the summer quarter had completed one course in counseling pre-practicum. The participants were not informed about the nature of the study so to avoid the potential of bias to influence the outcome of the research.

The participants ranged from 20 to 50 years of age with a mean age of 31 years. The group of participants was assumed to be representative of students enrolled in the counselor training program at The University of Tennessee and at other similar institutions.

Beginning counseling students were selected for the study because (a) they were accessible to the researcher, (b) they were at a point in their education during which

they were developing the very counseling skill used in the study, and (c) they were assumed to be typical of the general population of counselor trainees. The study was conducted over two successive academic quarters to assure adequate sample sizes for inferential statistics.

Randomization of Participants

All students in the Counseling Techniques 5890 class for the spring and summer quarters of 1988 were asked to volunteer for the study. Eleven persons in the spring class volunteered and were randomly and alternately assigned, using a random number table, to Experimental Group A or Experimental Group B. Seventeen persons volunteered from the summer class and were similarly assigned to a duplicate of the two groups using a randomized block design.

Clients

Each of the counselor participants selected one or more volunteers to serve as clients for their counseling interviews. A total of 56 persons volunteered as clients. The clients presented personal growth and adjustment problems for counseling and were generally classified as normal as opposed to abnormal persons.

Rater Selection, Training, and Utilization

Three female graduate students from the Department of

Educational Psychology at Tennessee Technological University in Cookeville, Tennessee, volunteered to serve as raters for the present study. The raters were not known by any of the participants in the study. The training of the raters was conducted using a "Rater's Training Packet" (cf. Appendix D). The instruction of the raters included:

1. the definition of empathy via the Carkhuff model;
2. instruction concerning the use of the "Counselor Responses Rating Chart" (cf. Appendix D) for coding counselor responses in one of the five levels of empathic responding;
3. group practice of the rating process during which typical counselor responses were read orally and the correct responses, and the proper coding of those responses, were discussed;
4. the individual administration of a paper and pencil post-training test of typical counselor responses which was used for the computation of the pre-rating, inter- and intra-rater reliability figures.

All together, 280 written pretest responses, 28 pretest audio-tape recordings, 280 written posttest responses, 28 posttest audio-tape recordings, and 16 supervisory sessions were rated by the three trained raters using the modified Carkhuff model and other criteria as noted in the "Rater's Training Packet." Questions by the counselors in the

audio-tape recordings were eliminated from the rating procedures. Counselor trainees were instructed to limit the number of first interviews used in the study to two out of the five sessions submitted for evaluation.

Transcripts of the individual pretest and posttest recordings and written tests were presented to each of the raters in random order and were independently evaluated. The ratings of the counselor's audio-tape recordings and the written responses were conducted in two sessions, one following each academic quarter. Before the second rating session, the raters were retrained in a refresher course, and an alternate form of the post-training test was administered.

After the evaluation of all data, two of the audio-tape recordings of each of the supervisor's supervisory sessions with their individual or group supervisees from each quarter were selected at random to be evaluated by the raters. Each rater individually reviewed the selected recordings and, using a pass-fail system, determined if each supervisor had met the criteria for supervision as outlined in the "Supervisor's Training Packet" (cf. Appendix E).

The method of calculating the pre-rating, inter-rater reliability figure for the study was to divide the total number of agreements on the raters' initial post-training test by the sum of the number of agreements and the number of disagreements. A second computation of the inter-rater

reliability was calculated by the same method as noted above following the administration of the second post-training test. The mean of the two computations was reported for the study.

A pretest intra-rater reliability figure was calculated for each rater across the two training periods to measure the consistency of each rater over the duration of the study. The intra-rater reliability was calculated by counting the number of times that each rater agreed with at least one other rater on the rater's post-training test, and by dividing that number by the total number of items on the test. The results were averaged over the two testing periods to calculate the intra-rater reliability for each rater in the study.

The calculation of a procedural inter-rater reliability figure, using a Finn's r , was executed on the actual rating of the written and audio-tape recorded data (Finn, 1970). Tinsley and Weiss (1975) reported that a procedural inter-rater reliability "represents the degree to which the ratings of different judges are proportional when expressed as deviations from their means" (p. 359). Furthermore, the authors noted that the Finn's r calculates the degree to which the variance observed in the data is less than the variance as expected from chance. The result is the ratio of nonchance variance in the ratings and is stipulated as a

proportion between the total variance in the ratings and that which results from nonrandom factors.

Tinsley and Weiss (1975) further declared that most indexes of inter-rater reliability, including the intra-class correlation (i.e., R), are affected by reduced within-judge variance in the ratings and that the Finn's r is not so affected. The author of the present study, as a result of the pretest inter-rater reliability measure, expected low within-judge variance and thus selected the Finn's r as the procedural, inter-rater reliability measure. High reliability figures, expressed as correlation coefficients, were critical in evaluating the generalization of the rated data.

Supervisors

Three doctoral students and one professor in the Department of Educational and Counseling Psychology at The University of Tennessee, Knoxville, volunteered as supervisors for the study. Three of the four supervisors were drawn at random from the group and assigned to individual supervision. Three supervisor participants were assigned to individual supervision so that each supervisor would have no more than two or three counselors per quarter. The fourth supervisor was assigned to the group. The participants were randomly assigned to one of the two experimental conditions, and those in the individual

supervision category were randomly assigned to one of the three supervisors.

Each of the graduate-student supervisors had previously been supervised by the professor for academic credit during at least one quarter. The "Supervisor's Training Packet" (cf. Appendix E) was presented to each supervisor as a statement of supervision activities. Each supervisor was uniformly trained in standard didactic and experiential training techniques. The supervisors were all male and ranged in age of from 34 to 51 years with a mean value of 43.25 years. All supervisory sessions were audio-tape recorded, and a random sample of two supervisory sessions from each supervisor and for each quarter was evaluated by the raters to assure that each supervisor had complied with the directions in the training packet. The supervisors received the minimal amount of information possible about the nature of the study so to limit a bias on their part to influence the outcome of the research.

Procedures

A pretest-posttest control group research design was used on the first two measurements. A posttest-only control group design was used on the last two measurements.

Pretest Measures

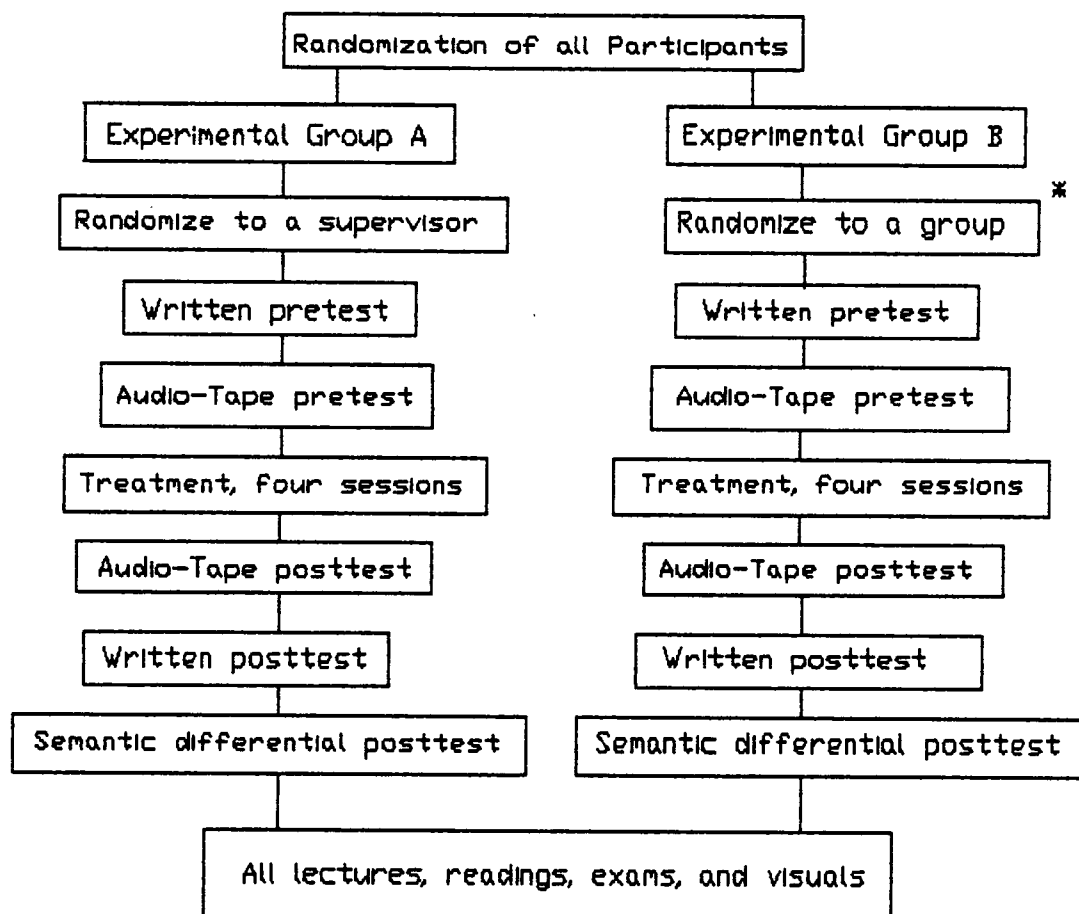
Two pretest measures were applied to the experimental groups. First, each participant in the study completed a short-answer paper and pencil pretest of his or her knowledge of the basic counseling skill of empathic responding. Second, each participant presented a pretest audio-tape recording of a counseling session.

Treatment of Experimental Group A

Following the pretest of all participants, those persons in Experimental Group A participated in four sessions of individual supervision over a five-week period with his or her selected individual supervisor. Each supervision session was proceeded by the submission of an audio-tape recording of the counselor's weekly counseling session with his or her selected client. Those who received individual supervision participated in all normal class lectures, readings, and examinations (cf. Figure 1).

Treatment of Experimental Group B

Those persons in Experimental Group B participated in four supervisory sessions, conducted during the same five week period as those in Experimental Group A, from one uniformly trained supervisor using group supervision. Group size was limited to no more than six persons, so one group was used in the spring quarter and two groups were



*Note: Spring Quarter Required Only One Group.

Figure 1. Summary of Procedures in Individual Versus Group Supervision Study.

used in the summer quarter. Participants in Experimental Group B for the summer quarter were randomly assigned to one of the two group supervision settings. The same group supervisor conducted all three groups. All members of Experimental Group B participated in normal class lectures, readings, and examinations.

The content of the instruction and the instructional methods in the research project were typical of the usual course material. The students were evaluated in the usual manner with no penalty for refusing to participate in, or for withdrawal from, the study.

Posttest Measures

Four posttest measures were applied to the experimental groups. First, each participant took an alternate form, short-answer, paper and pencil posttest of their knowledge of the basic counseling skill of empathic responding. Second, each participant presented an audio-tape recording of a counseling session that was recorded at the conclusion of treatment. Third, each participant completed two self-report, semantic differential posttests on the perceptions of their overall supervision experience and of their personal supervisor (individual or group).

Statistical Treatment of the Data

The statistical treatment of data included the computation of pre-rating, inter- and intra-rater reliability figures of the raters, and a procedural inter-rater reliability figure using a Finn's r . Furthermore, four correlated samples t tests were done to test for the significance of the change, both for written and audio-tape recorded tests, between the pretest and posttest values. The t tests were designed to test if both individual and group supervision demonstrated significant improvement in the counseling skill in question.

In addition to the above, an analysis of covariance (ANCOVA) procedure was conducted on each of the first two principal research measures, and an independent samples t test was conducted on the last two principal measures. On the first two measures, the ANCOVA procedure compared the posttest means (dependent variable) after they were adjusted for any differences between the two groups with respect to pretest means (the covariate or concomitant variable). In addition, the ANCOVA procedure partitioned the total variation of each of the two measures into three divisions as opposed to the two divisions of the ANOVA: (a) the treatment variation, (b) the covariable variation, and (c) the residual variation. A strong correlation between the covariate and the outcome measure would result in both a

reduced error variation and in the improved power of the statistical test (Porter & Raudenbush, 1987). The study addressed the general assumptions of inferential statistics, including the linearity and common slope of the ANCOVA data. The level of significance for the study was .05 alpha.

The four principal tests, two ANCOVA and two semantic differential scales, were each designed to support or reject the null hypothesis (i.e., there are no significant differences between individual and group supervision in the acquisition of the specified counseling skill).

CHAPTER IV

RESULTS

Research Hypothesis and Summary of the Data

The principal hypothesis of the present research was that group and individual supervision are equally effective in the teaching of the specific counseling skill of empathic responding as defined by the Carkhuff model. Data for the study were collected from the written counseling skills pretest and posttest, audio-tape recorded counseling skills pretest and posttest, and two semantic differential self-report posttest scales. For a summary of the research data see Appendix F.

Preliminary Analysis

Rater Reliability

Pre-Treatment Inter-Rater Reliability. The results of the first raters' post-training test over the rating of empathic responding via the Carkhuff scale was .85. The second post-training test reliability score was also .85, resulting in a mean value for the study of .85. This figure was compatible with previous research using the Carkhuff

scale and was a significant percentage reliability measure of the rating system.

Pre-Treatment Intra-Rater Reliability. The intra-rater reliability figures for the study were high. The conclusions were averaged from the two rater's post-training tests with the following results: (a) rater I at .95, (b) rater II at .95, and (c) rater III at .95.

Procedural Inter-Rater Reliability. A procedural inter-rater reliability figure was computed for each of the two pretests and two posttests. The Finn's r , which was unaffected by the low within-judge variance of the present study, demonstrated high results and pointed to significant confidence in the ratings (cf. Table 1).

Rating of Supervisor Sessions

The three raters individually, and in random order, evaluated two randomly selected audio-tape recordings of two supervisory sessions, for each of the four supervisors, during each of the two quarters. The raters were instructed to provide a dichotomous (i.e., yes or no) response to the question, "Did the supervisors, in each and every one of the sample audio-tape recordings that you evaluated, fulfill their commission as stated in the supervisor packet?" The response from all three raters, concerning all four

Table 1

Procedural Inter-Rater Reliability

FINN'S r			
	Number of Cases	Number of Raters	Finn's r
Written Pretest	28	3	.9978
Written Posttest	28	3	.9989
Audio Pretest	28	3	.9955
Audio Posttest	28	3	.9778

supervisors, was that each rater completed the tasks given to them in supervision.

Correlated Samples t Test on Written and Tape Test Scores

Four correlated samples t test procedures were conducted on the scores from pretest to posttest on both individual and group, written and audio-tape recorded counseling skills tests. The purpose of the t test on each measure was to discover if each of the two techniques (i.e., individual and group supervision) on each of the two tests (i.e., written and audio-recorded counseling skills tests) demonstrated significantly improved scores following treatment. The results did not indicate whether one technique was equal to the other in effectiveness, but simply if each demonstrated improvement at the .05 alpha

level. The null hypothesis for each of the four tests was that no change in empathic responding occurred from pretest to posttest. The results were as follows: (a) written individual test with a t of 14.44, (b) written group test with a t of 9.85, (c) audio-tape recorded individual test with a t of 16.29, and (d) audio-tape recorded group test with a t of 10.80. All values were significant at 13 degrees of freedom and .05 alpha. The author concluded that the null hypothesis could not be supported and that the teaching methods (i.e., individual and group supervision) as measured by both the written and audio-tape recorded methods demonstrated significant improvement in teaching the process of empathic responding as defined by the Carkhuff model.

Analysis of Covariance Introductory Issues

The data from the written and audio-tape recorded pretest and posttest were evaluated by SAS, release 5.16 at The University of Tennessee Computing Center, (SAS Institute Inc., 1986).

Prior to the application of the general ANCOVA procedures to the data, an evaluation of two of the unique assumptions of the ANCOVA test (i.e., the linear and equal slopes of the data) was conducted. A calculation of the slope on each set of data from pretest to posttest was computed by a simple linear regression procedure. The written test of individual and group data demonstrated slope

estimates of .65 and .22 respectively. The tape test of individual and group data demonstrated slope estimates of .51 and .23 respectively. The assumption of linearity was satisfied by the review of the scatter diagrams.

Neter and Wasserman (1974) reported that data can be assumed to have slopes that are parallel (i.e., equal) if no interaction is discovered between the dependent, concomitant, and interaction variables of the data using an unequal slopes factorial analysis of covariance procedure. Two factorial ANCOVA procedures, using an unequal slopes model, were conducted to test the assumption of equal slopes on the written and audio-tape recorded counseling skills test data. The posttest scores were the dependent variables and the pretest scores were the concomitant variables. The technique (i.e., individual and group supervision) served as the interaction component. The null hypothesis, for each of the two sets of data, was tested as--the slopes of the data were equal. The two F values for the contrasts of pretest, posttest, and technique were 1.08, $p > .05$ for the written test and 0.74, $p > .05$ for the audio-tape test. The results indicated that the null hypothesis could not be rejected in either case, and that an equal slopes ANCOVA model could be used in two of the principal research calculations in the study (cf. Table 2 & Table 3).

The second battery of tests consisted of four ANOVA procedures which each examined the assumption that the sets

Table 2

Factorial Analysis of Covariance of Written Skills Test
To Test for the Equal Slope of The Data

Source	df	Adjusted		F
		SS	MS	
Model	3	0.93	0.31	2.52
Error	24	2.94	0.12	
Corrected Total	27	3.87		

Contrasts	df	Adjusted		F
		SS		
Technique (A)	1	0.19		1.56
Pretest (B)	1	0.58		4.74*
A * B	1	0.13		1.08

*p < .05

Table 3

Factorial Analysis of Covariance of Tape Skills Test
To Test for the Equal Slope of The Data

Source	df	Adjusted		F
		SS	MS	
Model	3	0.61	0.20	2.22
Error	24	2.21	0.09	
Corrected Total	27	2.82		

Contrasts	df	Adjusted		F
		SS		
Technique (A)	1	0.06		0.60
Pretest (B)	1	0.60		6.57*
A * B	1	0.07		0.74

*p < .05

of data from the spring and summer quarters could be considered to come from the same population and thus combined for use in the ANCOVA analysis of the study. The null hypothesis for the first set of data was tested as--the written pretest scores of Experimental Group A (i.e., individual supervision) from the spring quarter and the written pretest scores of Experimental Group A from the summer quarter came from the same population. The null hypothesis for the second set of data was tested as--the audio-tape recorded pretest scores of Experimental Group A (i.e., individual supervision) from the spring quarter and the audio-tape recorded pretest scores on Experimental Group A from the summer quarter came from the same population.

The null hypothesis for the third set of data was tested as--the written pretest scores of Experimental Group B (i.e., group supervision) from the spring quarter and the written pretest scores of Experimental Group B from the summer quarter came from the same population. The null hypothesis for the fourth set of data was tested as--the audio-tape recorded pretest scores of Experimental Group B (i.e., group supervision) from the spring quarter and the audio-tape recorded pretest scores on Experimental Group B from the summer quarter came from the same population.

The F value for the spring and summer written pretest data from Experimental Group A was 1.07 and was not significant at the .05 alpha level (cf. Table 4). The F

Table 4

Analysis of Variance of Spring Versus Summer Quarter Scores
for Experimental Group A on Written Pretest to Evaluate for
Common Population of the Two Sets of Data

Source	SS	df	MS	F
Treatment	0.08	1	0.08	1.07
Error	0.66	9	0.07	
Total	0.74	10		

value for the spring and summer audio-tape recorded data from Experimental Group A was .01 and was also not significant at the 0.05 alpha level (cf. Table 5). The F value for the spring and summer written pretest data from Experimental Group B was 0.002 and was not significant at the .05 alpha level (cf. Table 6). The F value for the spring and summer audio-tape recorded data from Experimental Group B was 0.004 and was also not significant at the .05 alpha level (cf. Table 7). The results indicated that the null hypothesis could not be rejected in any one of the four tests, that the assumption of common population of the data could not be rejected, and that the four sets of pretest and posttest data could be combined for the ANCOVA analysis.

Table 5

Analysis of Variance of Spring Versus Summer Quarter Scores
for Experimental Group A on Audio-Tape Recorded Pretest to
Evaluate for Common Population of the Two Sets of Data

Source	SS	df	MS	F
Treatment	0.001	1	0.001	0.01
Error	2.62	15	0.17	
Total	2.62	16		

Table 6

Analysis of Variance of Spring Versus Summer Quarter Scores
for Experimental Group B on Written Pretest to Evaluate for
Common Population of the Two Sets of Data

Source	SS	df	MS	F
Treatment	0.001	1	0.001	0.002
Error	0.45	9	0.05	
Total	0.45	10		

Table 7

Analysis of Variance of Spring Versus Summer Quarter Scores
for Experimental Group B on Audio-Tape Recorded Pretest to
Evaluate for Common Population of the Two Sets of Data

Source	SS	df	MS	F
Treatment	0.004	1	0.004	0.01
Error	3.82	15	0.25	
Total	3.82	16		

The pretest data was assumed to be a good predictor of the common population of the scores. The covariate demonstrated a strong relation to the outcome (i.e., R-squared values of .97 on both the written and audio-recorded ANOVA procedures of pretests and posttests).

Test of Research Hypothesis

Analysis of Covariance Results

The principal research hypothesis was first tested via two ANCOVA procedures as applied to two sets of the data collected from the study. First, the posttest scores of the counseling skills written test were adjusted for individual

differences by using the written pretest scores, and the individual and group results were compared using an equal-slopes ANCOVA model. Second, the posttest scores of the counseling skills audio-tape evaluation were adjusted for individual differences by using the audio-recorded pretest scores, and the individual and group results were compared by the same procedure.

The null hypothesis of the first contrast was tested as--the individual and group supervision techniques, as measured by the written posttest scores in the present study, were equally effective in teaching the counseling skill of empathic responding as defined by the modified Carkhuff model. The null hypothesis of the second contrast was tested as--the individual and group supervision techniques, as measured by the audio-tape recorded posttest scores in the present study, were equally effective in teaching the counseling skill of empathic responding as defined by the modified Carkhuff model.

The F value for the written counseling skills test was 2.14 and was not significant at the .05 alpha level, and the finding did not support rejection of the null hypothesis (cf. Table 8). The F value for the audio-tape recorded counseling skills test was 0.002 and was not significant at the .05 alpha level, and the finding did not support rejection of the null hypothesis (cf. Table 9).

Table 8

Analysis of Covariance of Individual Versus Group Scores
on the Written Counseling Skills Test

Source	SS	df	MS	F
Conditions	0.27	1	0.27	2.14
Error	3.09	25	0.12	
Total	3.36	26		

Table 9

Analysis of Covariance of Individual Versus Group Scores
on the Audio-Tape Recorded Counseling Skills Test

Source	SS	df	MS	F
Conditions	0.0002	1	0.0002	0.002
Error	2.34	25	0.09	
Total	2.34	26		

Semantic Differential Scale Results

The third attempt to address the principal hypothesis of the study was by the first of two self-report semantic differential scales. The principal research hypothesis of the first scale was evaluated via an independent samples t test with the following hypothesis--the participants in both individual and group supervision settings were equally satisfied with their overall supervision experience. The result of the t test with 26 degrees of freedom was 1.88, $p > .05$ (cf. Table 10).

The second application of the semantic differential scale was on the fourth test of the principal research hypothesis. An independent samples t test was applied to the second scale with the following hypothesis--the participants in both the individual and group supervision settings were equally satisfied with their supervisor. The result of the second t test with 26 degrees of freedom was 0.79, $p > .05$ (cf. Table 11).

Table 10

Semantic Differential Analysis of Participant's Self Report
of Overall Satisfaction of the Supervision Experience^a

INDIVIDUAL MEAN	SD	GROUP MEAN	SD	t TEST
6.35	0.59	5.83	0.84	1.88

^aSeven point scale (1 = poor, 7 = good)

Table 11

Semantic Differential Analysis of Participant's Self Report
of Satisfaction With Personal Supervisor^a

INDIVIDUAL MEAN	SD	GROUP MEAN	SD	t TEST
6.40	0.64	6.19	0.75	0.79

^aSeven point scale (1 = poor, 7 = good)

CHAPTER V

DISCUSSION

Introduction

The principal hypothesis of the present research was that group and individual supervision are equally effective in the teaching of the specific counseling skill of empathic responding as defined by the Carkhuff model. Four measures tested the hypothesis: (a) a written counseling skills test, (b) an audio-tape recorded counseling skills test, (c) a semantic differential scale that reported the counselor's attitude toward his or her overall counseling supervision experience, and (d) a semantic differential scale that reported the counselor's attitude toward his or her specific supervisor (individual or group setting). The conclusions of the tests were supported by high inter- and intra-rater reliability, common population of the two quarters of data, and by attention to the assumptions of the ANCOVA test.

Before the principal hypothesis was tested, four correlated samples t tests indicated that participants in both Experimental Group A (individual supervision) and Experimental Group B (group supervision) on both the written and audio-tape recorded counseling skills tests demonstrated

significant improvement in the counseling skill of empathic responding as defined by the Carkhuff model.

Accepting the Null Hypothesis

In the conceptual stage of the present research, the author postulated that no statistical differences would be discovered between the means of the two samples on the principal tests of the study, and that the associated null hypotheses of the study would not be rejected. A study that yields no statistical differences between the means of the two experimental groups must address the issue of moving from failure to reject the null hypothesis to making a definitive conclusion about interpreting the results.

Cook and Campbell (1979) suggested two reasons why the null hypothesis cannot be logically proven as true. First, they noted that the possibility always exists that a statistical analysis may fail to detect a true difference between the means of the two samples in question (i.e. a Type II Error). Second, they noted that one cannot rule out the possibility of discovering a significant result if a more powerful statistical test is used, or if the analysis used in the study had "extraneous sources of respondent or setting variance which correlate with the dependent variable" (p. 44). The issue then becomes, according to Cook and Campbell (1979), what standards should be

considered to estimate the confidence that the null hypothesis can be considered true?

In the present study the author selected several procedures to strengthen the assertion of the null hypothesis as correct. First, an analysis of covariance (ANCOVA) procedure was used on the comparison of two of the chief tests of the hypothesis which provided both a reduction of the error term via the utilization of a single covariate and an increase in statistical power. Second, the covariates used the same measurement scale as the dependent variables. Third, in addition to the general assumptions of an analysis of variance (ANOVA) procedure, two of the unique assumptions of the ANCOVA procedure (i.e., the regression lines were both linear and parallel) were addressed in the study.

Given that the statistical analyses failed to reject the null hypotheses of the principal tests of the study, and that the above and other possible procedures were successfully completed, the author still could not contend that the null hypotheses were established as true. Nonetheless, the author concluded with confidence that failure to reject the null hypotheses in the principal tests of the study suggested reasonable evidence to support the conclusions of the study.

Concluding Issues

The results of the two primary ANCOVA procedures supported the principal hypothesis of the study. They failed to reject the hypothesis that individual and group supervision of counselor trainees were equally effective in teaching the specific counseling skill of empathic responding as defined by the Carkhuff model. The two semantic differential scales failed to reject the hypothesis that the participants in the individual and group supervision treatment modalities were equally satisfied both with their overall supervision experience and with their personal supervisor.

The limitations of the present research included the restricted sample size, the limitation of the supervision model to one type, the utilization of only an elementary counseling skill, and the limitation of group dynamics to their most elementary form. Although large enough for inferential statistics, the sample size did not allow universal application of the finding because it was from a limited population. Furthermore, the focus of the experiment was limited to the process of teaching how to respond with empathy as defined by one specific model, and the broad scope of the several issues involved in the process of supervision were not addressed. Also, the present research addressed an elementary counseling skill

and only in the early stages of the supervision process, and the expanded power of the group as a tool in supervision was not tapped in the present study. Finally, some limitation in the raters' ability to measure subtle meanings in the counselor's statements may have been included in the study as a result of transcripts being used instead of the audio-tape recordings themselves.

Suggestions for further research should include replication of the study with different populations, at various training sites, using various supervision models and techniques at various training stages. Extensive research should explore the power of group dynamics in the counseling supervision setting. Furthermore, research should address the effect of using group supervision conjointly with individual supervision. Finally, the effect of group supervision of counselors on client outcome should be probed.

The significance of the present research is that counselor training accrediting agencies and counselor training programs, on all levels, should consider the use of small group supervision in addition to individual supervision of counselor trainees. The addition of groups to the supervision regimen should cut the cost required for individual supervision, allow greater flexibility of counselor education faculty, add the strengths of group dynamics and techniques to the training program, and allow a

larger number of students to be serviced by counselor education programs.

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APPENDIXES

Appendix A
Counseling Skills Pretest

Counseling Skills Pretest

INSTRUCTIONS: Please generate an appropriate response to the client's feeling/s as expressed in each of the following statements.

Client 1 "I've tried and tried to make friends since coming here, but still nobody likes me."

Client 2 "I get tired of school and can't see much use for it. And then I get to wondering just what would happen if I quit. There just has to be more to life than this, but I don't know what it is."

Client 3 "I just hate kids. They're always doing mean and stupid things."

Client 4 "Hey! Guess what! I got elected. I can't believe it, but I did!"

Client 5 "I got the best grade of anybody in gym today on the fitness test. I worked and worked and then I was the best."

Client 6 "That bus is really awful. There's so much tension on it. White kids in one group and black kids in another are always yelling at each other and picking fights. I just know it's going to explode."

Client 7 "I must be the dumbest kid you ever had. I try but I always do lousy. Maybe I should just quit."

Client 8 "I just love being in your class. You're the best teacher I ever had."

Client 9 "What the heck is going on? You keep giving us this stupid busy work. It's not relevant to anything. It's just a big waste of time."

Client 10 "Gee, I'm really disappointed. I was really looking forward to being in your class, but it just hasn't worked out. I really thought I would learn a lot, but I just haven't."

Appendix B
Counseling Skills Posttest

Counseling Skills Posttest

INSTRUCTIONS: Please generate an appropriate response to the client's feeling/s as expressed in each of the following statements.

Client 1 "I wonder if I ought to start looking for another job. They're reorganizing the company, and what with the drop in business and all, maybe this is one of the jobs they'll cut back on. But if my boss finds out I'm looking around, maybe he'll think I don't like it here and let me go, anyway."

Client 2 "Those sure are nice shoes! Where'd you get them?"

Client 3 "I said I'd do the collecting for him, but I sure don't feel like it. But I owe him a favor, so guess I'll have to do it."

Client 4 "I've got a report due tomorrow, an exam the next day, rehearsals every night this week, and now a meeting this afternoon. I don't think I can even fit in eating, and this has been going on all month."

Client 5 "Sure she gets better grades than I do. She's a housewife, takes only two classes, and all she has to do is study. I have to work a job and go to school, too. And I don't have anyone to support me."

Client 6 "I can't understand why they haven't written. They've never been gone this long without at least a card, and I don't even know how to get in touch with them."

Client 7 "Boy, the instructor tells us he'll mark off on our grade every time we're late, but it doesn't seem to bother him when he comes in late. He must figure it's his privilege."

Client 8 "I don't know whether I'm doing a good job or not. She never tells me if I'm doing well or need to work harder. I sure hope she likes my work."

Client 9 "How can I tell him how I really feel? He might get mad and then we'd start arguing. He'll think I don't love him if I tell him my real feelings."

Client 10 "Look, I know I acted like a rat. I apologized,
and I'm trying to make up for it. I can't do
any more, can I? So drop it."

Appendix C
Semantic Differential Scale

INSTRUCTIONS: The following two scales will allow you to report your feelings about your personal experience with supervision as a counselor trainee this quarter. Please express your feelings on each of the two sets of seven-point scales below. The middle space in each line indicates that your feelings on the subject in question are neutral. Each space toward the feeling indicated at each end of the scale indicates a stronger sentiment toward that point.

1) Please put a check in a blank on each scale that tells how you feel about your overall experience with counseling supervision this quarter.

GOOD	_____	BAD
COLD	_____	WARM
INTERESTING	_____	BORING
WEAK	_____	STRONG
HAPPY	_____	SAD
UNFRIENDLY	_____	FRIENDLY
IMPORTANT	_____	UNIMPORTANT
WORTHLESS	_____	VALUABLE
OPEN	_____	CLOSED

2) Please put a check in a blank on each scale that tells how you feel about your supervisor this quarter.

GOOD	_____	BAD
COLD	_____	WARM
INTERESTING	_____	BORING
WEAK	_____	STRONG
HAPPY	_____	SAD
UNFRIENDLY	_____	FRIENDLY
IMPORTANT	_____	UNIMPORTANT
WORTHLESS	_____	VALUABLE
OPEN	_____	CLOSED

Appendix D
Rater's Training Packet

Rater's Training Packet

INSTRUCTIONS: After a brief period of training, you will be responsible for participating in two rating sessions, one today and one in about two months, during which you will evaluate the transcription of several tape recordings of counselor trainees conducting counseling sessions, read counselor trainees' responses to typical client statements, and listen to recordings of counselor supervisors while they supervise counselor trainees.

You will be requested to do the following:

1. Classify each of the counselor responses on the transcriptions of audio-tape recordings and on the written tests into one of five levels.
2. Judge the supervisor's conduct on the supervisory recordings to determine if they have met certain criteria.

Your training will include instruction in the evaluation of the counselor responses, oral group practice on the coding of such responses, and a final test to establish how well you code such responses. The instruction will be repeated in a refresher course before the second rating session and followed with a second test.

Empathy As Defined In The Present Study

Early definitions of empathy focused on empathy as a concept. One such example is "the ability to apprehend another person's feelings and psychologically assume another person's role without enacting that role" (English & English, 1958, p. 178). Rogers (1975) discussed the "way of being with another person" and "entering the perceptual world of the other and becoming thoroughly at home in it" in his definition (p. 4).

Truax and Carkhuff (1967) suggested that empathic responding by the counselor may be defined in terms of a behavioral and measurable construct. Carkhuff (1973, 1981) schematized empathy into a model that established distinct levels of plausible counselor responses to client statements.

Thompson and Rudolph (1988) systematized Carkhuff's conclusions into five levels as follows:

Level I responses tend to deny the client's thoughts and feelings and consist of counselor responses that do not give attendance to the client's statements.

Level II responses simply give advice to the client.

Level III responses reflect the client's feelings by active empathy and are usually neutral (i.e., neither harmful nor helpful).

Level IV responses personalize the client's statements by reflecting what the client is thinking and feeling about the issue under discussion, as does level III, plus expressing an understanding of what the client wants to be different.

Level V responses move beyond those of level IV toward a plan of action that will address the problem. A level V response must follow mutual agreement between client and counselor that includes a understanding of the client's problem, the feelings behind the problem, and the client's expectations for the counseling process.

Examples of the five levels of counselor responses to a typical client statement using the Carkhuff model are noted below and are adapted from Thompson and Rudolph (1988).

Client: I am really having problems with my parents because they are getting older, and I just don't know how to help them with the changes that are occurring in their lives.

- Level I response: I know what you mean, but don't worry, they will get by.
- Level II response: You need to read a book I have, and tell them to get out more often.
- Level III response: You are feeling helpless about supporting your parents because you just do not know how to assist them in growing older.
- Level IV response: You are feeling helpless about supporting your parents because you just do not know how to assist them in growing older, and you want to find a way to do so.
- Level V response: You are feeling helpless about supporting your parents because you just do not know how to assist them in growing older, and you want to find a way to do so. Let's examine what you have tried to do to help your parents and explore other options.

Counselor Responses Rating Chart

The classification of the counselor's responses to a client's statement in one of five levels provides a powerful, objective research tool. This chart will serve as a guideline for coding a counselor's response in one of the five levels. Please use the following criteria to rate the level of each counselor's verbal and written response.

Level	Where you are	Where you would like to be	How to get there
I			
II			X
III	X		
IV	X	X	
V	X	X	X

Example:

- Level I - Not a helpful response; unresponsive to the client's feelings or needs.
- Level II - Not a helpful response; counselor gives advice without attention to the client's feelings or needs.
- Level III - The counselor reflects the client's feelings:
You feel _____ because _____.
- Level IV - Helpful response.
You feel _____ because _____
and you want _____.
- Level V - Most helpful response.
You feel _____ because _____
and you want _____. Followed by a statement beginning the problem-solving process.

Coding The Responses

Each individual audio-tape recording and written test has been transcribed from the actual tape or test. The sets of tapes and tests will be presented to you in random order and no names will be included. If a proper name was used during the tape recording, it will be replaced with "XXXXXXXX" to assure the complete confidentiality of those who participated in the study.

Please consider each response and circle one of the five numbers (1, 2, 3, 4, 5) at the end of each response to indicate your judgment as to which level response is represented.

Your evaluation in no way will effect the grade of the counselor trainees nor will they have access to your individual evaluation of their counseling sessions or written tests.

Evaluating The Supervisory Sessions

The criteria presented to each supervisor at the beginning of the study is as follows:

Please assist the counselor trainees in learning the above information by supporting the class lectures and readings via additional instruction when necessary, by discussing the concept behind the technique (i.e., effective listening and empathic responding is a powerful tool in the development of personal growth in the client), by demonstrating, by guiding them to apply such knowledge through role play, and by assisting them through direct supervision of the tape recordings with their clients.

After listening to the complete tape, please indicate on the sheet you will given with each tape if you conclude the supervisor has met that criteria or not.

Thank you for your participation in this research project.

Appendix E
Supervisor's Training Packet

Supervisor's Training Packet

INSTRUCTIONS: The follow information will assist you in your participation in the study on counseling supervision by John B. Averitt in the spring and summer quarters of 1988 at The University of Tennessee.

The content of the supervision will be typical of what has been requested from you in past supervision experiences at The University of Tennessee. You will focus on didactic and experiential techniques with special emphasis on Carkhuff's five-level responses. One goal of the supervision will be to assist the counselors in making more level IV and level V responses and the elimination of level I or level II responses.

Enclosed you will find a typical packet that will allow you to review the basic Carkhuff information. Counseling Children (2nd ed.) by Thompson and Rudolph (1988) may also serve as an appropriate reference.

Each week you will conduct a thirty-minute supervisory session, either individual or group as you have been assigned, with the person or persons allocated to you. You should review the student's current tape recording with his or her client. The counselor should have a signed consent form from each client that he or she presents. You should attempt to assist the counselor in learning the material by reviewing sections of his or her counseling tape and by practicing skill-improvement as necessary. Also assist the counselor in developing his or her own counseling orientation via self-exploration. It is imperative that all supervisory sessions assigned in the study be conducted. If necessary, please work out make-up sessions as soon as possible.

Please keep a record of each counselor's attendance and make an audio-tape recording of each session. Also, assist in maintaining the confidence of the counselors' client or clients.

Empathy As Defined In The Present Study

Early definitions of empathy focused on empathy as a concept. One such example is "the ability to apprehend another person's feelings and psychologically assume another person's role without enacting that role" (English & English, 1958, p. 178). Rogers (1975) discussed the "way of being with another person" and "entering the perceptual world of the other and becoming thoroughly at home in it" in his definition (p. 4).

Truax and Carkhuff (1967) suggested that empathic responding by the counselor may be defined in terms of a behavioral and measurable construct. Carkhuff (1973, 1981) schematized empathy into a model that established distinct levels of plausible counselor responses to client statements.

Thompson and Rudolph (1988) systematized Carkhuff's conclusions into five levels as follows:

Level I responses tend to deny the client's thoughts and feelings and consist of counselor responses that do not give attendance to the client's statements.

Level II responses simply give advice to the client.

Level III responses reflect the client's feelings by active empathy and are usually neutral (i.e., neither harmful nor helpful).

Level IV responses personalize the client's statements by reflecting what the client is thinking and feeling about the issue under discussion, as does level III, plus expressing an understanding of the what the client wants to be different.

Level V responses move beyond those of level IV toward a plan of action that will address the problem. A level V response must follow mutual agreement between client and counselor that includes an understanding of the client's problem, the feelings behind the problem, and the client's expectations for the counseling process.

Examples of the five levels of counselor responses to a typical client statement using the Carkhuff model are noted below and are adapted from Thompson and Rudolph (1988).

Client: I am really having problems with my parents because they are getting older, and I just don't know how to help them with the changes that are occurring in their lives.

Level I response: I know what you mean, but don't worry, they will get by.

Level II response: You need to read a book I have, and tell them to get out more often.

Level III response: You are feeling helpless about supporting your parents because you just do not know how to assist them in growing older.

Level IV response: You are feeling helpless about supporting your parents because you just do not know how to assist them in growing older, and you want to find a way to do so.

Level V response: You are feeling helpless about supporting your parents because you just do not know how to assist them in growing older, and you want to find a way to do so. Let's examine what you have tried to do to help your parents and explore other options.

Counselor Responses Rating Chart

The classification of the counselor's responses to a client's statement in one of five levels provides a powerful, objective research tool. This chart will serve as a guideline for teaching the counselors to use appropriate responses in counseling.

Level	Where you are	Where you would like to be	How to get there
I			
II			X
III	X		
IV	X	X	
V	X	X	X

Example:

Level I - Not a helpful response; unresponsive to the client's feelings or needs.

Level II - Not a helpful response; counselor gives advice without attention to the client's feelings or needs.

Level III - The counselor reflects the client's feelings:
You feel _____ because _____.

Level IV - Helpful response.
You feel _____ because _____
and you want _____.

Level V - Most helpful response.
You feel _____ because _____
and you want _____. Followed by a
statement beginning the problem-solving
process.

Finally, please assist the counselor trainees in learning the above information by supporting the class lectures and readings via additional instruction when necessary, by discussing the concept behind the technique (i.e., effective listening and empathic responding is a powerful tool in the development of personal growth in the client), by demonstrating, by guiding them to apply such knowledge through role play, and by assisting them through direct supervision of the tape recordings with their clients.

Thank you for your participation in this research project.

Appendix F
Summary of Data

Summary of Data

Written Counseling Skills Test--Individual and Group
Supervision

Code # Mean Scores of Individual Written Skills Test

	Pretest Mean	Posttest Mean	Gain
2	2.1	3.4	+1.3
3	2.2	3.5	+1.3
5	1.9	2.8	+0.9
7	2.1	3.4	+1.3
10	2.1	3.7	+1.6
15	2.2	3.5	+1.3
18	2.0	3.6	+1.6
23	2.8	3.9	+1.1
12	2.0	3.1	+1.1
20	1.9	3.3	+1.4
25	1.9	2.8	+0.9
27	2.6	3.3	+0.7
14	2.8	3.7	+0.9
16	2.2	2.9	+0.7

Mean Scores of Group Written Skills Test

	Pretest Mean	Posttest Mean	Gain
1	2.2	3.2	+1.0
4	2.0	3.8	+1.8
6	1.9	3.7	+1.8
8	2.9	3.7	+0.8
9	2.2	3.1	+0.9
11	2.3	3.8	+1.5
17	1.9	3.9	+2.0
26	1.9	2.7	+0.8
22	2.1	4.0	+1.9
28	1.9	3.2	+1.3
13	2.4	3.9	+1.5
21	3.0	4.0	+1.0
24	1.9	3.6	+1.7
19	2.9	3.3	+0.4

(Summary of Data Continued)

Rating of Counseling Tapes--Individual and Group
Supervision

Code #	Mean Scores of Individual Audio-Tape Skills Test		
	Pretest Mean	Posttest Mean	Gain
2	2.2	3.9	+1.7
3	1.9	3.5	+1.6
5	1.8	3.4	+1.6
7	2.1	3.4	+1.3
10	1.8	3.2	+1.4
15	2.1	3.7	+1.6
18	1.8	3.4	+1.6
23	2.9	4.0	+1.1
12	1.6	3.2	+1.6
20	2.1	3.4	+1.3
25	1.5	3.0	+1.5
27	2.4	3.5	+1.1
14	2.4	3.8	+1.4
16	2.4	2.9	+0.5

Code#	Mean Scores of Group Audio-Tape Skills Test		
	Pretest Mean	Posttest Mean	Gain
1	1.9	3.5	+1.6
4	2.0	3.3	+1.3
6	1.5	3.5	+2.0
8	2.2	3.6	+1.4
9	2.1	3.0	+0.9
11	2.1	3.9	+1.8
17	1.8	3.4	+1.6
26	2.1	2.9	+0.8
22	2.3	3.9	+1.6
28	1.6	3.1	+1.5
13	2.8	3.8	+1.0
21	2.8	3.9	+1.1
24	1.3	3.5	+2.2
19	2.6	3.1	+0.5

(Summary of Data Continued)

Counselor Self-report on Overall Experience
 With Counseling Supervision in the Study
 [Scale = 1 (poor) to 7 (good)]

Code #	Individual Mean Score
--------	--------------------------

2	6.78
3	6.52
5	5.78
7	7.00
10	7.00
15	6.00
18	5.33
23	6.33
12	7.00
20	5.22
25	6.78
27	6.22
14	6.56
16	6.33

Code #	Group Mean Score
--------	---------------------

1	6.44
4	6.67
6	6.22
8	5.33
9	6.56
11	5.56
17	4.89
26	5.00
22	6.11
28	4.44
13	7.00
21	4.67
24	6.56
19	6.22

Individual versus group, self-report on overall supervision satisfaction in the study, t test results with 26 degrees of freedom was 1.88, $p > .05$.

(Summary of The Data Continued)

Counselor Self-report on Overall Experience
with the Supervisor in the Study
[Scale 1 (poor) to 7 (good)]

Code #	Individual Mean Score
2	6.67
3	6.70
5	4.89
7	6.67
10	7.00
15	6.56
18	5.44
23	5.67
23	7.00
12	6.22
25	6.89
27	6.22
14	6.89
16	6.78

Code #	Group Mean Score
1	7.00
4	6.67
6	6.44
8	5.67
9	6.78
11	6.55
17	4.44
26	5.33
22	6.67
28	5.81
13	7.00
21	5.44
24	6.56
19	6.33

Individual versus group, self-report on satisfaction with the supervisor in the study, t test results with 26 degrees of freedom was 0.98, $p > .05$.

VITA

John Barry Averitt was born in San Antonio, Texas, on October 3, 1946. He graduated from Lompoc Senior High School in Lompoc, California, in June, 1965. On April 14, 1969, he received the Bachelor of Arts degree in religion from Oklahoma Christian College in Oklahoma City, Oklahoma. He graduated from Harding Graduate School in Memphis, Tennessee, on May 20, 1972, with the Master of Theology degree and an emphasis in counseling. He earned the Doctor of Ministry degree in counseling from Vanderbilt University in Nashville, Tennessee on December 21, 1976. In 1979, he was granted clinical membership in The American Association for Marriage and Family Therapy. He worked in the private practice of family therapy in Cookeville, Tennessee from 1976 to date.

In 1983, he reentered graduate school in The Department of Educational and Counseling Psychology at The University of Tennessee, Knoxville. In December, 1988, he received the Doctor of Philosophy degree with a major in education and a joint emphasis in counselor education and educational psychology.

He plans to continue in the private practice of counseling and to function in university-level education and research. Mr. Averitt is married to Donna Joy Thomas Averitt, and they have two sons Jeremy and Justin.