

A REPORT OF A COUNSELLING INTERNSHIP
UNDERTAKEN AT THE MEMORIAL UNIVERSITY
COUNSELLING CENTRE, WITH A REPORT OF A
RESEARCH STUDY ASSESSING THE EFFECTIVENESS
OF AN ASSERTION TRAINING PROGRAMME

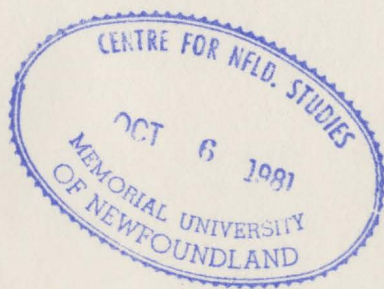
CENTRE FOR NEWFOUNDLAND STUDIES

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A REPORT OF A COUNSELLING INTERNSHIP UNDERTAKEN
AT THE MEMORIAL UNIVERSITY COUNSELLING CENTRE,
WITH A REPORT OF A RESEARCH STUDY ASSESSING
THE EFFECTIVENESS OF AN ASSERTION TRAINING
PROGRAMME

by



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Abstract

This report provides a complete and full description of a three-month, full-time counselling internship completed at the Counselling Centre, Memorial University, September - December 1979. It includes a description of the internship setting, a report of a research study undertaken during the period, and goals that were met during the three-month period and the activities that were undertaken to fulfill the internship objectives. A rationale for choosing the internship and the details of intern supervision are also described.

The internship setting was the Memorial University Counselling Centre. This setting was deemed appropriate by the intern and supervisors because a) the setting was consistent with the intern's career aspirations, b) supervision could be ongoing and comprehensive, and c) there was the opportunity for involvement in a wide variety of professional counselling services.

Specific internship goals and activities to meet these goals were established with the approval of the intern's supervisory committee. The details of the accomplished professional activities are provided.

The research study conducted during the internship investigated the efficacy of a six-week

Assertion Training Programme with a group of university and college students. Treatment and control group participants were pre-tested with the Rathus Assertiveness Schedule to establish their level of assertiveness. Participants were posttested with the College Self-Expression Scale to determine their level of assertiveness after the six-week training period. The treatment group showed a significantly higher level of assertiveness ($p < .01$).

The report makes recommendations for the appropriateness of the internship as a training option for the counsellor training programme.

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CHAPTER I

Eligibility and Selection for Internship

Participation in a counselling internship is an option in the master's degree in counselling offered by the Department of Educational Psychology, Memorial University of Newfoundland. Such an option was considered appropriate by the intern for two reasons; 1) the intern had a strong desire to develop further counselling competencies and to become familiar with a wide range of behavioral change strategies; and 2) the intern's previous counselling-related work experience was limited.

Certain criteria were developed by the Department of Educational Psychology to establish the appropriateness of an internship as an adjunct to academic and practicum training for counsellors:

1. It commences only after a satisfactory performance is achieved in an approved practicum.
2. It commences only after successful completion of all course work (including practicum) required for the degree programme as they are defined in the University Calendar.
3. First consideration will be given to candidates who have had little experience in the working milieu which they will enter.
4. Interested students must submit and have approved by the Department a formal internship proposal, including among other points, a statement of professional goals and expectations for the internship.

- 5. An intern must be enrolled full-time during the time of his internship. He may not receive reimbursement for services rendered during the internship but will be eligible for fellowships and assistantships as provided by university regulations (Department of Educational Psychology, Internship Programme, Note 1).

The intern satisfactorily met these criteria.

Setting for Internship

Memorial University's Counselling Centre served as the setting for the internship. The Centre was selected because the intern's career goal is to work as a professional counsellor in a similar setting and with a young adult population.

Some important issues were considered when choosing the internship setting:

1. The quality of professional supervision.
2. The quality of learning opportunities and experiences.
3. The relevancy to, and usefulness of such experiences in the actual setting in which the intern ultimately expects to work.
4. The availability of time for full-time involvement of the intern for a minimum of thirteen consecutive weeks.
5. Availability of a qualified field supervisor on-site.
6. Ready access to the university supervisor (Department of Educational Psychology, Internship Programme, Note 1).

The Department of Educational Psychology, in conjunction with the intern's academic advisor, agreed on a supervisory committee. This committee consisted of a campus supervisor, Dr. Glenn Sheppard, a field supervisor, Dr. B. Mark Schoenberg, and a third member of the committee, Dr. Terrance Boak.

The Counselling Centre has four professional counsellors who are available to assist students with personal, social, academic, and vocational concerns. Various other resource people from the university community are enlisted when the need arises.

The counselling services provided to assist the university community in its effective functioning are;

1. Assertive Training
2. Behavioral Self-Control
3. Bibliotherapy
4. Biofeedback
5. Career Awareness, Information, and Planning
6. Educational Guidance
7. Individual and Group Counselling
8. Psychological Assessment
9. Relaxation Training
10. Sex Therapy
11. Speed Reading
12. Vocational Guidance.

Participation and/or readings in the abovementioned twelve counselling areas was extensive and provided many new learning opportunities. Where individual counsellors specialized in particular services the intern was given a thorough and professional orientation to these areas of counselling.



The intern was able to spend a total of fifteen consecutive weeks at the Counselling Centre. During this time the intern worked at regular office hours and took on a normal case load of clients and related professional responsibilities.

The field supervisor, Director of the Counselling Centre, was readily available for advice and consultation and was constantly aware of the intern's activities.

The campus supervisor, Dr. Sheppard, was frequently in contact with the intern, and was continuously informed of the intern's activities through visits, telephone contacts, observations and recorded audio tapes.

Internship Goals

Prior to beginning this professional experience the intern identified a total of nine goals and appropriate related activities designed to meet them. The following provisions were consulted when these objectives were being prepared:

1. For the development of competencies for each trainee based on his needs, previous experience, and future vocational plans.
2. For practical experiences that will bring into focus the theoretical training received during the formal part of the programme.
3. For practical experiences that will enable the trainee and the department to evaluate the trainee's ability to effectively work in his chosen field.
4. Opportunities for the trainee to evaluate his personal behavior modalities and work toward making any necessary changes.
5. For feedback from the internship setting to the department regarding strengths and weaknesses of its students so that programme improvements can be implemented.
6. For the development of research and problem-solving skills appropriate to the needs of the student and the setting, considering the nature of his placement and his vocational plans (Department of Educational Psychology, Internship Programme, Note 1).

These objectives were established to assist in the development of helping skills which enabled the intern to serve students in a university setting. The goals and activities were intended to aid in the development of the intern's professional competence and confidence.

The internship goals were:

Goal 1 - to develop an increased awareness of the kinds of personal, social, and academic concerns of university students, and of various modes of assistance which might be offered to deal effectively with these concerns.

The activities performed to meet this goal were:

1. the intern discussed with counsellors at the Centre the kinds of concerns they dealt with in counselling;
2. the intern held informal discussions with individuals and groups of students about their concerns;
3. the intern discussed with the receptionist at the Centre the kinds of student concerns screened and referred to individual counsellors;
4. the intern met with non-counselling university personnel (i.e. student affairs personnel, student housing manager, student aid officer, residence proctors, prefects, principals, registrar's department personnel, and security personnel), to discuss their perceptions of student concerns;
5. the intern read a book on university and college counselling centres (Schoenberg, 1978); and
6. the intern read eight articles which dealt with concerns of university students.

Goal 2 - to continue to expose the intern to the many different theorists and theories of counselling and psychotherapy.

The activities performed to meet this goal were:

- 1. the intern read a book on different theories of counselling and psychotherapy (Patterson, 1973);
- 2. the intern read eleven articles on different theories, theorists, and techniques of counselling;
- 3. the intern discussed with counsellors at the Centre their individual counselling interests and specialities (i.e. vocational counselling, learning and study skills, clinical psychology); and
- 4. the intern observed and discussed other counsellor's approaches to dealing with student concerns.

Goal 3 - to improve and further develop one-to-one counselling skills as an integral part of professional counsellor growth.

The activities performed to meet this goal were:

- 1. the intern re-read parts of Gerard Egan's Exercises In Helping Skills (Egan, 1975);
- 2. the intern observed other counsellors during counselling; and
- 3. the intern counselled approximately ninety students on a one-to-one basis. Tappings of selected sessions were evaluated by the campus and field supervisors and counsellors at the Centre.

Goal 4 - to improve and further develop group counselling skills as an integral part of professional counsellor growth.

The activities performed to meet this goal were:

1. the intern researched group counselling processes (Luft, 1970); and
2. the intern conducted two assertion training groups. There were a total of twelve two-hour sessions. Five of the sessions were observed by supervisors and counsellors for the purpose of supervision, evaluation, and feedback.

Goal 5 - to gain expertise in, and a greater knowledge of, the programmes and services which the Counselling Centre offers and to which the intern has had limited exposure.

The activities performed to meet his goal were:

1. the intern completed a speed reading programme offered by Mr. Mike Doyle. The total class time for this programme was twelve hours. The intern and Mr. Doyle discussed the theories and research underlying the specific approach utilized;
2. the intern, with the assistance of Mr. Gary Green took a student through a complete relaxation training programme. The intern used Bernstein and Borkovec's (1973) manual

as a reference and guide;

3. the intern spent two and one-half weeks in the Career Planning Centre assisting students with vocational and career concerns. Mr. Thomas Sullivan and Mr. Dennis Browne provided orientation and assistance during the period;

4. the intern administered fifteen tests of interest, aptitude, and intelligence (1 - Weschler Intelligence Scale for Children - Revised, 2 - Weschler Adult Intelligence Scale, 2 - General Aptitude Test Battery, 2 - Self-Directed Search, 8 - Strong Vocational Interest Blank). The results of the tests were interpreted to the students concerned. Mr. Dennis Browne and Mr. Thomas Sullivan assisted the intern in the interpretation of the aptitude and interest tests;

5. the intern saw two students with whom monitoring and reporting were used to modify undesirable behaviors;

6. Mr. Gary Green gave the intern a theoretical orientation to the area of biofeedback; and

7. the intern read Kaplan's (1974) book on sex therapy. Dr. Schoenberg discussed many of

the issues and techniques with the intern.

Goal 6 - to evaluate whether the intern possesses the characteristics and professional skills suitable for professional counselling responsibilities in a post-secondary school setting.

The activities performed to meet this goal were:

1. the intern consulted the campus and field supervisors before pursuing any active interventions with students;
2. the counsellors at the Centre were frequently consulted before pursuing any counselling strategies; and
3. the counsellors and supervisors evaluated the intern on three occasions. The Counsellor Evaluation Rating Scale (Myrick, & Kelly, 1971) was used to evaluate the intern. Feedback from the scale was used to inform the intern of areas for concentration of efforts.

Goal 7 - to ascertain through informal discussion the level of understanding that proctors and prefects have of the Counselling Centre and its activities.

The activities performed to meet this goal were:

1. the intern met with three proctors. The proctors were given information about the situation and services of the Counselling

- Centre. The proctors were encouraged to contact the intern if the need arose; and the intern met with fifty-eight prefects. The prefects were supplied with fact sheets about activities at the Counselling Centre. The intern delivered an overview of the types of difficulties that students commonly had and how the Centre could assist with them.

Goal 8 - to gain experience in the administration and interpretation of individual psychological tests.

The activities performed to meet this goal were:

1. the intern administered ten tests of interest, two aptitude tests, and three tests of intelligence; and
2. the intern interpreted the interest, aptitude, and intelligence tests to the students concerned.

Goal 9 - to administer and evaluate the utility of a programme which might add to the Counselling Centre's repertoire of available services.

The activities performed to meet this goal were:

1. the intern conducted two assertion training groups. (The evaluation of an assertion training group will be dealt with more elaborately in the section of this report

entitled Research Component, page 21).

Supervision and Evaluation of Intern

The responsibility for the supervision of the intern was shared by the Department of Educational Psychology and the Memorial University Counselling Centre. Because the Department and the Centre were both on the Memorial University campus, there were no difficulties in maintaining a comprehensive and ongoing supervision.

The supervision of the intern was the joint responsibility of the campus supervisor and the field supervisor. A third member of the supervisory committee was also chosen.

The choices of supervisors carried with it requirements and responsibilities:

University Supervisor:

1. The supervisor should be professionally trained in the area of guidance and counselling and indicate an interest in counsellor training.
2. The supervisor should have sufficient time as determined by the Department to consult regularly with the intern.
3. The supervisor should be responsible, in consultation with the field supervisor, for directing the preparation and evaluation of the report on intern activities.
4. The faculty member will be permitted to supervise no more than one intern during a semester in which he has full-time teaching responsibilities (Department of Educational Psychology, Internship Programme, Note 1).

Field Supervisor:

1. Hold a Master's Degree or its equivalent appropriate to the work of the intern; or equivalent and appropriate experiences as determined by the Department of Educational Psychology.
2. Have a minimum of 2 years experience in the field or its equivalent as determined by the Department of Educational Psychology.
3. Be involved full-time in the placement setting.
4. Have sufficient time, as determined by the Department of Educational Psychology, to consult regularly with the graduate student (Department of Educational Psychology, Internship Programme, Note 1).

Supervisors:

Campus Supervisor - Dr. Glenn Sheppard, B.Ed. (MUN), M.Ed., C.A.G.S., Ed.D. (Boston).

Field Supervisor - Dr. B. Mark Schoenberg, B.A. (Texas Technological University), M.A., Ed.D. (Houston).

Committee Member - Dr. Terrance Boak, B.Sc., M.Ed. (Manitoba), Ph.D. (Calgary).

The supervisors fulfilled all requirements and carried out all responsibilities. Not only did they each possess a high level of skill, but they were willing to share such skills with the intern through inservice training efforts. The supervisors also acted as influential models. They attempted to impart new learning and increase the competence of the intern (Spinelli & Packard, 1978).

The following counsellors and counselling centre staff members also agreed to participate in supervisory and evaluative capacities:

Gary Green, B.A., M.Ed. (MUN).

Thomas Sullivan, B.A., M.A. (Ottawa).

Dennis Browne, B.A., M.Ed. (MUN).

Michael Doyle, B.Sc. (Hons.) (MUN).

Their supervision was in response to particular professional activities in which they were involved.

Supervision of the intern was implemented as follows:

1. The intern's professional involvement in the different programmes was evaluated by the different counsellors responsible for each programme. For example, Mr. Thomas Sullivan and Mr. Dennis Browne provided instruction, supervision, and evaluation of the involvement of the intern in career and vocational counselling. These counsellors provided formal evaluative feedback which was made available to the intern, Dr. Schoenberg, and Dr. Sheppard.
2. The Counselling Centre counsellors met with Dr. Schoenberg, Dr. Sheppard, and the intern four times throughout the internship and discussed the progress of the intern. The discussions focused on specific aspects of the intern's professional development and activities. The supervisors and counsellors were specific in identifying both strengths and deficiencies of the intern.
3. The intern, Dr. Schoenberg, and Dr. Sheppard met four times throughout the internship period and discussed the intern's progress and any problems which arose.
4. The intern maintained a daily log of each day's activities in which personal involvement in Counselling Centre activities was recorded.
5. The intern submitted to the supervisors, and later to the counsellors for evaluation purposes, fourteen audio tapes of individual and group counselling sessions. These tapes were representative samples of

individual and group counselling activities by the intern.

6. The intern organized and implemented an Assertion Training Programme. Dr. Schoenberg and Dr. Sheppard supervised the carrying through of this programme.

The intern viewed the evaluation of his professional activities by supervisors and counsellors as an excellent feedback opportunity whereby valuable information was gathered in assessing personal style and professional orientation. The various orientations of the counsellors and supervisors provided the intern with a testing ground on which he continued to consolidate a philosophy of counselling. The cross fertilization of philosophies helped in professional growth and development.

There were some basic principles to which all supervisors adhered. These were proposed by Dr. Glenn Sheppard, campus supervisor, and were included in the following statement:

"The systematic evaluation of a counsellor intern poses a real challenge to supervisors and, at times, may appear to be a formidable task. Very few adequate procedures or instruments have yet been developed to comprehensively evaluate the wide range of professional activities which should accompany a rich and growthful internship experience. Furthermore, in assisting the intern to develop and experiment with an effective, personal style of helping it is essential that skills which, at first, may feel mechanical and appear to be awkwardly performed, become integrated and possessed by the intern as a functional, comfortable, and effective aspect of his counselling behavior. Evaluation, then, must be sufficiently flexible to permit and encourage

the development of a personalized professional style with demonstrative effectiveness.

Despite the need for an individual approach to counselling supervision, there are some basic principles which apply:

1. The intern's behavior should be observed and evaluated in a wide variety of appropriate professional activity, e.g. individual counselling, group counselling, communication of the counsellors function to various publics and potential client populations and so forth.
2. Evaluation of the intern's interpersonal effectiveness should be primarily based on actual observation of the intern's behavior in given professional circumstances. Such observations to be accomplished by one-way mirror viewing, and audio-visual taping. Minimal emphasis should be given to counsellor self-reporting in the absence of the raw data available through these avenues.
3. Evaluation should be ongoing and involve in addition to critical assessment of the counsellor's competencies, suggested action designed to remedy any specified deficiencies.
4. One of the goals of supervision is to move the intern towards developing an independent, continuing commitment to professional self-examination.
5. The evaluative process should intimately involve the intern, and evaluative feedback must be focused, specified and supported by behavioral evidence.
6. The intern must be intimately involved in the essential process of setting both short-term and long-term professional growth goals. These must be specific and sufficiently operationalized to be assessed" (Personal Communication, Dr. Glenn Sheppard, Note 2).

Supervisors and counsellors assisted in the formal evaluation of the intern by completing the Counsellor Evaluation Rating Scale (Myrick & Kelly, 1971). The scale was completed on three occasions throughout the internship period. As the internship period progressed, counsellors increased their exposure to activities of the intern (i.e. individual counselling, group counselling, career counselling) and were able to develop judgements of the intern's level of professional competence. The evaluation of the intern by the field and campus supervisors and the counsellors at the Counselling Centre indicated a high level of professional competence. The intern used feedback from the Scale to increase sensitivity to important counsellor characteristics. Many of these improved over the period of internship. The intern remained cognizant of essential and desirable counsellor practises and characteristics.

It was understood that the intern, in addition to completion of professional tasks specified in the proposed internship goals, had to provide evidence of satisfactory professional competencies in the performance of these tasks before the internship would be deemed successfully completed. It was also understood that assessment of professional competence was the responsibility of the supervisory committee, and, in addition to their ongoing evaluation and assistance, they had the responsibility

of determining, using the various procedures specified, whether or not the level of professional competency achieved by the intern was satisfactory. Furthermore, the committee had the responsibility to recommend further extension of the internship activities had it been deemed necessary.

A taping policy was rigidly adhered to for all taping. All clients were informed of the taping, and their permission was requested before it was undertaken. The purpose of taping and limits of use were explained. The intern, supervisors, and counsellors were the only persons who had access to the tapes. Tape content was treated so as to retain client anonymity.

The guidelines followed were those stated in the Canadian Guidance Counsellor Association's published Guidelines for Ethical Behavior. Those that pertained to any audio or video recording were as follows:

1. A counsellor or practitioner's primary obligation is to respect the integrity and promote the welfare of the client with whom he is working.
2. The counselling relationship and information resulting therefrom must be kept confidential in a manner consistent with the obligations of the counsellor or practitioner as a professional person.

3. Records of the counselling relationship, including interview notes, test data, correspondence, tape recordings, and other documents, are to be considered professional information for use in counselling, research, and teaching of counsellors, but always with full protection of the identity of the client and with precaution so that no harm will come to him.

4. The client should be informed of the conditions under which he may receive counselling assistance at or before the time he enters such a relationship. Particular care should be taken in the event that conditions exist about which the client would not likely be aware (Note 3).

Research Requirement

The intern researched the area of counselling termed Assertion Training (see Research Component, page). This popular counselling intervention strategy was aimed at students who felt a general dissatisfaction with themselves for not having handled many interpersonal situations very effectively. Specifically, they felt unable to a) express thoughts and feelings in appropriate ways, b) respond to mild criticism, c) recognize and stand up for their own personal rights.

The intern pursued the following guidelines for ethical behavior, as stated by the Canadian Guidance and Counselling Association, while conducting the assertion groups:

1. A Counsellor or practitioner assumes obligations for the welfare of his research subject, and avoids causing injurious effects or aftereffects by experiments.
2. A Counsellor or practitioner plans his research so as to minimize the possibility of misleading findings and publishes full reports of his work; mentioning explicitly any variables and conditions which might affect interpretation of the results.
3. A Counsellor or practitioner has an obligation to make available original research data to qualified others who may wish to replicate or verify the study.
4. A Counsellor practitioner has an obligation to give due credit to those who have contributed significantly to his research, in accordance with their contributions. (Canadian Guidance and Counselling Association, Guidelines For Ethical Behavior, Note 3).

The nature of the Assertion Training Programme (i.e., focus and activities) was decided upon by the intern in consultation with the campus and field supervisors prior to the beginning of the internship.

CHAPTER II

RESEARCH COMPONENT

Introduction

The closest antecedent to the term "assertiveness" is Salter's (1949) use of the term "excitatory behavior". In the book Conditioned Reflex Therapy (1949), Salter outlined the utility of excitatory behavior as a treatment for neurosis.

In 1958, Joseph Wolpe and Arnold Lazarus coined the term "assertiveness". Assertiveness was defined as behaving and expressing emotions appropriately (Wolpe & Lazarus, 1966). Inappropriate, or nonassertive behavior, on the other hand, meant inhibiting appropriate and adaptive emotional and behavioral expression in interpersonal situations. These therapists made these expressions the focus of treatment by attempting to have clients substitute assertive responses for nonassertive ones.

The wide popularity of assertion training, and its development as a systematic intervention strategy is attributed to Alberti and Emmons. Their classic work, Your Perfect Right (1970), outlined the systematic approach to teaching people the skills of relating and communicating, and has been viewed as appropriate for both self-help and clinical programmes. Covert

rehearsal, modeling, and behavioral rehearsal were the primary change strategies included in their approach. There was a proliferation of books on assertion training published during the seventies (i.e., Fensterham & Baer, 1975; Lange & Jakubowski, 1976; Liberman, King, DeRisi, & McCann, 1975; Smith, 1975): Assertion training developed to include many experimentally proven psychological techniques of facilitating the acquisition of situationally appropriate assertive responses. Research into the efficacy and application of assertion training has also been abundant (Barnard, Flesher, & Steinbook, 1966; Carlson & Johnson, 1975; Corby, 1975; Field & Test, 1975; Hedquist & Weinhold, 1970; Tinsley, Liso-Levenson, Laventure, & Bretton, 1975; Sandmeyer, Ranck, & Chisivick, 1975; Smith, 1975; Wolfe & Fodor, 1975; Zimbardo, 1977; Lee, Halberg, & Hassard, Note 4).

In recent years assertion training has moved from the realm of clinical practice to working with people who have normal problems of relating and communicating effectively with others. Developments of the seventies have made assertion training a multimodal cognitive/behavioral method of modifying unadaptive behaviors.

Purpose of Study

The purpose of the study was to investigate the effectiveness of a group approach to assertion training with university and college students who volunteered to participate in a six-week, 12-hour, Assertion Training Programme. The participants in the programme were compared on a measure of assertive behavior to a control group comprised of an equal number of volunteers.

Participants in the treatment and control groups were assessed to be nonassertive by the administration of the Rathus Assertiveness Schedule (Rathus, 1973) to all group participants. This unassertive sample was then randomly divided into treatment and control groups.

The study proposed to measure change in level of assertiveness. Change was evaluated by having both treatment and control group members complete the College Self-Expression Scale (Galassi, De Lo, Galassi, & Bastien, 1974) at the conclusion of the six-week programme and by a subsequent statistical analysis of these results.

Research Objective

The objective of the research was to test the following hypothesis:

participants in a six-week assertive training programme will demonstrate significantly more assertiveness as measured by the College Self-

Expression Scale as compared to those students in the control group who did not experience the programme.

Rationale

Assertion training has been designed to teach interpersonal skills as a strategy to enhance personal effectiveness. The ability to communicate needs, desires, and wants in effective ways has been determined to be an important factor in perceived general self-satisfaction and in healthy personal adjustment. It is essential, therefore, that people be taught, through the socialization process or through more direct methods, appropriate communicating practices. Many university students, for various reasons, have adjustment difficulties. Typically university students have diverse backgrounds; but not all have been exposed to city living, travel, independence, a large administration, roommates, or extended periods away from home. As a result social and communications skills aren't equally evident throughout the student population. These differences can be sources of adjustment problems to university life. Because university students in Newfoundland come from communities ranging in size from two to three hundred people up to one hundred and twenty thousand, problems can realistically be expected when they have to deal with

unfamiliar people and situations.

Lacking successful handling of interpersonal and other situations, students may frequently experience confusion, uncertainty, depression, frustration, and self-devaluation. These feelings may lead to impaired academic performance, worry about grades, inability to concentrate, or alcohol and drug abuse. In addition to improving interpersonal communication, the development of assertive skills may help to alleviate many of these potential problems.

Assertion training as a systematized intervention strategy can be offered individually or in a group setting. While individual assertion training has been demonstrated to be effective, group training is more economical, offers some additional benefits, and is generally more effective. Lange and Jakubowski (1976), in their highly respected publication for trainers present the following advantages of a group approach to training:

1. Assertion trainees often can more easily accept assertion rights when other group members provide their own personal rationales for accepting these rights and give examples of how they have assertively acted on such rights.
2. In the group setting, participants may engage in nonassertive and aggressive behaviors which would not occur in individual training. For example, individuals who monopolize, intellectualize, or offer controversial opinions may trigger various nonassertive

or aggressive reactions on the part of other group members. These real-life behaviors can then be immediately worked on in the group.

3. An individual can practice assertive responses with a variety of people in the group. This may facilitate the generalization of practiced assertive behaviors to others outside of the group.
4. The group can often devise creative assertive responses which had not even occurred to the trainer. In addition, members' assertive skills may be strengthened through their modeling assertive responses for another group member.
5. More people are available to encourage and reinforce a member's assertion attempts. Getting reinforced from several peers at one time usually makes a greater impact on an individual. In addition, some members accept reinforcement from other group members more easily than they accept similar remarks from a trainer (p.3).

The programme offered in this study utilized a variety of specific procedures and systematically presented a sequential and developmental set of group activities. These procedures and activities were as follows:

1. Identify specific situations and behaviors which will be the focus of training;
2. Teaching the participants how to ascertain if they have acted assertively rather than aggressively or nonassertively;
3. Helping individuals to accept their personal rights and the rights of others;
4. Identifying and modifying the participants' irrational assumptions which produce excessive anxiety and anger and result in nonassertion and aggression;

5. Providing opportunities for the participants to practice alternative assertive responses;
6. Giving specific feedback on how the members could improve their assertive behavior;
7. Encouraging the members to evaluate their own behavior;
8. Positively reinforcing successive improvements in assertive behavior;
9. Modeling alternative assertive responses as needed;
10. Structuring the group procedures so that the members' involvement is widespread and supportive;
11. Giving considerable permission and encouragement for the participants to behave assertively within and outside of the group; and
12. Displaying leadership behavior which is characterized by assertion rather than aggression or nonassertion. (Lange & Jakubowski 1976, p. 4)

Eventhough there was a systematic approach to the training, the primary focus of each group session was to address the relevant concerns of group members and, therefore, all participants were encouraged to provide feedback and generally participate in determining the precise direction of each training session.

Review of Related Literature

Assertion Training has become a popular programme for increasing personal effectiveness in interpersonal relationships. From its inception, assertion training has emphasized the use of a variety of behavioral

intervention strategies. As the popularity and use of this therapeutic technique grew, many new and varied strategies were added. The purpose of this review is to provide an historical perspective on the growth of assertive training, to comment on the various components of a comprehensive training model, to summarize the empirical findings and to address some of the outstanding issues in this area.

Andrew Salter was the first to write of modifying people's social behavior as a treatment for neurosis. In Salter's Conditioned Reflex Therapy (1949), neurosis was defined as unadaptive worry or concern for impending situations. As well Salter distinguished between inhibitory and excitatory personalities.

"The inhibitory person suffers from constipation of the emotions" (Salter, 1949, p.47). In Salter's view emotions must be exercised, just as the body must be exercised; to maintain a psychologically healthy equilibrium. Followed from this was the idea that emotional health had to be taught and learned.

The excitatory person "acts without thinking" (Salter, 1949, p.42). This person was also defined as being "relaxed and spontaneous, and takes things as they come" (Salter, 1949, p.42). The excitatory person was seen as honest in emotions, leading to honesty in behaviors. And again, this personality type was learned.

It was Salter's contention, and indeed it seemed a plausible one, that people were conditioned by the experiences they had (i.e. family, school) to be either excitatory or inhibitory. The conditioning referred to was that which Ivan Pavlov (1927) proposed from studies with salivating dogs (i.e. association between events).

Inhibited people were thought to have been conditioned to repress emotions rather than to express them. On the other hand excitatory people spontaneously demonstrated positive and negative emotions. Inhibited people were seen by Salter as being in need of reconditioning to an excitatory state.

Salter's type of intervention to recondition was to encourage clients to act in accordance with emotions. If they felt sad, for example, they were encouraged to behave sadly; if they felt happy, they were encouraged to express their happiness. Otherwise, they could potentially experience frustration, unhappiness, and emotional sterility.

From case reports it was deemed that those whose psychological health improved were those who reversed their reactions to emotions (i.e. dull acceptance to active participation). Typically, the problem areas concerned relationships with other people.

Historically, Joseph Wolpe and Arnold Lazarus (1966) were the next people to get involved in treating neurosis by behavioral methods. Their definition of neurosis was essentially the same as Salter's (1949): "Neurotic habits are distinguished by their resistance to extinction in the face of unadaptiveness" (Wolpe & Lazarus, 1966, p.1). They were also the first to coin the phrase "assertive training". In their book entitled Behavior Therapy Techniques (1966), they defined assertive training as "... a range of methods of promoting change of behavior in the patient's life situation. Generally speaking, the patient to whom these apply has unadaptive anxiety-response habits in interpersonal relationships, and the evocation of anxiety inhibits the expression of appropriate feelings and the performance of adaptive acts" (Wolpe & Lazarus, 1966, p.38).

There were three important features of Wolpe and Lazarus' work that require noting: 1) the word "habit"; as used in the definition of neurosis, suggests that unadaptive behaviors are learned; 2) they used a scientific approach to teach adaptive (assertive) behaviors; and 3) their focus of intervention expanded to deal more rigorously with emotions, not just overt behaviors.

By assuming that unadaptive habits were learned, these therapists also assumed that nonassertive behavior patterns could be unlearned and replaced by other behavior patterns. Their approach to the treatment of neurosis was termed reciprocal inhibition, and it was designed to systematically desensitize the neurotic's anxiety to whatever stimulus was eliciting the anxiety.

The association between stimulus and emotional response was negative for the neurotic (i.e. fear, depression, guilt). The thrust of treatment was to replace the fear, depression, or guilt by some pleasant emotional response (i.e. feels good, laughter, relaxation). While doing this, the client could subjectively report the level of distress being experienced. It was posited that, because negative and positive emotional responses were reciprocally inhibitory (could not occur simultaneously), the distressful, or anxiety provoking response to a negatively conditioned stimulus would disappear.

Reciprocal inhibition is translated into treatment through a process termed systematic desensitization. This process firstly requires the therapist and client to mutually generate a hierarchy of anxiety provoking stimuli. The therapist, starting with the least anxiety provoking stimulus, guides the client through the hierarchy, continuously pairing the

negative emotional response with a positive response. When the client feels comfortable in the presence of a stimulus, the therapist moves to the next stimulus until the most anxiety provoking stimulus causes the client no distress. Their strategy requires clients to experience, rather than avoid, anxiety provoking situations and to cognitively reconstruct their reactions to them, thereby replacing unadaptive emotional and behavioral responses with adaptive ones.

Assertiveness During the 1970's - Systematic & Scientific

The popularity of assertive training programmes spread across North America during the seventies. According to Kelly (1977), this sudden rise in popularity can be attributed to three modern day cultural changes:

- 1) people began to value personal relationships more highly,
- 2) social acceptance of alternative life styles and social behaviors grew, and
- 3) the women's movement encouraged women to be effective as well as sensitive" (p.264).

The writing of Your Perfect Right by Robert Alberti and Michael Emmons, in 1970, began the seventies proliferation of assertive literature. The primary emphases of these authors were emotional freedom and emotional rights. This frequently quoted publication made at least four significant contributions to a

model of assertion training for therapists and counsellors:

- 1) it made a distinction between a clinical, abnormal population and a nonclinical, normal population and suggested that assertiveness was an appropriate and useful behavioral repertoire for many so-called "normal" individuals;
- 2) made an operational distinction among assertive, aggressive, and unassertive behaviors;
- 3) further systematized assertive training by including more psychological techniques such as covert rehearsal, modeling and reinforcement; and
- 4) advocated assertion training be conducted in group rather than individual settings.

These authors began developing a social rationale for asserting one's self. This included assessing guilt feelings and assessing consequences of acting assertively, nonassertively, or aggressively. In essence, they challenged and encouraged others to challenge why ineffective, unsatisfying behaviors or habits were being maintained. People were encouraged to take personal responsibility for their behavior and to express their feelings and thoughts in a direct, authentic, and socially appropriate manner.

The focus of assertion training had expanded to include behaviors, emotions, and thoughts. All three were seen as interrelated correlates of nonassertive/aggressive/assertive behavior and consequently, to be

directly dealt with in a comprehensive model of assertion training.

The 1970's produced an abundance of literature and research on Assertion Training (Kelly, 1977). Assertion training had taken on two reputations; one of being a fad and one of being a proven method of helping people with communication and relationship skills. The vast majority of efficacy research of assertion training and programme development occurred during the early and mid seventies.

In the seventies there was a proliferation of self-help programmes and the publication of a wide variety of assertiveness training models. Some such programmes acknowledged a risk involved with developing assertive behaviors, namely, being perceived differently by old acquaintances and friends. This risk materialized, it seems, most frequently when either 1) people tried to train themselves, or 2) inexperienced and unqualified trainers offered training.

While change was the order of the day, it was also recognized by some that behavioral change is difficult to accomplish. Change often meant dealing more effectively with other people in various social situations; parents at home, teachers at school, spouses (Lange & Jakubowski, 1976; Liberman, King, De Risi, McCann, 1975).

However, virtually all assertion programmes operated from the fundamental assumption that the interpersonal skills to communicate effectively can be developed and taught.

Two of the most prominent books used by people in the human relations field to teach assertiveness are Responsible Assertive Behavior: Cognitive/Behavioral Procedures for Trainers (Lange & Jakubowski, 1976) and Personal Effectiveness: Guiding People to Assert Themselves and Improve Their Social Skills (Lieberman, et al., 1975). Both of these publications delivered an approach to assertion training which has changed little in recent years. These approaches included assessment, session by session treatments, researched proof of effectiveness, evaluation procedures, as well as some sensitivity to the ethical implications for helpers using this popular behavior change strategy. Other popular publications in the area of assertion training include Your Perfect Right (Alberti & Emmons, 1970), Don't Say Yes When You Want To Say No (Fensterheim & Baer, 1975), and Asserting Your Self: A Practical Guide for Positive Change (Bower & Bower, 1976). These texts vary in orientation from behavioristic to cognitive. This reflects the yet unsettled issue of which orientation is most effective.

The more comprehensive, contemporary procedures for training in assertiveness are multimodal in design, in that they incorporate experimentally proven techniques from many sources which attempt to modify clients' behaviors, thoughts, and emotions. The modification of behavior, thought, and emotion remains a complex and incompletely understood process, however, there is now, it seems a tendency for assertion training programmes to utilize a diverse array of behavior change approaches and to subject such approaches to empirical tests of efficacy.

Kelley (1977) has reviewed the popular assertion training programmes to analyze the components of different approaches. These approaches included:

- 1) Anxiety-reduction techniques: Methods to help reduce anxiety, such as relaxation or graduated exposure to the person or object evoking the anxiety.
- 2) Behavior modification (Behavioral, behavioristic) techniques: Techniques that teach one to change one's behavior in order to resolve problems or to relieve anxieties, as opposed to methods that simply help one to understand these problems.
- 3) Behavior (Behavioral)-rehearsal procedures or techniques: Role play, usually combined with other techniques, such as covert rehearsal, modeling, role reversal, and positive reinforcement.
- 4) Cognitive restructuring, rational-emotive procedures: Procedures that teach one to become aware of one's present thought patterns and to develop more rational ways of thinking about situations, in order to change one's emotional reactions and behaviors in a particular situation.

- 5) Covert rehearsal: The process of imagining oneself responding successfully, or as one would like to, to a particular problem + situation.
- 6) Covert reinforcement: The procedure of bringing to mind a pleasurable, or positively reinforcing, image in order to reward oneself immediately following a desired response and to increase the probability of responding similarly in the future.
- 7) Modeling: Demonstrating for an observer behavior that the observer wishes to learn.
- 8) Role play: The technique of acting out or replicating a situation in which one plays a role or practices behavior that one would like to use in a similar, real-life situation.
- 9) Role reversal: The process in which one role player in a role play exchanges roles for a brief time with another role player.
- 10) Thought stoppage: The Technique of controlling unwanted thoughts through negative self-reinforcement, specifically through using the word "stop", at first shouted aloud and eventually simply said silently to oneself (Kelly, 1977, p.266).

Relevant Research

Despite the growing literature and widespread advocacy of assertive programmes, many of the alleged benefits of assertive training as well as the predicted effectiveness of the various programme components have not been subjected to empirical evaluation. There does, however, seem to be an increasing frequency of reported studies designed to examine such issues as: efficacy of training models and/or specific components, length of programmes, group versus individual approach, and

so forth. Very few findings are unequivocal to date and there remains a wide variety in subject selection, type and length of programme, as well as differences in outcome measures.

Anxiety-reducing techniques to reduce unadaptive anxiety responses to interpersonal situations have received some attention and have taken various forms from using imagery (Meichenbaum, 1977) to deep muscle relaxation (Bernstein & Borkovec, 1973). The therapist makes use of the client's subjective level arousal in designing appropriate strategies. These and other methods have been seen as useful and appropriate for training.

Anxiety-reduction is held to be a significant contributor to the development of more adaptive behavioral alternatives (Bower & Bower, 1976; Lange & Jakubowski, 1976; Liberman, et al., 1975; Wolpe & Lazarus, 1966).

The development of alternatives to unadaptive behaviors has been attempted by using various strategies; rehearsal (Ascher & Phillips, 1975; McFall & Twentyman, 1973; Sandmeyer, Ranck, & Chiswick, 1979; Twentyman, Gibraltar, & Inz, 1979), role play (Atkinson, 1971; Sandmeyer, et al., 1979; Sarason & Ganzer, 1973); modeling (Eisler, Hersen, & Miller, 1973; Kazdin, 1974; McFall & Twentyman, 1973; Sarason & Ganzer, 1973),

role reversal (Argyle, Bryant, Trower, 1974; Kiel & Barbee, 1973); positive reinforcement (Ascher & Phillips, 1975; Atkinson 1971; Kazdin, 1974; McFall & Twentyman, 1973; Sandmeyer, et al., 1979) coaching (McFall & Twentyman, 1973; Twentyman, et al., 1979). The cognitive aspects of behavior change have also be utilized and researched; rational-emotive procedures (Kelley, 1979; Lange & Jakubowski, 1976) problem-solving approach (Scott, 1979), cognitive modification (Beck, 1970; Meichenbaum, 1972); consciousness raising addressing rights, discrimination between assertive and nonassertive responses (Bower & Bower, 1976; Kelley, 1979; Lange & Jakubowski, 1976; Liberman, et al., 1975).

Individual behavioral and cognitive change strategies seem to differ in effectiveness to produce change. And, as Twentyman et al., (1979) suggest, this may be just as likely due to subject variation as to variation in research methodology. All of the aforementioned techniques appear to work in particular settings.

In practice, the majority of assertion training programmes utilize cognitive/behavioral approaches; and, the selection of behavioral and cognitive components varies with the trainers. In reviewing the research on programmes, there is some evidence that combining

strategies results in better outcomes than do more unimodal approaches, and that behavioral components, such as rehearsal, modeling, and coaching, seem essential when dealing with complex behaviors (Twentyman, et al., 1979). Programmes differ in other areas as well; measurement, duration, frequency of meeting, size of group, approach (group or individual), use of software, and types of problems dealt with.

Until recently assertiveness was typically measured using situation specific pencil-paper questionnaires. The issues dealt with were limited to behavioral performance in particular situations and clients' subjective measure of discomfort. The validity of such an approach has been questioned (McFall & Marston, 1970; Borkovic, Stone, O'Brian, & Kaloupek, 1974). The new emphasis appears to be to measure as well the autonomic correlates to anxiety (i.e., pulse rate, activity level, breathing).

Efficacy testing requires appropriate pre-test/posttest measurement; the point being that this measurement is essential before any conclusive statements can be considered. While it is recognized that control groups aren't practical in many therapeutic situations, it is necessary to maintain a rigorous methodology when researching therapeutic

techniques.

The duration of assertion training programmes varies. However, Lange & Jakubowski (1976) suggest that six two-hour sessions should be a minimum number. The upper limit seems to depend on the number of issues covered and the focus of the sessions; but, client dependence should be considered. One meeting per week is a suggested frequency of occurrence, with group size ranging from four to fifteen depending on the number of trainers. These appear to be suggested guidelines. The limits of time, frequency, and size for this type of group has not been thoroughly researched, and, therefore, it remains difficult to state, with any confidence, an optimal level for such variables.

The use of audio-visual taping equipment has gained popularity of late, especially with the increase in self-help programmes. One positive feature of taping is that clients get an opportunity to evaluate themselves, as well as receiving feedback from others (Kelley, 1979; Lange & Jakubowski, 1976; Liberman, et al., 1975).

The most popular format for training is the group. Its benefits, as presented by Lange and Jakubowski (1976) have been presented in the section of this Chapter entitled Rationale (p.24).

Research into assertion training, while providing credence for programme practices, has unveiled new issues yet to be adequately considered. For example;

- a) which experimental designs for evaluating programmes are appropriate,
- b) do particular cognitive-behavioral component combinations differ in effectiveness,
- c) are the more complex programmes (time, equipment) better,
- d) can cognitive or behavioral procedures stand alone,
- e) do assertion training programmes develop selfishness?

Programme Description

Conducting the assertion training group required that the intern be aware of the elements operating during time spent with the group. While there was a preplanned programme pursued, effective group leadership required a sensitivity to group process as well to specific tasks and the utilization of a wide range of group facilitative skills.

Many experimentally tested behavior change strategies were incorporated into the assertion training. They included: 1) modeling, 2) covert modeling, 3) rehearsal, 4) covert rehearsal, 5) role reversal, 6) reinforcement, and 7) coaching. Descriptions of these elements are as follows:

1. Modeling/Participants observe trainers, coached actors, other participants, or audio or video tapes demonstrating assertive behavior and vicariously learns the assertive behavior.

2. Covert modeling/Participants imagine others behaving assertively in a situation that is personally difficult for them.
3. Rehearsal/Participants practise assertively responding in problem situations with trainers or other participants role playing others in the scenes. Participants repeatedly practice responding until they behave assertively.
4. Covert rehearsal/Participants imagine themselves behaving assertively in problem situations, which possibly have been previously modeled by trainers.
5. Role reversal/Role reversals require participants to take the roles of receivers of assertive behaviors and thereby potentially gain some insights. Trainers or other participants take participants' parts and model assertive behaviors.
6. Reinforcement/Trainers and other participants give positive reactions to specific assertive behaviors practiced by other group members. Improvement is rewarded rather than only the final behaviors.
7. Coaching/Trainers and other participants offer detailed descriptions of what makes up appropriate assertive responses. (Lange and Jakubowski, 1976 p.155)

These seven procedures encouraged participants to monitor their own behavior, allowed for immediate reward following appropriate assertive behavior, and provided the trainer with feedback on individual progress. Each of these elements has been experimentally demonstrated to contribute significantly to behavior change when compared to a no-treatment group (Ascher & Phillips, 1975; Bandura, Grusec, & Menlove, 1967; Bruch, 1978; Kazdin,

1974; McFall & Twentyman, 1973; Meichenbaum, 1972; Meichenbaum & Cameron, 1974).

Also included in this programme were homework, behavioral contracting, and self-reinforcement. Homework consisted of behavioral assignments which were designed as practice for clients to help them develop the interpersonal skills. De Risi and Butz (1975) define contracting as:

"a technique used to structure behavioral counselling by making each of the necessary elements of the process so clear and explicit that they may be written into an agreement for behavior change that is understandable and acceptable to everyone involved. This method insures that every party to the agreement obtains an acceptable number of those rewards (including behavior change) that please him" (p.1).

The self-reinforcement model followed during the sessions is best defined by Bandura and his associates: participants "adopted certain standards of behavior and self-administer rewards and punishments depending upon whether their performances fall short of, match, or exceed their self-prescribed demands" (Bandura, et al., 1967, p. 449). These three procedures added to the evaluation of both client and trainer success with regards to desired behavior acquisition.

Group counselling skills of the facilitator are essential if a group is to meet its goals and maximize the benefits of the group experience. Dyer and Vriend (1975) outline the leadership skills which the intern used throughout the assertion training

programme to maximize results:

1. identifying, labeling, clarifying, and reflecting feeling,
2. identifying, labeling, clarifying, and reflecting behavioral data,
3. identifying, labeling, clarifying, and reflecting cognitive data,
4. questioning, drawing out, and evoking material appropriate for counselling focus,
5. confronting,
6. summarizing and reviewing important material,
7. interpreting,
8. restating,
9. establishing connections,
10. information giving,
11. initiating,
12. reassuring, encouraging, and supporting,
13. intervening,
14. dealing with silence,
15. recognizing and explaining nonverbal behavior,
16. using clear, concise, meaningful communications,
17. focusing,
18. restraining, subduing, and avoiding potentially explosive and divisive group happenings,
19. goal setting,
20. facilitating closure (p. 144).

These leadership skills were utilized when

- 1) a group member spoke for everyone rather than personalizing a statement,
- 2) an individual spoke for another person in the group,
- 3) a group member sought the approval of the intern before or after speaking,
- 4) a group member bored the group by rambling, and
- 5) discrepant behavior appeared.

Dyer and Vriend (1975) suggested that these interventions "help to keep members working on their goals and give everyone a sense of directionability" (p.201). These interventions were also learning experiences whereby the intern's group facilitation skills were further developed. It was reinforced to use those skills and to find they did, in fact, seem to provide group direction and an appropriate group structure.

The assertion training programme was modified from one developed by Arthur Lange and Patricia Jakubowski (Lange & Jakubowski, 1976). It was shortened in consideration of the length of the Academic semester.

The assertion training programme consisted of six two-hour sessions. One session per week was held for six consecutive weeks. All persons interested in the assertion training programme met with the intern for a screening interview. This meeting was designed to clarify the programme's goals and the methods of accomplishing these goals, and to insure that participants would be unassertive at the beginning of training.

The following areas were covered during the interview:

1. who would benefit from the training;
2. brief personal background, why person was interested, what they hope to gain;
3. the specific skills taught during the programme and the process for teaching these skills;
4. other expected benefits of the programme;
5. expectations for group members (i.e., regular attendance, group participation, ground rules, cooperation with assessments).

Following the interview, participants were asked to complete the Rathus Assertiveness Schedule.

Session I

Materials Needed

1. Name tags and marker,
2. Handout on participant responsibilities and self-help,
3. Overhead projector and transparencies of goals, personal rights, and definitions of assertive and nonassertive behaviors,
4. Booklet - A Guide to Self Improvement, (Note 5)
5. Discrimination Test.

A. Introduction

1. Get acquainted exercise. The intern distributed name tags. Participants introduced themselves.
2. Inhibition reducing exercise. Group members

were led through an exercise in which they blow up an imaginary tent. Participants pretended to unfold a rubber tent, stretch it over their heads, and attach it to the floor, behind where they stood. Facing each other, they proceeded to inhale deeply and blow out until the trainer determined that the tent was expanded to the desired size. The purpose of this task was to get participants involved in a group exercise which would encourage group participation and decrease shyness.

B. Review

1. The group reviewed the ground rules for behavior in the programme (i.e., self-help responsibilities, using first names, confidentiality, taping),
2. Group members' expectations were shared and discussed.

C. Expectations

1. Participants observed the following programme goals;
 - a). discriminate between assertive, unassertive, and aggressive behaviors;
 - b) develop belief systems which support their own personal rights and the rights of others;

- c) recognize and change their irrational thinking and self-statements;
- d) help to modify any resultant excessive anger, guilt, or anxiety;
- e) increase their repertoire of assertive behaviors through practice (Lange & Jakubowski, 1976).

D. Components

1. The group discussed the three components of assertive behavior that would be dealt with; thought, feeling, and behavior.

E. Etiology of Assertion Training

1. The intern gave two reasons for the development of present day Assertion Training; a) personal relationship began to be highly valued, and b) the range of socially acceptable behaviors has considerably widened.

F. Closure

1. The session was summarized, and discussion was encouraged.
2. Homework. Participants were asked to complete the Discrimination Test and also to try to note any interpersonal situations which they felt they tended to handle unsatisfactorily.

Session II

Materials Needed

1. Name tags,
2. Overhead projector and transparencies,
3. Handout on comparison of three types of behavior (assertive, aggressive, unassertive).

A. Introduction

1. Discussed past week. Let participants share satisfactory or unsatisfactory experiences.
2. Inhibition reducing exercise. Pretended to work together to jack up circus tent top.

B. Groups

1. The group discussed a rationale, including advantages and disadvantages, of using a group approach to Assertion Training.

C. Process Goals

1. The goals of Assertion Training and the means of achieving these goals were presented and discussed.

D. Discrimination

1. Participants discussed their responses on the Discrimination Test.
2. The terms assertion, unassertion, and aggression were defined. Participants were given a summary of comparisons between the types of behavior.

E. Nonverbal Communication

1. Participants discussed and role played demonstrations of effective and ineffective communication (i.e., eye contact, duration and loudness of speech, affect in speech, body stance).

F. Closure

1. Homework. Participants were encouraged to note and practice nonverbal components of communicating. Participants were asked to begin thinking about particular situations that they would like to work on during practice sessions.

The session was summarized, and discussion was encouraged.

Session III

Materials Needed

1. Handout - Basic Beliefs,
2. Handout - Socialization Messages,
3. Overhead projector and Transparencies.

A. Introduction

1. Discussed past week's experiences. Focused on observation and practice of nonverbal components of communication.

B. Cognitive Restructuring

1. Discussed irrational thoughts in relation to lack of reality testing. Discussed some examples.

C. Relaxation Training

1. Discussed difficulty with relaxing. Worked through progressive relaxation exercise utilizing muscle tension and relaxation.

D. Etiology of Nonassertion

1. Discussed reasons why people act nonassertively (i.e., deficient skills, failure to accept rights, mistaking unassertion for politeness).
2. Discussed consequences of acting nonassertively.

E. Socialization Messages

1. Provided and discussed handout on socialization messages which negatively affect assertion.

F. Basic Beliefs

1. Provided lists of basic beliefs which Lange and Jakubowski (1976) feel should be accepted before assertive responses can be generated.

Discussed basic beliefs.

G. Closure

1. Homework. Participants were told to develop two situations to work on at the next session.
2. Discussion.

Session IV

Materials Needed

1. Light panel for feedback responses.

A. Introduction

1. Discuss past week's experiences and homework.
2. Introduce the light panel for feedback responses with instructions on use.
3. Made participants aware of the need for active participation in practice and feedback.

B. Feedback

1. It was suggested that structured feedback begin with a positive statement about performances, and in general that criticism be constructive.

C. Self-assessment

1. Participants were asked to consider the following before and during behavioral rehearsal:
 - a) how important is this situation to me?
 - b) how am I likely to feel afterwards if I don't assert myself in the situation?
 - c) how much will it cost me to assert myself in this situation?

Sessions V, VI

A. Practice

Sessions IV, V, and VI were devoted to practice and evaluation. During these sessions group participants described situations in which they wanted to become assertive. Participants role played assertive responses, and feedback was given using the light panel followed by group discussion. As well role players evaluated their own assertive attempts, and if assertive attempts were not satisfactory role players were asked to imagine and describe how they thought the attempt would be bettered. The intern and other group members coached the role players until satisfactory performances were achieved.

The information concepts, and guidelines which were presented in the earlier sessions were constantly referred to (i.e., basic beliefs, rights) in shaping desired assertive responses to particular interpersonal situations. The group members followed practice by attempting for homework to assert themselves in real situations. Participants reported back to the group during subsequent sessions and there was further practice if necessary.

Group participants were asked to complete The College Self-Expression Scale at the end of Session VI.

Selection of Sample

In all, 20 subjects took part in this study. Ten subjects participated in the Assertion Training Programme, and composed the treatment group while ten subjects did not participate in the Programme during this period and composed the control group. Subjects were screened for unassertiveness by an interview with the intern and by completing The Rathus Assertiveness Schedule.

The purpose of the interviews was for the intern to determine if the particular concerns of prospective group members could have been best dealt with in the group setting. The intern suspected that individual counselling might have been necessary for some prospective clients. Alberti and Emmons (1970) pointed out that assertion training is more suitable for persons who experience situational aggression or nonassertion. However, those who experience aggression or nonassertion continually should seek individual, clinical help (Alberti & Emmons, 1970).

The Rathus Assertiveness Schedule (RAS) was an adjunct to the interview. It was used to confirm or disconfirm the intern's judgement of treatment suitability. The RAS had been demonstrated to be effective in distinguishing between assertive and nonassertive (either unassertive or aggressive) populations (Rathus, 1973).

A negative score on the RAS indicates nonassertion while; a positive score on the RAS indicates assertiveness. Nonassertive clients were deemed suitable for treatment. The score from the RAS was the determining measure for inclusion into the prospective client pool. Since the RAS does not make a distinction between aggression and nonassertiveness, it is possible that both aggressive and unassertive clients were included in both treatment and control groups.

All nonassertive clients were randomly assigned to treatment and control groups. The characteristics of the sample, before random assignment, were: 1) all members of the sample were unassertive, as measured by the pretest; 2) all members of the sample were attending postsecondary institutions.

Procedures for Implementation

The Assertion Training Programme lasted for six weeks. There was one two-hour session per week. The programme was advertised in the university student newspaper, through the university's closed circuit T.V. message monitor system, by pamphlet in university cafeterias, by posters throughout the campus, and to undergraduate psychology classes.

Counsellors at the University Counselling Centre were supplied with a description of the Assertion

Training Programme in the event that they felt that their clientele might benefit from such training.

The programme began three weeks after the Fall Semester registration period.

Rathus Assertiveness Schedule (RAS)

The Rathus Assertiveness Schedule was constructed by Spencer A. Rathus in 1973 (Rathus, 1973) and consists of 30 items. A number of the items were developed by Rathus, while others were based on Wolpe's (1969) and Wolpe and Lazarus' (1966) questionnaires for measuring assertiveness, from Allport's (1928) A-S Reaction Study, and from Guilford and Zimmerman's (1956) temperament survey (Rathus, 1973). Many of the items that Rathus developed were based on information ascertained from diaries "kept by two classes of college juniors and seniors. In them were recorded behaviors the student would have liked to exhibit but refrained from exhibiting because of fear of aversive social consequences" (p.400).

The author of this instrument saw its potential use "... in research that investigates the efficacies of various procedures for shaping assertive behavior and for obtaining pre- and post- measures of patients' assertiveness in clinical practice". (Rathus, 1973, p.406).

This instrument seemed appropriate because of the similarity between the study and Rathus' subject populations and it's recommended use as a screening device.

Reliability

Reliability was defined by Kerlinger as "the accuracy or precision of a measuring instrument" (Kerlinger, 1973). As a measure of its stability the Rathus Assertiveness Schedule was administered to 68 undergraduate males and females on two occasions, separate by eight weeks, to determine its test-retest reliability. This yielded a Pearson product moment correlation coefficient of 0.78 ($p < .01$) indicating a moderate to high stability of scores (Rathus, 1973).

To evaluate its internal consistency this schedule was administered to another 67 people; male and female. A Pearson product moment correlation between odd and even numbered items yielded a figure of 0.77 ($p < .01$) suggesting a moderate to high level of homogeneity of qualities measured (Rathus, 1973).

Validity

The first study to assess the validity of the RAS consisted of comparing scores from the RAS to scores from the Osgood, Suci, and Tannenbaum (1957) semantic differential schedule. The RAS was administered to 67 male and female subjects whom the test administrators knew. "RAS scores correlated significantly ($p < .01$) with

each of five scales comprising the assertiveness factor of the rating schedule: boldness ($r = .6124$), outspokenness (.6163), assertiveness (.5374) and confidence (.3294)" (Rathus, 1973, p. 402). Rathus stated, on the basis of the correlation, that "RAS scores serve as valid indicators of assertiveness in terms of the impressions they make on other people" (Rathus, 1973, p. 402). Furthermore, it was determined that results were not invalidated by socially desirable response set.

A second study of the validity of the RAS consisted of asking subjects questions which were directly related to the characteristic being measured, namely, assertiveness. Firstly, interrater reliability was determined to be quite high at 0.94 (Rathus, 1973). Forty-seven coed subjects who took the RAS were also confronted with five questions to measure their level of assertiveness in situations where outgoing, assertive behavior could be used profitably. The correlation between the two measures was 0.71 ($p < .01$). Rathus stated that "RAS scores are also valid in terms of impartial raters impressions of the behaviors that subjects report they would exhibit in specific social encounters" (Rathus, 1973, p. 403).

These findings indicate that the Rathus Assertiveness Schedule, although requiring more comprehensive validation studies, seems a sufficiently valid and reliable instrument for use with college and university populations.

College Self-Expression Scale (CSES)

The College Self-Expression Scale (CSES) was developed by John Galassi, James De Lo, Merna Galassi, and Sheila Bastien in 1974 at West Virginia University. This 50 item scale was developed for the purpose of measuring assertiveness in college students. The types of assertion that the scale measures include positive assertiveness, negative assertiveness, and self-denial. The items from the scale deal with interpersonal transactions involving family, strangers, business relations, authority figures, and the like and opposite sex peers (Galassi, et al., 1974).

The CSES was developed specifically "to serve diagnostic purposes and to measure change in assertive behavior" (Galassi, et al., 1974, p. 165).

The items from the scale were derived from previous efforts of Lazarus (1971), Wolpe (1969), and Wolpe and Lazarus (1969) (Galassi, et al., 1974).

The intern felt that this scale was of particular value to university and college counsellors due to its developmental purposes.

Reliability

The reliability of this instrument was tested by the test-retest method. Four groups, totaling 261

subjects were administered the CSES on two occasions. The two occasions were separated in time by two weeks. Pearson product moment correlations of between 0.89 and 0.90 were found. This indicated a high level of stability of measurement.

Validity

Two types of validity were computed on the CSES; construct validity and concurrent validity. Construct validity was assessed by correlating the CSES with 24 scales of the Gough Adjective Check List. The College Self-Expression Scale correlates positively and significantly with the following Adjective Check List Scales: Number checked ($r = 0.33$), Defensiveness ($r = 0.35$), Favourable ($r = 0.30$), Self-confidence ($r = 0.46$), Achievement ($r = 0.34$), Dominance ($r = 0.46$), Intraception ($r = 0.22$), Heterosexuality ($r = 0.46$), Exhibition ($r = 0.48$), Autonomy ($r = 0.24$), and Change ($r = 0.43$) (Galassi, et al., 1974). These characteristics typify assertiveness. The nonsignificant correlation between Aggression and the CSES ($r = 0.17$) was of special importance since aggressiveness is often mistaken for assertiveness.

Although significant, the value of the coefficients suggest moderate construct validity. However, the authors feel that it is acceptable as a global measure and it has been widely used for this purpose.

Concurrent validity was obtained by correlating 121 CSES scores with assertiveness ratings by others. The correlation between scores and ratings was 0.19 ($p < .04$). This low correlation may have been due to lack of interaction between raters and CSES takers.

The authors indicated that "the scale can be utilized to determine quickly the type of assertive responses which the client fails to emit, as well as the interpersonal situations in which appropriate assertiveness is not forthcoming. For those who wish to do research on assertive training, the CSES is a valuable instrument for initial subject selection and for the measurement of change" (Galassi, et al., 1974, p. 171). It was felt that this instrument would be of great assistance to subjects and therapists alike in determining areas to concentrate assertive training efforts.

The authors concluded that the findings of the normative studies indicated clearly the appropriateness of this scale for researching the utility of assertion training, measuring behavioral and cognitive changes in assertiveness levels, and determining the type of assertive responses which clients fail to emit. (Galassi, et al., 1974).

Particular mention is made of the wide range of assertive behaviors which this scale addresses; positive assertion, negative assertion, and self-denial.

"Positive assertiveness consists of expressing feelings of love, affection, admiration, approval and agreement. Negative assertions include expressions of justified feelings of anger, disagreement, dissatisfaction and annoyance; whereas, self-denial includes over-apologizing, excessive interpersonal anxiety, and exaggerated concern for the feelings of others" (Galassi, et al., 1974, p. 168).

The Rathus Assertiveness Schedule (RAS) and The College Self-Expression Scale (CSES) were both derived or modified from the work of Lazarus and Wolpe (Galassi, et al., 1974; Rathus, 1973). Both of these measures of assertiveness were designed for use with student populations. These measures were also suggested as being appropriate for research, clinical practice, selection of subjects, and for measuring change in level of assertiveness (Galassi, et al., 1974; Rathus 1973). It was felt that this evidence plus the reliability and validity of the instruments made these measures quite similar in the behavior being assessed and suitable for the purpose for which they were intended. Meaningful results could therefore be obtained from scores derived from these instruments.

Research Design

The research format used in this study to investigate the effectiveness of a group approach to assertion training with university students was a pre-test - posttest control group design (Campbell & Stanley 1963, p.13). This design takes the following form:

R	O_1	X	O_2	Treatment
R	O_3		O_4	Control

Symbols

The symbols R indicate that subjects were randomly assigned to both the treatment and control groups. The symbols O_1 and O_3 refer to the first observation of treatment and control groups; the scores from the pre-test, The Rathus Assertiveness Schedule. O_2 and O_4 symbols refer to the second observation of the treatment and control groups; the scores from the posttest, the College Self-Expression Scale. The symbol X indicates that the treatment group received the assertion training while the control group did not.

The pre-test - posttest control group design has advantages and limitations as a research methodology. Because the participants were randomly selected for placement into the treatment and control groups it was

accepted that the history and maturation effects were manifested equally in both groups. The random assignment also meant that selection differences and regression effects were also equalized. There are no internal validity problems with this design, however this design does present problems of external validity.

External validity was more difficult to control. In particular, it limits generalizability of results since there is no separation of the potential contribution of the group trainer versus the programme itself to any training outcomes. They remain essentially confounding variables. Also, the possible sensitizing effect of pre-testing is not controlled for. A more rigorous design (Solomon four - group design, Kerlinger, 1964) was initially intended; however, failure to solicit a sufficiently large sample made it necessary to utilize this less demanding methodology.

Pre-testing participants allowed only unassertive persons to enter the groups. While it is generally felt that pre-testing sensitizes participants to any purposeful treatment (Campbell & Stanley, 1963), Kerlinger notes that "testing is an accepted and normal part of most school and college situations, and as such, should have no great sensitizing effect" (Kerlinger, 1964, p.337).

The limitations cited did not make the findings meaningless. Indeed, the sample to which the treatment was given is a small part of a larger population sharing similar characteristics and any significant results can be generalized to this population.

Statistical Analysis

The relatively low numbers of subjects in both the treatment and control groups (N 's = 10) necessitated the use of a nonparametric statistic. This statistic, which utilizes ordinal or nominal data, rather than interval or ratio data was deemed appropriate for researching change in the dependent variable with small groups.

It was pre-determined that the members of both treatment and control groups were unassertive and the researcher was interested in the change in level of assertiveness. The nonparametric statistic chosen, the Mann-Whitney U , permitted an indication of change and direction.

The formula for calculating the value of U is:

$$U = N_1 N_2 + \frac{N_1 (N_1 + 1)}{2} - R_1$$

or, equivalently,

$$U = N_1 N_2 + \frac{N_2 (N_2 + 1)}{2} - R_2$$

where R_1 = sum of the ranks assigned to group whose sample size is N_1 , R_2 = sum of the ranks assigned to group whose sample size is N_2 " (Siegel, 1956, p. 120).

Results

The treatment and control groups' assertion scores are presented in Table 1. As can be seen from Table 1, the mean pre-test scores for the treatment and control groups were -34.2 and -30.6 respectively. This Table also shows that the mean posttest scores for treatment and control groups were +13.6 and -27.3 respectively.

Participation at the sessions was good. Of the ten subjects in the Treatment group seven participants attended all sessions, two participants missed one session each, and one participant missed two sessions. This latter group member participated minimally when present and change in assertiveness as measured by the CSES was nonsignificant.

Table 2 presented the ranges, medians, 25th and 75th percentiles of pre-test and posttest levels of assertiveness for both Treatment and Control groups.

A Mann-Whitney U test was performed on the pre-test and posttest scores. Table 3 showed the calculation of the test comparing Treatment and Control pre-test scores. There was no significant difference in the level of assertiveness between the Treatment

Table 1

Raw Scores of Treatment and Control Groups on Assertiveness Scales

Subject	Treatment Pre-test (RAS)	Treatment Posttest (CSES)	Subject	Control Pre-test (RAS)	Control Posttest (CSES)
1	-36	-47	11	-46	-33
2	-48	+ 4	12	-29	-22
3	-42	+17	13	-30	+10
4	-49	+35	14	- 1	-12
5	-49	+ 9	15	-26	- 8
6	-41	+27	16	-26	-37
7	- 3	+18	17	-34	-58
8	-28	+31	18	-46	-61
9	-26	+ 3	19	-47	-30
10	-20	+39	20	-21	-22
Σ	-342	+136		-306	-273
\bar{X}	-34.2	+13.6		-30.6	-27.3
N = 10					

Note. RAS = Rathus Assertiveness Schedule.

CSES = College Self-Expression Scale.

Table 2

Ranges, Medians, 25th, and 75th Percentiles of Pre-test and Posttest Levels
of Assertiveness of Treatment and Control Groups

	Pre-test (Rathus Assertiveness Schedule)		Posttest (College Self-Expression Scale)	
	TREATMENT	CONTROL	TREATMENT	CONTROL
Range	-49 to -3	-47 to -1	-47 to +39	-61 to +10
75th Percentile	-26.0	-25.75	+31.0	-12.0
Median	-40.5	-29.50	+17.5	-29.5
25th Percentile	-48.0	-45.75	+4.5	-37.0

Note. N for each group = 10

Table 3

Statistical Analysis of Pre-test Scores of Assertiveness
utilizing the Mann-Whitney U Test for Independent Samples

<u>Treatment</u>	<u>R₁</u>	<u>Control</u>	<u>R₂</u>
-49	1.5	-47	4
-49	1.5	-46	5.5
-48	3	-46	5.5
-42	7	-34	10
-41	8	-30	11
-36	9	-29	12
-28	13	-26	15
-26	15	-26	15
-20	18	-21	17
- 3	19	- 1	20
	95		115

$$U_1 = N_1 N_2 + \frac{N_1 (N_1 + 1) - R_1}{2}$$

$$= 10 \times 10 + \frac{10(10+1) - 95}{2}$$

$$= 60$$

$$N_1 = 10$$

$$U_2 = N_1 N_2 + \frac{N_2 (N_2 + 1) - R_2}{2}$$

$$= 10 \times 10 + \frac{10(10+1) - 115}{2}$$

$$= 40 \text{ Not Significant}$$

$$N_2 = 10$$

and Control groups.

Table 4 showed the calculation of the test comparing Treatment and Control posttest scores. There was a significant ($p < .01$) difference between Treatment and Control posttest scores, indicating that the Treatment group increased significantly in the level of assertiveness and that the Control group remained unchanged.

Discussion

The findings indicated that unassertive university students increased their levels of assertiveness after twelve hours of Assertiveness Training over a six-week period. Assertion Training was comprised of modeling, coaching, feedback, and practice was proven to be effective in helping university students to increase their level of assertiveness.

Participants showed significant improvement in their ability to express themselves in situations in which they previously felt ineffective. Participants also showed an improved ability to evaluate their own and others behaviors as they related to assertiveness. Reports of successfully completed real-life assertive exercises resulted in personally perceived increased levels of self-confidence.

Table 4

Statistical Analysis of Posttest Scores of Assertiveness utilizing the Mann-Whitney U Test for Independent Samples

Treatment	R ₁	Control	R ₂
-47	3	-61	1
+ 3	11	-58	2
+ 4	12	-37	4
+ 9	13	-33	5
+17	15	-30	6
+18	16	-22	7.5
+27	17	-22	7.5
+31	18	-12	9
+35	19	- 8	10
+39	20	+10	14

144

66

$$U = \frac{N_1 N_2 + N_1(N_1 + 1) - R_1}{2}$$

$$= \frac{(10 \times 10) + \frac{10(10+1)}{2} - 144}{2}$$

= 11 Significant p < .01

N₁ = 10

$$U' = \frac{N_1 N_2 + N_2(N_2 + 1) - R_2}{2}$$

$$= \frac{10 \times 10 + \frac{10(10 + 1)}{2} - 66}{2}$$

= 89

N₂ = 10

CHAPTER III

CONCLUSIONS AND RECOMMENDATIONS

Internship Conclusions

The internship undertaken at the Memorial University Counselling Centre proved to add substantially to the intern's levels of competence and confidence. The intern's competence was increased through the participation in counselling activities which were not part of the academic portion of the Master's programme in Educational Psychology. These activities included a) conducting a research study b) administering, scoring, and interpreting tests of interest and aptitude, c) career counselling, d) conducting relaxation training programmes, and e) investigating with other counsellors new counselling strategies. The intern's confidence was added to by a) evaluative feedback on both individual and group counselling activities by supervisors and counsellors, b) consultations before and after intervention strategies had been implemented, c) instructive dialogues between the intern and the supervisors concerning professional counselling issues, and d) acceptance of the intern by those at the setting as a professional and, in general, having a variety of individuals available as professional role models.

There were many incidental things learned from the internship. The exposure to professional counsellors gave the intern an operational view of the ethical standards of behavior appropriate for counsellors. Seeing these standards applied helped the intern to internalize various concerns for clients; i.e. confidentiality, respect, trust.

The intern also internalized the importance of research; its purpose and design. Research came to be viewed as an integral part of programme development and an essential element of professional accountability.

As a result of this internship experience there is a stronger commitment to the importance of thoroughly understanding the theoretical assumptions and procedures of particular behavior change strategies. An additional benefit was an increased awareness of the need for and value of professional consultation in the ongoing development of professional competence.

In the broadest sense the internship resulted in a keener sense of professional identity and confidence.

Recommendations

The intern deems it appropriate to make recommendations for others when considering the internship as an option for the Master's degree. The intern recommends:

1. those who intend to become counselling practitioners might consider fully the

potential positive benefits of participating in a professionally supervised internship,

2. potential counselling interns might consider the benefits of doing applied research (i.e., understanding the practical difficulties associated with putting theory into practice, and opportunities for self-evaluation),
3. students are reminded that the counselling internship can offer professional experience under the supervision of professionally competent role models.

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Appendix A: Modified Rathus Assertiveness Schedule

MODIFIED RATHUS ASSERTIVENESS SCHEDULE

DIRECTIONS: Indicate how each of the following statements best describes you by using the code given below.

- +3 extremely descriptive of me
- +2 quite descriptive of me
- +1 slightly descriptive of me
- 1 slightly nondescriptive of me
- 2 quite nondescriptive of me
- 3 extremely nondescriptive of me

- ___ 1. Most people seem to be more aggressive and assertive than I am.*
- ___ 2. I have hesitated to talk to students of the opposite sex outside of class because of "shyness".*
- ___ 3. When the food served at a restaurant or Drive-In is not the way I want it, I complain about it to the waiter or waitress.
- ___ 4. I am careful to avoid hurting other people's feelings, even when I feel that I have been hurt.*
- ___ 5. If a salesman has gone to considerable trouble to show me something which is not what I want, I have a difficult time in saying "No".*
- ___ 6. When I am asked to do something, I insist upon knowing why.
- ___ 7. There are times when I look for a good, strong argument.
- ___ 8. I work to get ahead as well as most students in my position.
- ___ 9. To be honest, people often take advantage of me.*
- ___ 10. I enjoy starting conversations with new people and strangers.
- ___ 11. I often don't know what to say to good looking persons of the opposite sex.*

- ___ 12. I will hesitate to make phone calls to places of business.*
- ___ 13. I would rather apply for a job by writing letters than by going through with personal interviews.*
- ___ 14. I find it embarrassing to return something I bought.*
- ___ 15. If a close and respected relative were annoying me, I would hide my feelings rather than express my annoyance.*
- ___ 16. I have avoided asking questions for fear of sounding stupid.*
- ___ 17. During an argument I am sometimes afraid that I will get so upset that I will shake all over.*
- ___ 18. If a well known person makes a statement which I think is incorrect, I will have the others hear my point of view as well.
- ___ 19. I avoid arguing over prices with clerks and salesmen.*
- ___ 20. When I have done something important or worthwhile, I manage to let others know about it.
- ___ 21. I am open and honest about my feelings.
- ___ 22. If someone has been spreading false and bad stories about me, I see him (her) as soon as possible to "have a talk" about it.
- ___ 23. I often have a hard time saying "No".*
- ___ 24. I tend to bottle up my emotions rather than make a scene.*
- ___ 25. I complain about poor service in a restaurant and elsewhere.
- ___ 26. When I am given a compliment, I sometimes just don't know what to say.*
- ___ 27. If some people near me in a theatre were talking rather loudly, I would ask them to be quiet or to go some other place and sit.

- ___ 28. Anyone attempting to push ahead of me in a line
is in for a good fight.
- ___ 29. I am quick to express an opinion.
- ___ 30. There are times when I just can't say anything.*

Note: Total score obtained by adding numerical responses
to each item, after changing the signs of reversed
item.

*Reversed item.

Appendix B: The College Self-Expression Scale

THE COLLEGE SELF-EXPRESSION SCALE

The following inventory is designed to provide information about the way in which you express yourself. Please answer the questions by responding in the space provided; 0-4. (almost Always or Always, 0; Usually, 1; Sometimes, 2; Seldom, 3; Never or Rarely, 4). Your answer should reflect how you generally express yourself in the situation.

1. Do you ignore it when someone pushes in front of you in line?
2. When you decide that you no longer wish to date someone, do you have marked difficulty telling the person of your decision?
3. Would you exchange a purchase you discover to be faulty? (R)
4. If you decide to change your major to a field which your parents will not approve, would you have difficulty telling them?
5. Are you inclined to be over-apologetic?
6. If you were studying and if your roommate were making too much noise, would you ask him to stop? (R)
7. Is it difficult for you to compliment and praise others?
8. If you are angry at your parents, can you tell them? (R)
9. Do you insist that your roommate does his fair share of the cleaning? (R) (her)
10. If you find yourself becoming fond of someone you are dating, would you have difficulty expressing these feelings to that person?
11. If a friend who has borrowed \$5.00 from you seems to have forgotten about it, would you remind this person? (R)

12. Are you overly careful to avoid hurting other people's feelings.
13. If you have a close friend whom your parents dislike and constantly criticize, would you inform your parents that you disagree with them and tell them of your friend's assets? (R)
14. Do you find it difficult to ask a friend to do a favor for you?
15. If food which is not to your satisfaction is served in a restaurant, would you complain about it to the waiter? (R)
16. If your roommate without your permission eats food that he knows you have been saving, can you express your displeasure to him? (R)
17. If a salesman has gone to considerable trouble to show you some merchandise which is not quite suitable, do you have difficulty in saying no?
18. Do you keep your opinions to yourself?
19. If friends visit when you want to study, do you ask them to return at a more convenient time? (R)
20. Are you able to express love and affection to people for whom you care? (R)
21. If you were in a small seminar and the professor made a statement that you considered untrue, would you question it? (R)
22. If a person of the opposite sex whom you have been wanting to meet smiles or directs attention to you at a party, would you take the initiative in beginning a conversation? (R)
23. If someone you respect expresses opinions with you strongly disagree, would you venture to state your own point of view? (R)
24. Do you go out of your way to avoid trouble with other people?
25. If a friend is wearing a new outfit which you like, do you tell that person so? (R)

- 26. If after leaving a store you realize that you have been "short-changed," do you go back and request the correct amount? (R)
- 27. If a friend makes what you consider to be an unreasonable request, are you able to refuse? (R)
- 28. If a close and respected relative were annoying you, would you hide your feelings rather than express your annoyance?
- 29. If your parents want you to come home for a weekend but you have made important plans, would you tell them of your preference? (R)
- 30. Do you express anger or annoyance toward the opposite sex when it is justified? (R)
- 31. If a friend does an errand for you, do you tell that person how much you appreciate it? (R)
- 32. When a person is blatantly unfair, do you fail to say something about it to him?
- 33. Do you avoid social contacts for fear of doing or saying the wrong thing?
- 34. If a friend betrays your confidence, would you hesitate to express annoyance to that person?
- 35. When a clerk in a store waits on someone who has come in after you, do you call his attention to the matter? (R)
- 36. If you are particularly happy about someone's good fortune, can you express this to that person? (R)
- 37. Would you be hesitant about asking a good friend to lend you a few dollars?
- 38. If a person teases you to the point that it is no longer fun, do you have difficulty expressing your displeasure?
- 39. If you arrive late for a meeting, would you rather stand than go to a front seat which could only be secured with a fair degree of conspicuousness?

- ___ 40. If your date calls on Saturday night 15 minutes before you are supposed to meet and says that she (he) has to study for an important exam and cannot make it, would you express your annoyance? (R)
- ___ 41. If someone keeps kicking the back of your chair in a movie, would you ask him to stop? (R)
- ___ 42. If someone interrupts you in a middle of an important conversation, do you request that the person wait until you have finished? (R)
- ___ 43. Do you freely volunteer information or opinions in class discussions? (R)
- ___ 44. Are you reluctant to speak to an attractive acquaintance of the opposite sex?
- ___ 45. If you lived in an apartment and the landlord failed to make certain necessary repairs after promising to do so, would you insist on it? (R)
- ___ 46. If your parents want you home by a certain time which you feel is much too early and unreasonable, do you attempt to discuss or negotiate this with them? (R)
- ___ 47. Do you find it difficult to stand up for your rights? (R)
- ___ 48. If a friend unjustifiably criticizes you, do you express your resentment there and then? (R)
- ___ 49. Do you express your feelings to others? (R)
- ___ 50. Do you avoid asking questions in class for fear of feeling self-conscious?

(R) = Reversed scored.

Appendix C: Counsellor Evaluation Rating Scale

COUNSELLOR EVALUATION RATING SCALE

Name of Counsellor Code #

Level of Experience Date

Below are listed some statements which are related to evaluation in supervising a counselling experience.

Please consider each statement with reference to your knowledge of the counsellor rated.

Mark each statement in the left hand blank according to how strongly you agree. Do not mark in parentheses.

Please mark every statement. Write in +3, +2, +1, or -1, -2, -3, to represent the following:

+3	I strongly agree	-1	I slightly disagree
+2	I agree	-2	I disagree
+1	I slightly agree	-3	I strongly disagree

- **C()..1. Demonstrates an interest in client's problems.
 C(*)..2. Tends to approach clients in a mechanical, perfunctory manner.
 S(*)..3. Lacks sensitivity to dynamics of self in supervisory relationship.
 S()..4. Seeks and considers professional opinion of supervisors and other counsellors when the need arises.
 C(*)..5. Tends to talk more than client during counselling.
 C()..6. Is sensitive to dynamics of self in counselling relationships.
 S(*)..7. Cannot accept constructive criticism.
 C()..8. Is genuinely relaxed and comfortable in the counselling session.
 C()..9. Is aware of both content and feeling in counselling sessions.
 C()..10. Keeps appointments on time and completes supervisory assignments.
 S()..11. Can deal with content and feeling during supervision.

- C(*) .12. Tends to be rigid in counselling behavior.
- C(*) .13. Lectures and moralizes in counselling.
- S() .14. Can critique counselling tapes and gain insights with minimum help from supervisor.
- S() .15. Is genuinely relaxed and comfortable in the supervisory session.
- S() .16. Works well with other professional personnel (e.g. teachers, counsellors, etc.)
- C() .17. Can be spontaneous in counselling, yet behavior is relevant.
- C(*) .18. Lacks self-confidence in establishing counselling relationships.
- S() .19. Can explain what is involved in counselling and discuss intelligently its objectives.
- S() .20. Is open to self-examination during supervision.
- C() .21. Can express thoughts and feelings clearly in counselling.
- C() .22. Verbal behavior in counselling appropriately flexible and varied, according to the situation.
- S() .23. Lacks basic knowledge of fundamental counselling principles and methodology.
- S() .24. Participates actively and willingly in supervisory sessions.
- S(*) .25. Is indifferent to personal development and professional growth.
- C() .26. Applies a consistent rationale of human behavior to counselling.
- () .27. Can be recommended for a counselling position without reservation.

Recommend Grade —
Comments:

