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Global attraction as a predictor of terminating
and remaining in counseling

by

Donald Alan Rosen

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Introduction

Research on psychotherapy has produced countless studies of the process of treatment as well as the outcomes which result. Bergin and Garfield (1971) have summarized much of this literature. One outcome of psychotherapy that received no attention from Bergin and Garfield and little mention elsewhere (e.g., Meltzoff & Kornreich, 1970) is premature termination from counseling. Although this variable has received little attention it is, nonetheless, a pervasive problem in all forms of therapy (Baekland & Lundwall, 1976).

Studies measuring positive gains of clients due to therapy have, in general, relied on counselors' or raters' perceptions of the degree to which clients have improved on any given dimension. Early termination differs from other outcome measures. It is a behavioral summarization of the phenomenological value of services being offered to a particular client. Simply put, premature termination behaviorally defines how clients feel about their therapy (Heine & Trossman, 1960).

The dimensionality of termination as a conglomerate of many variables has been ignored. However, the complexity of early termination as a summary variable has been recognized. Meltzoff and Kornreich (1970) have commented, for example,

"The problem of who survives in treatment is linked with many other issues in the study of

psychotherapy. It is concerned with criteria of success, with characteristics of the patient and therapist, with the effects of different settings and kinds of treatment, with prediction problems, with the ultimate fate and state of those who do not remain and those who do, and with the issue of duration of treatment" (p. 358).

An important variable linked with premature termination is attraction to the therapy situation. As Lido (1957) defines it, attraction "...is the resultant forces acting on the patient to maintain his relationship with the therapist" (p. 35). The implicit assumptions underlying this statement are that attraction is not a unitary dimension and that it is the result of interpersonal interaction. The client must, therefore, remain in counseling to obtain its benefits. Frank, Gliedman, Imber, Nash, and Stone (1957) have emphasized:

"The responsiveness of a patient to a given form of psychotherapy involves two components: his staying in treatment and his improvement under it. The first is necessary, but not sufficient for the second--a patient cannot improve under psychotherapy unless he remains in treatment" (p. 284).

Thus, it would seem that, if attraction holds clients in therapy and premature termination is a client's statement of the value of his or her treatment, the two, attraction and premature termination, are related.

While dropping out of counseling prematurely appears, on the surface, to be a concrete variable, the definition has varied from setting to setting. Garfield (1963) set a

criterion of less than seven therapy sessions as the definition of early termination. Several authors have defined dropouts as those who attended less than five sessions (Gliedman, Stone, Frank, Nash & Imber, 1957; Hiler, 1958; Lief, Lief, Warren & Heath, 1961; Lorr, Katz & Rubenstein, 1958; Kadushin, 1958; Reiss & Brandt, 1965; Rosenthal & Frank, 1958). These studies have used VA patients and mental health center clients.

Other populations have also been studied. Kirk and Headley (1950), in the first study of counseling center clients, defined dropouts as those who failed to return for more than two sessions. Research based on psychoanalytic treatment services generally defined terminators as those who dropped out after longer periods of time, often as long as six months (McNair, Lorr & Callahan, 1963; Taulbee, 1958). Still others included those clients who failed to return for appointments regardless of the prior duration of treatment (Meyers & Auld, 1955; Fiester, Mahrer, Giambra & Ormiston, 1974). When an upper limit has been set as a classification criterion it has usually been an arbitrary decision made by the experimenter (Brandt, 1965; Meltzoff & Kornreich, 1970).

A major shortcoming in much of the research using termination as an outcome has been the classification of terminators by the agency under study. Normal termination has been viewed as a joint decision by both counselor and client

that therapy is complete, although, ultimately, the counselor's report of that termination was used to classify (Meltzoff & Kornreich, 1970). Early or premature termination, as was described above, has been defined by the failure of clients to return or to attend a given number of sessions.

Typically, clients who have been categorized as dropouts had not been contacted to verify whether or not they felt they made gains while in treatment (Meltzoff & Kornreich, 1970). For this reason, when comparing studies on terminators, the definition of early termination must be noted. Where clients may qualify as early terminators beyond the first few sessions it may be argued that some of these clients may have gained positive outcomes, as they perceived them, and unilaterally terminated therapy feeling they had improved (Meltzoff & Kornreich, 1970).

A small amount of research has addressed the issue of immediate client gains in therapy. Kirtner and Cartwright (1958a) studied short- and long-term success and termination and found some clients who made positive gains in short periods of time. Heilbrun (1974) has reported cases of female clients who come to therapy for only one or two sessions simply for catharsis. These clients left therapy feeling better but their therapists tended to see them as dropouts. In studying mental health center clients, Fiester, et al.

(1974) distinguished between successful and unsuccessful (terminating) short-term clients, although the number of successful short-term clients was small. Finally, Frank, Gliedman, Imber, Nash and Stone (1959) followed terminators and remainers after their therapy. Both groups reported the same percentage of decrease in their initial symptoms. In all of these studies the researcher determined which clients were classified as dropouts.

Most studies of early termination have ignored its use as a phenomenological and idiographic measure of the client-counselor relationship. Research on those who terminate early has focused almost exclusively on client variables (Fiester & Rudestam, 1975). The major emphasis of this literature has been to determine which client variables will predict who will drop out. An important impetus for this research has come from the growth of community mental health agencies and from the growing use of all mental health facilities:

"Most of the studies on continuance appear to have been stimulated not only by an acute awareness of the widening discrepancy between the supply and demand for psychiatric service, but also by the less explicit aim of preselecting patients who can adapt to a particular therapeutic model" (Heine & Trossman, 1960, p. 275).

The earliest studies of terminators focused on basic demographic variables of the client. Socio-economic status has been found to be a good predictor of dropouts

(Fiester et al., 1974). Imber, Nash and Stone (1955) found that, holding experience level of therapists constant, lower socio-economic clients were more likely to terminate than others. Rosenthal and Frank (1958) also related dropping out to lower socio-economic status while race, sex, age, and diagnosis of client was not related to early termination. Working with VA patients, Sullivan, Miller and Smelser (1958) found a positive correlation between socio-economic status and remaining in therapy for one sample, but did not cross-validate this finding with a second sample.

While many would accept socio-economic status as a demographic variable, perhaps this variable, as a predictor of termination, may be a measure of similarity between therapist and client. In general, lower socio-economic status clients are less intelligent, less verbal, more likely to expect answers to their problems given directly by the therapist, and more likely to drop out of counseling (Hollingshead & Redlich, 1958; Overall & Aronson, 1963). On the other hand, therapists tend to have higher education and occupational levels, be more verbal, and expect clients to participate in their therapy (Meltzoff & Kornreich, 1970).

Two studies of termination suggest that socio-economic status is not the critical variable in determining who will terminate. Rather, socio-economic status is a summary measure of similarity that affects interpersonal attraction in

the therapeutic dyad. Hollingshead and Redlich (1958) reported that in dyads that were more similar in socio-economic status the therapist reported more positive feelings towards the client. Lief et al. (1961) found that in their clinic, where therapists were psychiatric residents and clients were mainly university students, the dropout rate was extremely low, six percent.

Termination has also been viewed as the result of specific client personality variables which are harmful to the counseling process. Dengrove and Kutash (1950) stated that clients who drop out of counseling are poorly motivated and simply not ready to accept therapy. Lipkin (1954) has also found a client's motivation for therapy to be important in determining whether a client will remain in therapy.

Clients with histories of acute distress were found to terminate more frequently than those whose problems were of a longer duration (Frank et al., 1957). This is consistent with findings that clients who make appointments but fail to appear for their first counseling interview were more impulsive (Kirk & Austin, 1976). Frank et al. (1957) also found clients who terminated early tended to be less suggestible. Terminators have also been found to be more authoritarian, less self-dissatisfied, and less likely to report anxiety (Lorr et al., 1958).

Finally, Schiller (1976), in a study of two university

counseling centers, found client beliefs in the effectiveness of counseling, their perceptions of the counseling service, and information they have regarding the effectiveness of the counseling service can distinguish terminators from remainers. Remainers were significantly more positive in their ratings of the counseling centers on these dimensions. The findings were consistent across both settings.

The last major approach to termination focusing on client variables has been its prediction via test indicators. Rorschach scores have been used to predict termination. Kotkov and Meadow (1953) found the total number of Rorschach responses to be related to termination. Auld and Eron (1953) replicated this finding but felt that the number of Rorschach responses measured motivation to cooperate and/or intelligence of the client. To support this idea they found a high positive correlation between the number of Rorschach responses and scores on the Wechsler-Bellvue Intelligence Scale. Higher elevations in scales of the MMPI have also been shown to predict terminators (Taulbee, 1958).

Beyond the use of standard diagnostic instruments to predict termination, two other instruments specific to the prediction of termination must be noted. The Terminator-Remainer Battery was created by Lorr et al. (1958). McNair et al. (1963) found that those clients who were predicted as terminators by this test exhibited certain personality

characteristics, less reported anxiousness, and more anti-social behavior. Heilbrun (1961) used the Needs Scale from the Gough Adjective Check List (Gough, 1960) to establish a Readiness for Counseling Scale and found it very accurate at predicting those who terminate (Heilbrun & Sullivan, 1962).

In addition to predicting termination by demographic, personality, and test score variables of clients, a number of other variables have been related to termination. Reiss and Brandt (1965) have found that many applicants to a given mental health center had applied to several agencies for help, terminating at one agency when they were accepted for treatment by a more preferred treatment center. Lack of transportation, inability to take time from work, and lack of babysitting facilities have prompted some clients to terminate (Garfield, 1963). Therapists leaving an agency was also found to be a factor in client terminations (Strupp, Fox & Lesser, 1969).

Regardless of the type of variables used to predict terminators, the problem these variables have presented are the same. Although these variables may predict those clients who will drop out, they do not give any information which would be useful in restructuring the counseling interaction so that counseling would be more attractive to the client. So, for example, Heilbrun's (1961) scale could predict that a given client would not be ready to participate

in counseling as it is normally offered, but what might be done for clients who, for his or her own reasons has felt the need to apply for counseling, is not clear.

An assumption that follows from these methods of predicting termination is that the client is somehow at fault for his or her inability to take advantage of services as they are offered (e.g., Dengrove & Kutash, 1950). However, as Heine and Trossman (1960) have noted,

"...it should not be overlooked that the implicit assignment of responsibility for therapeutic failures to patients alone has no rationale other than practical convenience and, perhaps, professional pride. That is to say, there is little justification to be found in published research for assuming that the thirty to sixty-five percent of applicants to psychiatric clinics who discontinue early in the course of therapy are untreatable. All that can be said is that this proportion of patients typically cannot make use of the services in the form in which they are most commonly offered. Setting expedience aside, one must entertain the hypothesis that therapists share the responsibility for early and premature terminations" (p. 276).

Although the focus of termination literature has been the prediction of terminators from demographic and personality variables, many of the same studies have stressed the importance of measuring the interpersonal relationship between therapist and client in relation to termination. Frank et al. (1957), while attempting to predict termination using client variables, stressed that the response a client makes to therapy depends on the interaction of a par-

ticular therapist with a particular client. Kirtner and Cartwright (1958a) called for future studies to focus on the interaction of client and counselor.

In studying the effects of sex of client and sex and experience level of counselor on the counseling process, Hill (1975a) found that counselors acted differently with different clients and this change in behavior affected the quality of the interaction. This study does not directly address the issue of termination. It does, however, suggest that counselor and client behavior does not exist in a vacuum, but rather is an interactive process with each participant influencing the other.

Summarizing the possible approaches to the study of counseling process, Hunt, Ewing, LaForge and Gilbert (1959) have stated:

"If the quality of the counselor-client relationship is as important a factor in psychotherapy as it is believed to be, we should expect measures of this relationship to be correlated with therapeutic outcome" (p. 52).

Research which focuses on the quality of the client-counselor interaction with termination as an outcome is scarce, relative to other kinds of termination studies. Kirk and Headley (1950), studying dropouts from a university counseling service, have pointed to the importance of individual differences in the interaction of counselor and client:

"It is also impossible to know whether a particular case in which a counselee exhibited hostility, anxiety, aggression, fear, lack of responsibility, etc., a different counselor, or the same counselor at a different time, would have handled the situation in a manner sufficiently different to establish the kind of relationship which would have caused the counselee to continue" (p. 389).

Other studies have looked more closely at the client-counselor dyad in relationship to termination. In a study of interviewer anger, Salzman, Shader, Scott and Binstock (1970) found that feeling anger towards clients in initial interviews was positively correlated with clients dropping out of therapy. Additional analyses showed that anger was produced as a result of counselor-client interaction rather than due to factors inherent in either party alone. Similarly, clients who perceived their relationship with their therapist to be bad, relative to other members in group therapy, tended to drop out (Parloff, 1961). Fiester and Rudestam (1975), in a factor analytic study of termination, found that the interaction of counselor and client was more important in determining who would drop out than client or counselor variables alone.

Two studies found interactions between certain client and counselor types. Hiler (1958) reported that warm counselors were better able to keep "unproductive" clients in counseling while competent therapists were better able to keep "productive" clients in treatment. Heilbrun (1974)

found low-readiness female clients were more likely to drop out of counseling when seen by a non-directive therapist but more likely to stay when exposed to more directive therapy.

Some studies, then, have shown that certain dimensions of the relationship between therapist and client are an important part of the client's decision to terminate or remain in therapy. Qualities of a relationship which serve to maintain that relationship are components of attraction (Lido, 1957). Another body of literature has examined the effects of many components of attraction and their influence on psychotherapeutic outcomes.

Empathy must be considered as one of the prime components of attraction. Rogers (1975) has recently summarized the research findings on empathy. He concluded that therapists who wish to be "ideal" feel that they must become more empathic. Empathy is related to the amount of self-exploration achieved by the client. Rogers also found that successful outcome is predicted by empathy exhibited early in the therapy process. Truax and Mitchell (1971) further report that high levels of facilitative conditions (empathy, warmth, and genuineness) are related to positive outcomes in psychotherapy.

The effects of counselor status on the therapeutic relationship have been studied extensively. Status elements

have included physical attractiveness, expertness, competence, sex, age, race of counselor, and, in some cases, physical setting of the interview. For instance, Carkhuff and Pierce (1967) varied socio-economic status and race of counselor and found that as patient race and social class were more similar to the therapist, clients engaged in more self-exploration than when they were less similar. However, Ewing (1974) found no interaction between race of counselor and client after an initial interview. Indeed, black students reported a greater likelihood of returning to see a white counselor than did white students.

Expertness of the counselor, as a component of attraction, has been found to enhance the counseling relationship (Strong, 1970; Strong & Dixon, 1971). In a study by Atkinson and Carskaddon (1975), subjects reported they would be more willing to seek help from counselors who were given prestigious introductions. LaCrosse and Barak (1976), using counseling films of Carl Rogers, Fritz Perls, and Albert Ellis, found that subjects perceived these three experts as differing on the dimensions of expertness, attractiveness, and trust.

Simons and Helms (1976), summarizing research on the effects of sex of counselor for female clients, determined that the majority of studies showed female clients preferred male counselors. In their own study, however, they found

college and non-college women preferred female counselors. This supports the reported shift in preferences of female clients towards same-sex counselors (Fabrikant, 1974).

Simons (1976) examined the effects of sex, age, and education of the counselor on perceived counselor credibility. For male counselors, as educational level increased credibility increased. For females, credibility decreased as educational level of the therapist increased. While these general findings emerged, many interactions of counselor variables were reported. For example, clients felt that they could ask a female counselor more questions when the problem presented was vocational than if the counselor were male or if the problem was personal. Similarly, Hill (1975a) found interactions between sex of client and sex and experience level of the counselor when measuring self-disclosure and self-exploration of the client and advice-giving and empathy offered by the therapist.

Kerr and Dell (1976), in an analogue study, varied counselor role (expert versus attractive), attire (professional versus casual), and setting (professional versus casual). Their findings suggest that the student's perceptions of counselor expertness and attractiveness are affected by therapist communication. In addition they write,

"It may well be that in an interpersonal situation the behavior of the parties involved is more important in determining perceptions of the other than are such variables as attire, or

setting, or other variables such as counselor sex, experience, or race. If this is the case, the further investigation of the behavioral elements that convey such impressions seems warranted" (p. 556).

Nonverbal behavior has also been related to attraction. Rice (1965) reported that clients showed greater improvement with counselors who used "fresh" language. Smiling and nodding by therapists were both found to increase attraction for most clients with the exception of some female clients who felt threatened by male counselors who both smiled and nodded (Hackney, 1974). Satisfaction with a counseling interview has been related to the physical distance between client and counselor, with Lassen (1969) finding an inverse relationship between distance and satisfaction and others finding the relationship to be curvilinear (Haase, 1970; Dinges & Oetting, 1972).

Another component of attraction which has received attention is similarity between client and counselor. Studies of similarity have taken two basic forms in the literature. Imber et al. (1955) have suggested that the more similar are the expectations for therapy of the client and counselor, the more likely it is that the client will stay in counseling. A study by Heine and Trossman (1960) supports this notion. Clients who saw themselves as partly responsible for the outcomes of therapy, an expectation held by the therapists in this study, tended to stay in therapy.

Goldstein and Shipman (1961) reported a curvilinear relationship between similarity of expectancies and reports of symptom relief.

The second type of similarity studied is the match between client and counselor personality variables. Hunt et al. (1959) found a positive correlation between assumed similarity, the degree to which clients see themselves as similar to their therapist, and degree of liking which the therapist reported for the client. Similarity of authoritarianism was found not to be related to the quality of the therapeutic relationship (Vogel, 1961). Using MMPI scores to measure similarity, Carson and Heine (1961) found a curvilinear relationship between similarity and ratings of successful outcomes for the client. Finally, Hollingshead and Redlich (1958) reported that therapists had more positive feelings towards patients whose social class and background were more similar to their own.

The Present Study

All of the research on attraction and its outcomes suffers major shortcomings. First, the use of different outcomes from study to study makes comparison across studies difficult. In addition, this previous research is based on the "uniformity myth" (Kiesler, 1971). That is, one particular construct is thought to explain some behavior across

all people and all situations.

Another major shortcoming in both attraction and termination literature has been the failure to evolve standard definitions and measuring devices for attraction components and termination categories. Definitions of both the components of attraction and outcome measures have depended mainly on the discretion of the individual researcher (Kiesler, 1971).

A most serious deficiency in attraction and termination literature has been the failure to measure all components of attraction as they combine to form a global perception of psychotherapy, which the client uses in his or her decision to terminate or remain in therapy. All of the research cited thus far has considered one, two, or perhaps three components of attraction. It is difficult to understand from this body of research how each of the components of attraction in one study might combine or interact with different attraction components studied in another experiment.

Measurement of these components and outcomes has relied primarily on the perceptions of therapists and/or independent raters. Little attention has been placed on the phenomenological perceptions of the client as he or she experiences psychotherapy. Typically, individual differences have been ignored in preference to the search for some one attraction component that uniformly affects outcomes for all.

Bem and Allen (1974) have demonstrated that individuals differ across situations in their exhibition of certain attraction variables such as friendliness. In commenting on the lack of research focusing on individual differences in the importance of attraction components, LaCrosse and Barak (1976) have said:

"In this study, differences in subjects' perceptions were treated as an error term. It would be worthwhile to test individual differences as an independent variable, to study the interactive effects with actual counselor behavior, and try to derive better predictions regarding counseling outcome" (p. 172).

The main objective of the present study was to remedy certain of the shortcomings of previous research. For one, attraction, termination, and outcome variables were measured from the client's phenomenological perceptions of the process of therapy in which he or she was involved, rather than approximating these perceptions by independent ratings or therapist perceptions. More importantly, and unique to this study, was the organized definition of discrete categories of termination into which clients were asked to classify themselves following their visits to a counseling service.

Previous literature has tried and failed to understand the absolute importance of some one or two factors which influence attraction and termination. The focus of the present study was the measurement of attraction and termination as global rather than specific phenomenological and behavioral

manifestations of the psychotherapy experience. That is, both attraction and termination are believed to be behaviors (outcomes) which are the result of idiosyncratic combinations of many other variables. Thus, attraction and termination were measured at a more macroscopic level than in previous research.

Because termination by the client may occur as the result of low attraction (early termination) or because of problem relief (normal termination) (Meltzoff & Kornreich, 1970), two procedures were used to distinguish these groups. First, to assess perceptions of change in problem severity, the target complaint approach (Battle, Imber, Hoehn-Saric, Stone, Nash, & Frank, 1966; Hill, 1975b) was incorporated into a counseling evaluation form (Rosen & Zytowski, 1977). The target complaint method, a self-report of change, asks clients to rate, independently, before and after treatment, the severity of their presenting problem. This method does not ask clients to rate parts of the therapy process but to give a global, phenomenological report of problem severity. Second, clients were asked to identify their reason for ending their visits to the counseling center.

To measure attraction as a global perception of the client a twelve-item scale devised by Laing and Zytowski (Note 1) was used. This instrument was developed as an extension of the Interpersonal Judgment Scale (IJS) created by

Byrne (1961). Both the IJS and Laing-Zytowski Attraction Scale (LZAS) measure global perceptions of liking for and willingness to work with a stimulus person, the counselor. The emphasis is not on particular attributes of the counselor but rather on the summation of attributes which were important to a particular client in a particular setting interacting with a particular counselor.

Drawing together all of the previous research in attraction and termination, the following hypotheses were generated:

1. Clients who report high problem relief will be more likely to view themselves as normal terminators.
2. Clients who report low problem relief will be more likely to view themselves as premature terminators from the counseling process.
3. Clients who report high attraction to their therapists will view themselves as normal terminators while clients who report low attraction to their therapists will be more likely to view themselves as early terminators.
4. Clients who report high attraction to their therapists will be more likely to report high problem relief while clients reporting low attraction to their therapists will be more likely to report low problem relief.

Method

Agency

Clients of the Student Counseling Service at Iowa State University were used for this study.

Subjects

All clients of the Counseling Service who had their initial contact with the service beginning Fall quarter, 1977 and whose files had been returned by their counselors by March 1, 1978 were included in this study.

Instruments

The intake form (Appendix A) gathered basic demographic information about each client. The main feature of this form, in tandem with the follow-up questionnaire, was the target complaint approach (Battle et al., 1966). Subjects were required to state, at the time of their initial contact, the complaints which brought them to the Counseling Service and rate the severity of these complaints. A second rating of severity occurred at follow-up. Severity ratings were anchored from "this problem doesn't bother me at all" to "Couldn't be worse".

The follow-up questionnaire was adapted from Rosen and Zytowski (1977) (see Appendix B). Clients were first

reminded of their initial presenting problem and asked to rate its current severity. They were also asked to rate how much the Counseling Service was responsible for any changes they had realized. Next clients were asked if any other problem had arisen during counseling and, if so, to describe it and rate its current severity. Clients were then asked about gains in four general areas of functioning: how they felt about themselves, how they were relating to others, how they were using their time, and how they felt about the future, all as a result of their counseling experiences.

The next item of the follow-up questionnaire asked clients to classify their termination. The categories available were: joint decision with counselor, I wasn't getting any help so I left, I felt that I was done so I left, I was getting help but had other priorities for my time, I wasn't getting any help and I had other priorities for my time, my counselor left the Counseling Service, and other. Clients were also asked the degree to which they felt the need to resume counseling, whether they had sought additional counseling, and where they had gone for that counseling.

To measure attraction to the counselor, the Laing-Zytowski Attraction Scale (see Appendix C) was used. This scale is twelve items long and focuses on the clients'

reports of willingness to work with and amount of liking for the counselor. Clients were given the LZAS by their counselor at the end of the first counseling session.

Counselor perceptions of termination were obtained from closed files. Terminations were considered joint decisions (normal terminations) unless the counselor specifically noted that the client failed to return or left for some other reason (e.g., client felt finished, had other priorities).

Problem Relief

The degree to which the initial problem was relieved was derived by subtracting reported problem severity at follow-up from initial problem severity. Thus, the amount of change possible for each client depended, in part, on the severity of the initial problem. The raw scores of change were used for analysis.

Statistical Procedures

Means, standard deviations, and frequencies of response were determined for each variable with the exception of LZAS scores, for which only means and standard deviations were found.

Three basic forms of statistical analysis were performed. First, one-way analysis of variance was used to test differences in attraction to counselor due to

demographic factors of both counselor and client. Scheffe's test was used to examine differences between pairs of means when one-way ANOVAs were significant. Second, chi-square analyses were carried out to detect differences in the frequency of responding to follow-up questionnaire items. (n.b. Although problem relief was scaled as a continuous variable, it cannot be assumed to have interval properties. See Rosen & Zytowski, 1977). Lastly, a correlational analysis was performed using items of the LZAS to examine the inter-correlation of those items and to determine the reliability of that instrument.

Results

Data were collected from September 1, 1977 to March 1, 1978. Within that period 201 files were closed and returned to the Student Counseling Service office as completed. Fourteen of these cases were students seeking readmission to the university. Because students seeking readmission must, in some cases, visit the Counseling Service to be evaluated rather than seeking counseling of their own will, these subjects were dropped from the analysis. One hundred eighty-seven subjects remained in the sample.

Complete data including demographic information, attraction scale, and follow-up questionnaire were available for 65 subjects, 34.7 percent of the sample. Demographic data and follow-up questionnaires were available for 28 subjects or 15 percent of the sample. Attraction scale and demographic data were available for 68 subjects or 36.3 percent of the sample. The percentage of subjects completing and returning the follow-up questionnaire was 49.7 percent. Table 1 presents the frequencies of data available for analysis.

Attraction scales were missing for 28.3 percent of the sample. Failure to collect this data came from at least two sources. Some subjects refused to fill out the attraction measure but did return them to the collection point. In

Table 1
Frequencies of Data Available for Analysis

	Number	%
Demographics, Attraction Scale, Follow-up	65	34.7
Demographics, Follow-up	28	15
Demographics, Attraction Scale	68	36.3
Demographics	26	14
	187	100%
Follow-up returned (moved, addressee unknown)	6	
Readmission Evaluations	14	

most cases, however, the counselor, for unknown reasons, failed to give the attraction scale to the client. This was apparent because many of the attraction scales were found in files returned as complete.

The Subjects

There were 99 male and 87 female clients in this study. One subject's sex could not be determined from the records available. A breakdown of clients by sex and year in school is presented in Table 2.

Counselor Demographic Variables

The professional staff members of the Student Counseling Service consisted of eight male and seven female counselors. There were two male and one female interns at the time of this study. Two male and three female practicum students were also included in this report. Table 3 shows the frequency of clients assigned to counselors by sex and experience of counselor.

Laing-Zytowski Attraction Scale (LZAS)

The correlation matrix for LZAS items is given in Table 4. The coefficient alpha reliability index of internal consistency was .864. Scores for the LZAS had a possible range of 12 to 60. The actual range of scores was 12 to 46. Low scores reflect high attraction to counselor. For this

Table 2
Breakdown of Clients by Sex
And Year in School

	Year in School					Row Total
	Fresh	Soph	Junior	Senior	Grad	
Sex Male	43	19	21	10	4	97
Female	36	19	12	13	4	84
Column Total	79	38	33	23	8	181

Table 3
Breakdown of Clients Assigned by
Counselor Sex and Experience

		Experience Level			Row Total
		Pro	Intern	Prac	
Counselor Sex	Male	97	29	8	134
	Female	33	3	16	52
	Column Total	130	32	24	186

Table 4

Intercorrelation of Laing-Zytowski Attraction Scale Items

Item	1	2	3	4	5	6	7	8	9	10	11	12	Total Score
1	1.00	.25	.43	.18	.38	.28	.29	.30	.33	.40	.24	.38	.58
2		1.00	.15	.34	.36	.21	.46	.25	.40	.25	.32	.44	.64
3			1.00	.26	.33	.37	.34	.23	.16	.51	.25	.28	.54
4				1.00	.30	.19	.17	.16	.23	.23	.40	.12	.54
5					1.00	.31	.43	.24	.35	.33	.33	.44	.68
6						1.00	.30	.28	.24	.35	.24	.24	.53
7							1.00	.28	.37	.35	.38	.43	.67
8								1.00	.57	.14	.15	.36	.54
9									1.00	.29	.25	.40	.64
10										1.00	.36	.31	.58
11											1.00	.39	.61
12												1.00	.69
Total Score	.58	.64	.54	.54	.68	.53	.67	.54	.64	.58	.61	.69	

sample the average attraction score was 20.42 ($n = 138$) with a standard deviation of 5.241. Overall, subjects reported moderately high attraction to counselors.

Client demographic variables had no effect on attraction scores for this study. Results of one-way ANOVAs for sex of client, year in school, and number of visits to the Counseling Service were nonsignificant. These findings are displayed in Tables 5, 6, and 7 respectively. Because few students attended more than six sessions (see Table 7), a revised analysis was performed which grouped students into those who attended one or two sessions, those who attended three or four sessions, and those who attended more than five sessions. The one-way ANOVA for attraction was not significant, $F(2, 127) = .238$.

Sex of counselor did not have an effect on client ratings of counselor attraction (see Table 8). However, experience level of counselor did produce significant differences in attraction scores, $F(2, 127) = 7.135$, $p = .001$. Table 9 shows mean attraction scores and the one-way ANOVA for level of counselor experience.

A Scheffe's test was carried out to determine the significance of differences between the three levels of counselor experience. The results showed that professional staff were rated as significantly more attractive than were practicum students ($p = .01$). No differences were found

Table 5

Means and One-Way ANOVA for Attraction Scores by Client Sex

Source	Mean	S.D.	N.	S.S.	d.f.	M.S.	F.	Sig.
Male	21.0735	4.5850	68	1408.6324				
Female	19.8852	6.0390	61	2188.1967				
Between groups				45.403	1	45.403	1.603	.207
Within groups				3596.829	127	28.321		
Total				3542.232	128			

Table 6

Means and One-Way ANOVA for Attraction Scores by Client Year in School

Source	Mean	S.D.	N.	S.S.	d.f.	M.S.	F.	Sig.
Freshman	20.4364	5.3833	55	1565.5273				
Sophomore	22.000	6.5115	26	1060.000				
Junior	19.6190	3.8272	21	292.9524				
Senior	19.6667	5.2915	18	476.000				
Graduate	21.3333	5.3166	6	141.222				
Between groups				91.298	4	22.825	.781	.539
Within groups				3535.813	121	29.222		
Total				3627.111	125			

Table 7

Means and One-Way ANOVA for Attraction Scores by Number of Visits

Source	Mean	S.D.	N.	S.S.	d.f.	M.S.	F.	Sig.
1 visit	20.2059	6.5587	34	1419.5588				
2	20.3750	4.3595	48	893.250				
3	21.1818	5.4040	22	613.2727				
4	20.2308	6.3660	13	486.3077				
5	24.000	4.5461	4	62.000				
6	20.7500	5.3151	4	84.750				
7	19.500	.7071	2	0.500				
8	19.000	0.0	1	0.0				
11	23.000	0.0	1	0.0				
16	16.000	0.0	1	0.0				
Between groups				94.668	9	10.519	.355	.954
Within groups				3559.639	120	29.664		
Total				3654.307	129			

Table 8

Means and One-Way ANOVA for Attraction Scores by Counselor Sex

Source	Mean	S.D.	N.	S.S.	d.f.	M.S.	F.	Sig.
Male	20.8817	5.4749	93	2757.6989				
Female	19.6757	4.8822	37	858.1081				
Between groups				38.501	1	38.501	1.363	.2452
Within groups				3615.807	128	28.248		
Total				3654.308	129			

Table 9

Means and One-Way ANOVA for Attraction Scales by Level of Counselor Experience

Source	Mean	S.D.	N.	S.S.	d.f.	M.S.	F.	Sig.
Professional	19.5591	4.3023	93	1702.9247				
Intern	21.8000	5.1989	15	378.400				
Practicum	23.8182	7.6322	22	1223.2727				
Between groups				349.710	2	174.855	6.720	.0017
Within groups				3304.597	127	26.020		
Total				3654.307	129			

between professional staff and interns or between interns and practicum students.

Initial Problem Severity

Client reports of initial problem severity ranged from zero (this problem does not bother me at all) to eight (this problem could not be worse). While this scale was originally designed to be scored from zero to seven, seven subjects marked beyond the "severe" end of the scale and, thus, were awarded the rank of eight. The average reported initial problem severity was 4.84 ($n = 90$). The standard deviation was 2.19.

Initial problem severity did not differ with sex of client. However, a chi-square analysis revealed a difference in initial severity associated with client's year in school, $\chi^2(32) = 52.139$, $p = .01$. Freshmen tended to rate their problems as more severe than did other classes. This analysis is displayed in Table 10. Attraction to counselor did not covary significantly with initial problem severity, suggesting that initial distress was not a factor which enhanced the counseling relationship.

Table 10

Breakdown of Initial Problem Severity by Year in School

		Year in School					
		Freshman	Sophomore	Junior	Senior	Grad	Row Total
Initial Problem Severity	0	0	1	5	1	0	7
	1	0	1	0	0	0	1
	2	2	1	0	1	0	4
	3	2	1	1	1	0	5
	4	5	4	2	0	1	12
	5	9	3	0	0	0	12
	6	13	3	6	5	3	30
	7	4	2	0	4	0	10
	8	7	0	0	0	0	7
Column Total		42	16	14	12	4	88

Note. $\chi^2(32) = 52.13992$, $p = 0.0137$

The Follow-Up Questionnaire

Responders Versus Non-Responders

A major issue in questionnaire research is whether those who respond to and return questionnaires are somehow different from those who do not. Validity, reliability, and generalizability of findings all revolve around this central point. It is possible to examine some variables across this sample to partially respond to this question.

Responders did not differ from non-responders because of their sex, their year in school, or the number of visits they had to the Counseling Service. In this sample, sex of counselor and experience level of counselor also had no effect on who returned questionnaires. Additionally, those for whom attraction scales (but not follow-up questionnaires) were available were compared with those for whom complete data were available to determine if these groups were differentially attracted to their counselors. A one-way ANOVA (Table 11) showed that no significant differences between these groups existed.

In this sample, then, responders did not differ from non-responders because of their own demographic variables, counselor demographic variables, or in the amount of attraction for their counselors. Whether responders were different from non-responders in reported problem relief could not

Table 11

Means and One-Way ANOVA for Attraction Scores by Responders/
Non-Responders to the Follow-Up Questionnaire

Source	Mean	S.D.	N.	S.S.	d.f.	M.S.	F.	Sig.
Responders	20.5781	5.7675	64	2095.6094				
Non-Responders	20.500	4.8966	66	1558.500				
Between groups				0.198	1	0.198	0.007	0.9337
Within groups				3654.109	128	28.548		
Total				3654.307	129			

be determined.

Problem Severity at Follow-Up

Scores of problem severity at follow-up ranged from zero (doesn't bother me at all) to seven (couldn't be worse). The average score was 1.36 ($n = 93$), $SD = 1.58$. Table 12 displays the frequencies of response for this variable. Problem severity at follow-up did not differ by sex of client or year in school. Experience of counselor and number of visits to the Counseling Service also had no effect. Differences in problem severity at follow-up were associated with sex of counselor, $\chi^2(4) = 9.6031$, $p = .047$. The data in Table 13 suggested that female counselors had clients who reported less discomfort with their initial presenting problem at follow-up.

Attraction scores did not change significantly across levels of problem severity at follow-up. All clients rated their attraction to counselor in a similar manner, regardless of their current level of distress. This again suggested that attraction was not related to the amount of discomfort clients reported at any given time.

Problem Relief

The average amount of reported problem relief for this sample was 3.61 ($n = 90$), $SD = 2.64$. The range of scores was -5 to +8. Thus, some clients got worse, some reported

Table 12

Frequency of Responses for Problem Severity
at Follow-Up

Severity	Absolute Frequency	Relative Frequency (%)	Cumulative Frequency (%)
None	25	26.9	26.9
A little	47	50.1	77.4
Pretty much	11	11.8	89.2
Very much	9	9.7	98.9
Couldn't be worse	1	1.1	100.00
Total	93	100.0	

Table 13

Chi-Square Analysis of Sex of Counselor by
Client Report of Problem Severity
at Follow-Up

		Counselor Sex		Row Total
		Male	Female	
Problem Severity at Follow-up	Doesn't bother me at all	14	10	24
	A little	37	10	47
	Pretty much	8	3	11
	Very much	9	0	9
	Couldn't be worse	0	1	1

Note. $\chi^2(4) = 9.6031, p = .0477.$

no change in problem severity, and others reported feeling better. The frequencies of problem relief scores is reported in Table 14. Problem relief was not affected by or associated with attraction scores, client sex or year in school, number of visits to the Counseling Service, or counselor sex or experience. The finding that attraction was not related to problem relief suggested that Hypothesis 4 was false.

Attribution of Change Due to Counseling

In general, clients perceived that their counseling had, in some way, been responsible for changes in their initial presenting problem. Men and women did not differ in the amount of responsibility for change they attributed to counseling. Year in school was associated with different patterns of attribution, $\chi^2(16) = 29.356$, $p = .02$, although it is difficult to see, from Table 15, how the classes differed in their responses. Counselor demographic variables did not affect attribution of change.

Attraction scores varied significantly with ratings of attribution of change, $F(4, 59) = 4.08$, $p = .0055$. Mean attraction scores and the one-way ANOVA are shown in Table 16. It is interesting to note that the one subject who attributed all change in initial presenting problem to counseling rated the counselor as much less attractive than the average scores for the other groups. A Scheffe's test

Table 14
Frequencies of Client-Reported Relief
of Initial Problem

Amount of Relief	Absolute Frequency	Relative Frequency (%)	Cumulative Frequency (%)
-5	1	1.1	1.1
-3	1	1.1	2.2
-1	8	8.9	11.1
0	1	1.1	12.2
1	8	8.9	21.1
2	8	8.9	30.0
3	9	10.0	40.0
4	16	17.8	57.8
5	15	16.7	74.4
6	13	14.4	88.9
7	7	7.3	96.7
8	3	3.3	100
Total	90	100	

Note. Mean for this variable = 3.611, SD = 2.647.

Table 15

Chi-Square Analysis of Attribution of Change
Due to Counseling with Year in School

		Year in School					
		Freshman	Sophomore	Junior	Senior	Grad	Row Total
Change due to Counsel- ing	None	0	4	2	1	0	7
	A little	14	4	4	1	1	24
	Pretty much	13	6	7	3	1	30
	Very much	14	2	4	5	2	27
	100%	0	0	0	2	0	2
	Column Total	41	16	17	12	4	90

Note. $\chi^2(16) = 29.3562$, $p = .0216$.

Table 16

Means and One-Way ANOVA for Attraction Scores
by Amount of Change Attributed to Counseling

Source	Mean	S.D.	N.	S.S.	d.f.	M.S.	F.	Sig.
None	23.500	11.6060	6	673.5000				
A little	21.5263	5.3163	19	508.7368				
Pretty much	20.6842	3.8014	19	260.1053				
Very much	17.7895	3.3263	19	199.1579				
100%	36.000	0.0	1	0.0				
Between groups				454.109	4	113.527	4.08	.0055
Within groups				1641.50	59	27.822		
Total				2095.609	63			

revealed no significant differences between any of the groups ($p = .01$). A subsequent ANOVA was performed leaving out this one subject and tested differences between the three remaining groups. This analysis approached but did not attain significance, $F(3, 59) = 2.546, p = .064$.

Additional Problem Resolution

Seventy-three clients (80 percent of those returning follow-up questionnaires) reported on the current severity of an additional problem that had been discussed during counseling. The frequencies of their severity ratings are presented in Table 17. While many of these clients rated the severity of the additional problem, few described what that problem was. It is impossible to know whether those subjects who did not describe their second problem were actually rating the severity of that problem or were confused by the questionnaire and were responding to some unknown probe. For this reason, the data on additional problem severity were interpreted cautiously. Neither demographic variables nor attraction scores were associated with differences in additional problem resolution.

Feelings About Self

The frequencies of response for clients' feelings about themselves are displayed in Table 18. Almost three quarters (73.6 percent) of the clients reported feeling better about

Table 17

Frequency of Current Severity Ratings
of a Second Counseling Problem

Current Severity	Absolute Frequency	Relative Frequency (%)	Cumulative Frequency (%)
Worse	1	1.3	1.3
No change	7	9.3	10.7
Slightly better	19	25.3	36.0
Much better	29	38.7	74.7
Not a problem	19	25.3	100
Total	75	100.0	

Table 18

Frequencies of Feelings About Self
as a Result of Counseling

Feelings About Self	Absolute Frequency	Relative Frequency (%)	Cumulative Frequency (%)
Much better	30	33.0	33.0
Somewhat better	37	40.7	73.6
No change	22	24.2	97.8
Worse	2	2.2	100.0
Total	91	100.0	

themselves as a result of counseling. These feelings were not affected by client or counselor characteristics or by attraction to counselor.

Relating to Others, Use of Time, and Feelings About the Future

In general, more than half the clients returning follow-up questionnaires said they felt better about relating to others and about the future. The frequencies of response for relating to others and feelings about the future are found in Tables 19 and 20 respectively.

Students seemed not to improve as much in their use of time. Table 21 contains the frequencies of response for this variable. It is possible that more efficient use of time was neither a main emphasis nor an outcome of therapy.

Client Decisions to Terminate Counseling

The follow-up questionnaire contained seven categories of termination into which a client could classify himself or herself. Preliminary analysis showed that only two clients reported that counseling was no help and that they had other priorities for their time. These responses were transferred to the category "I wasn't getting any help" to form a general category of clients dissatisfied with counseling. One client reported that counseling had ended because the counselor had left the Counseling Service. This datum was transferred to the "other" category. Response frequencies

Table 19

Frequency of Ability to Relate to People
as a Result of Counseling

I Relate to People	Absolute Frequency	Relative Frequency (%)	Cumulative Frequency (%)
Much better	18	20.2	20.2
Somewhat better	31	34.8	55.1
No change	39	43.8	98.9
Worse	1	1.1	100.0
Total	89	100.0	

Table 20

Frequencies of Feelings About the Future
as a Result of Counseling

I Feel About the Future	Absolute Frequency	Relative Frequency (%)	Cumulative Frequency(%)
Much better	32	35.2	35.2
Somewhat better	39	42.9	78.0
No change	18	19.8	97.8
Worse	2	2.2	100.0
Total	91	100.0	

Table 21

Frequency of Ability to Use Time
as a Result of Counseling

I Use Time	Absolute Frequency	Relative Frequency (%)	Cumulative Frequency (%)
Much more efficiently	13	14.8	14.8
Somewhat more efficiently	26	29.5	44.3
No change	48	54.5	98.9
Worse	1	1.1	100.0
Total	88	100.0	

for the revised categories of client termination are shown in Table 22.

Clients' decisions to terminate were associated significantly with sex of client, $\chi^2(4) = 9.568$, $p = .048$. Table 23 shows show males and females viewed their terminations. All of the clients terminating because counseling was no help were women. Of the 13 clients who had other priorities for their time, ten were women. Year in school was not associated with differing responses to type of termination.

Sex of counselor was associated with different types of client-reported termination, $\chi^2(4) = 10.415$, $p = .034$. Of particular note, the five women who reported terminating because counseling was not helpful all had male counselors. A breakdown of client termination by sex of counselor is found in Table 24. Experience of counselor did not have impact on client explanations of termination.

Attraction for the counselor was significantly different between categories of client-reported termination, $F(4, 58) = 3.085$, $p = .022$. Means and the one-way ANOVA for these groups are presented in Table 25. A Scheffe's test of differences between pairs of means revealed that clients reporting joint terminations were significantly more attracted to their counselors than were clients who felt that counseling was no help ($p = .05$). This supported Hypothesis 3.

Clients who reported jointly terminating counseling

Table 22
Frequency of Client-Reported
Reasons for Termination

Category	Absolute Frequency	Relative Frequency (%)	Cumulative Frequency (%)
Joint Termination	51	56.0	56.0
Client felt finished	13	14.3	70.3
Counseling was no help	5	5.5	75.8
Counseling helped, but other priori- ties	13	14.3	90.1
Other	9	9.9	100.0
Total	91	100.0	

Table 23

Chi-Square Analysis of Client-Reported
Terminations by Client Sex

		Sex of Client		Row Totals
		Male	Female	
Reason for Termination	Joint	26	24	50
	Client felt finished	7	6	13
	Counseling no help	0	5	5
	Counseling help- ful but other priorities	3	10	13
	Other	6	3	9
	Column totals	42	48	90

Note. $\chi^2(4) = 9.56868$, $p = .0484$.

Table 24

Chi-Square Analysis of Client-Reported
Termination by Counselor Sex

		Sex of Counselor		Row Totals
		Male	Female	
Reason for Termination	Joint	41	9	50
	Client felt finished	10	3	13
	Counseling no help	5	0	5
	Counseling help- ful but other priorities	7	6	13
	Other	4	5	9
Column total		67	23	

Note. $\chi^2(4) = 10.41562$, $p = 0.034$.

Table 25

Means and One-Way ANOVA for Attraction Scores
by Client-Reported Reason for Termination

Source	Mean	S.D.	N.	S.S.	d.f.	M.S.	F.	Sig.
Joint	19.3421	4.2060	38	654.5526				
Client felt finished	22.500	7.9462	8	442.000				
Counseling was no help	30.000	14.774	3	402.000				
Counseling help- ful but had other priori- ties	19.875	4.9982	8	174.875				
Other	21.8333	3.2506	6	52.833				
Between groups				367.295	4	91.824	2.085	0.0226
Within groups				1726.261	58	29.763		
Total				2093.556	62			

also reported feeling less severity of their initial problem at follow-up. The chi-square analysis (Table 26) was significant, $\chi^2(16) = 34.7982$, $p = .0042$. This finding supported Hypotheses 1 and 2.

Need to Resume Counseling

The frequency and degree of need to resume counseling is shown in Table 27. No differences in need to resume counseling were found for client or counselor characteristics. Attraction did not vary significantly with need to resume counseling.

Need to resume counseling was associated with client-reported terminations. Table 28 shows the chi-square analysis was significant, $\chi^2(16) = 37.2399$, $p = .0019$. Clients reporting joint termination appeared to have felt less of a need to resume counseling than did those who reported other types of termination in this study.

Did You Seek Additional Counseling and Where?

Twenty-two clients, 24.4 percent of those returning follow-up questionnaires, reported that they did seek other counsel following termination at the Counseling Service. The decision to talk to someone else did not vary with sex of client or year in school. Sex and experience of counselor also had no affect. In addition, seeking other counseling was not associated with felt need to resume counseling.

Table 26

Chi-Square Analysis of Client-Reported Termination by
Initial Problem Severity at Follow-up

		Problem Severity at Follow-up					Row Total
		None	A little	Pretty much	Very much	Couldn't be worse	
Client- reported termination	Joint	14	31	1	5	0	51
	Unilateral client	3	6	4	0	0	13
	Counseling was no help	1	1	3	0	0	5
	Counseling help- ful but other priorities	4	5	2	1	1	13
	Other	3	2	1	3	0	9
	Column total	25	45	11	9	1	91

Note. $\chi^2(16) = 34.79892$, $p = .0042$.

Table 27

Frequency of Degree of Need to Resume Counseling

Need to Resume	Absolute Frequency	Relative Frequency (%)	Cumulative Frequency (%)
None	55	60.4	60.4
A little	19	20.9	81.3
Moderate	12	13.2	94.5
Very much	5	5.5	100.0
Total	91	100.0	

Table 28

Chi-Square Analysis of Client-Reported Termination
by Need to Resume Counseling

		Need to Resume Counseling				Row Total
		None	A little	Moderate	Very much	
Client- reported termination	Joint	41	6	1	3	51
	Unilateral client	6	6	1	0	13
	Counseling was no help	2	1	2	0	5
	Counseling help- ful but other priorities	3	5	4	1	13
	Other	3	1	4	0	8
	Column total	55	19	12	4	90

Note. $\chi^2(16) = 37.23999$, $p = .0019$.

No one who sought additional counseling turned to other professional counseling services (telephone crisis-line, psychiatrist). Instead, family, friends, and clergy were the resources most often used. The frequencies of use of alternative counseling sources are found in Table 29. Where clients chose to seek additional counseling was not affected by any demographic variables. Attraction to counselor approached significance, with those seeking counseling being more attracted to their counselors than those who did not, $F(1, 61) = 3.889$, $p = .053$. The one-way ANOVA is displayed in Table 30.

Counselor Perception of Terminations

A basic breakdown of counselor perceptions of termination into categories is displayed in Table 31. Seventy-five percent of terminations were perceived as joint decisions by counselors. Only one report of a counselor unilaterally terminating counseling was received.

While demographic characteristics of the client were not associated with differing perceptions of termination by the counselor, sex of counselor did produce different perceptions of termination, $\chi^2(4) = 12.075$, $p = .016$. Table 32 shows that female counselors were more likely to report clients failed to return than were male counselors. A further breakdown of counselor sex and experience revealed that, among levels of experience, only professional staff men and women

Table 29

Frequency of Use of Alternative Counseling Sources
by Clients

Source	Absolute Frequency	Relative Frequency (%)	Cumulative Frequency (%)
Open Line (telephone crisis)	0	0	0
Psychiatrist	0	0	0
Clergy	5	26.3	26.3
Friend	5	26.3	52.6
Faculty	4	21.1	73.7
Parents	3	15.8	89.5
Others	2	10.5	100.0
Total	19	100.0	

Table 30

Means and One-Way ANOVA for Attraction Scores by Seekers
and Non-Seekers of Additional Counseling

Source	Mean	S.D.	N.	S.S.	d.f.	M.S.	F.	Sig.
Sought more counseling	78.3125	3.6646	16	201.4375				
Did not seek more counsel- ing	21.5106	6.1037	47	1713.7447				
Between groups				122.088	1	122.088	3.889	0.0532
Within groups				1915.182	61	31.396		
Total				2137.270	62			

Table 31

Frequency of Counselor-Reported Reason for Termination

Category	Absolute Frequency	Relative Frequency (%)	Cumulative Frequency (%)
Joint	141	75.8	75.8
Unilateral by Counselor	1	0.05	76.3
Unilateral by Client	9	4.8	81.2
Fail to return	30	16.1	97.3
Other	5	2.7	100.0
Total	186	100.0	

Table 32

Chi-Square Analysis of Counselor-Reported Reasons
for Termination by Sex of Counselor

		Sex of Counselor		Row Totals
		Male	Female	
Reason for Termi- nation	Joint	107	33	140
	Unilateral by counselor	1	0	1
	Unilateral by client	7	2	9
	Failed to return	17	13	30
	Other	1	4	5
Column totals		133	52	

Note. $\chi^2(4) = 12.07541$, $p = 0.0168$.

differed in their perceptions of the frequencies of termination categories. These data are presented in Table 33.

Counselor perceptions of termination were significantly related to varying levels of client attraction to counselor, $F(3, 125) = 2.734$, $p = .046$. It should be noted that the one case of a counselor unilaterally terminating counseling was not included in this analysis because no attraction scale was received for this client. The means for each group and the one-way ANOVA are presented in Table 34. A Scheffe's test showed that none of the groups was significantly different from each other. Counselor perceptions of termination were not related to reports of problem severity at follow-up.

A crosstabulation of client versus counselor perceptions of termination is presented in Table 35. A chi-square analysis of the entire table was not performed due to the lack of uniformity between categories of terminations for clients and counselors.

Because some of the categories of the preceding analysis were not precisely equivalent for comparison, a chi-square goodness of fit test was constructed to test hits versus misses. The underlined figures in Table 35 represent hits. If clients and counselors were in perfect agreement about termination, the expected percentage of hits would be 100 percent and the expected misses zero percent. The test for goodness of fit was significant, $X^2(1) = 9.890$, $p = .005$,

Table 33

Chi-Square Analysis of Counselor-Reported
Termination by Sex of Professional Staff

		Sex of Professional Staff		Row Totals
		Male	Female	
Counselor- reported termina- tion	Joint	81	19	100
	Unilateral by client	6	1	7
	Failed to return	8	10	18
	Other	1	3	4
Column totals		96	33	

Table 34

Means and One-Way ANOVA for Attraction Scores by
Counselor-Reported Reason for Termination

Source	Mean	S.D.	N.	S.S.	d.f.	M.S.	F.	Sig.
Joint	19.9400	4.8384	100	2317.6400				
Unilateral by Client	24.8333	2.3166	6	26.8333				
Failed to return	22.500	7.3162	20	1017.0000				
Other	20.000	5.2915	3	56.0000				
Between groups				224.217	3	74.739	2.734	0.0465
Within groups				3417.473	125	27.340		
Total				3641.6900	128			

Table 35

Crosstabulation of Counselor-Reported Reason
for Termination and Client-Reported
Reason for Termination

		Joint	Unilateral by Client	Failed to return	Other	Row Total
Client reason for termina- tion	Joint	<u>48</u>	2	0	1	51
	Felt finished	10	<u>1</u>	2	0	13
	Counseling was no help	1	<u>1</u>	<u>2</u>	0	5
	Counseling helped but had other priorities	5	<u>1</u>	<u>2</u>	0	13
	Other	7	1	1	0	9
Column total		<u>71</u>	<u>6</u>	<u>13</u>	<u>1</u>	

and suggested that clients and counselors perceived terminations differently. A further analysis of Table 35 by sex of counselor revealed that, in terms of hits and misses, male counselors were not as good at matching clients in their perceptions of termination ($\chi^2(1) = 6.582, p = .005$) as were female counselors ($\chi^2(1) = 2.782, p = \text{n.s.}$).

Discussion

Effects of Counseling

Being in counseling at the Iowa State University Student Counseling Service appeared to have been a good experience for a majority of clients. On average, those who returned follow-up questionnaires reported a gain of 3.5 points, on a nine-point scale, on their initial presenting problem. Only eleven clients (12 percent) reported getting worse or not changing as a result of counseling.

While 3.5 points of change represented a relative reduction of severity, it was interesting to look also at the absolute state of problem severity, both initially and at follow-up. Clients entering the Counseling Service reported, on average, a problem severity of 4.84 or close to the anchor point "This problem bothers me very much." At follow-up the average client reported problem severity at 1.36 or just above the anchor point "This problem bothers me a little." Twenty-seven percent of the sample reported that their presenting problem no longer bothered them.

Relative change in problem severity was not associated with any significant findings in this report. This result also was found by Frank et al. (1957). Instead, the absolute amount of problem severity at follow-up was associated with attraction and termination variables.

It seems logical that an important part of therapy to clients was the removal, through the process of therapy, of uncomfortable feelings associated with their presenting problem. The data here suggest that clients do not monitor how much they have changed as well as whether or not their problem still exists and to what degree. Theoretically, this suggested that clients were more concerned with the outcomes of therapy than the process. This issue has not been previously addressed in psychotherapy research.

Change in problem severity was, for the most part, seen as a direct result of counseling. While few subjects attributed one hundred percent of their change to counseling alone, 60 percent of the subjects felt counseling was at least moderately responsible for their change. These results suggested that clients felt, in part, responsible for and capable of changing themselves. It would also suggest that counseling was not a passive process for the client, but rather was a working partnership with a counselor.

Beyond relief of their specific problems, clients also reported gains in several general areas of functioning as a result of counseling. Feeling better about themselves, being able to relate to others, and feeling better about the future were all seen as positive outcomes of therapy by a majority of clients. Better use of time was also perceived as a gain by some clients.

Clients further reported little need to resume counseling. Only 19 percent of subjects returning follow-up questionnaires felt a moderate or high need to resume counseling. For most clients then, counseling appeared to have moved them through their initial presenting problem to a point at which they felt comfortable enough to leave and report positive outcomes as a result.

Similar to a previous study (Rosen & Zytowski, 1977), the seeking of additional counseling was not related to expressed need to resume counseling. There was some evidence that those who did seek further counseling were more attracted to their counselors than those who did not seek other counsel, but this difference in attraction was not statistically significant. Those who did seek further counseling chose para- or non-professional aid such as clergy, friends, and parents.

In summary, the results of this study suggest that the effects of counseling provided at this counseling service were positive for a majority of its clients. Clients reported not only feeling less discomfort due to their initial presenting problem but also reported gains in several general areas of daily functioning. This lends support to the argument that counseling is an effective method for dealing with life-problems (see Bergin & Garfield, 1971).

Effects of Termination Associated with Outcomes

Reports of joint termination by clients were associated with less reported problem severity at follow-up. Those who terminated because counseling was no help or because they had other priorities for their time tended to report higher problem severity at follow-up. Clients who stopped going to counseling because they decided unilaterally that they were finished appeared, percentage-wise, to look more like joint terminators than other groups in their ratings of problem severity at follow-up.

Frank et al. (1957) have concluded that a client "...cannot improve under psychotherapy unless he remains in treatment" (p. 284). The data suggest that this is true. Those whom most would label as dropouts--clients who felt that counseling was no help or who had other priorities for their time--did not improve as much as those clients who felt therapy was complete.

Characteristics of Counselors and Clients Associated with Outcomes

Of eighteen people reporting a unilateral decision to terminate, either because they felt done or because they felt that counseling was no help, thirteen had male counselors. Thus, male counselors were associated with a larger percentage of clients who did not report joint terminations. Female counselors were associated with a higher percentage of

clients who reported jointly terminating. These differences in terminations were found among the professional staff but not among interns or practicum students. In summary, for this study, male professional staff were associated with a higher frequency of clients reporting some type of unilateral decision to leave counseling.

The number of visits a client had to the Counseling Service was not associated with any outcomes of counseling. These findings involving number of visits to the Counseling Service, coupled with the findings of client-reported termination suggested that each client has different needs for length of therapy (and, perhaps, mode of therapy). Unlike the results of McNair et al. (1963) and Taulbee (1958), these data supported the notion that quantity of therapy may not be the same as quality of therapy and that individual differences in response to therapy are an important area of concern in any outcome study (Bem & Allen, 1974; Kerr & Dell, 1976, LaCrosse & Barak, 1976).

The data on client-reported terminations and number of visits to the Counseling Service also suggested that what may be important for the client is a feeling of "doneness." That is, the clients felt that work on their particular problem was over, at least for the present. Clients who terminated because they felt finished, regardless of how the counselor perceived termination, were more likely to report

less problem severity at follow-up than were other types of terminators. The findings that some clients felt finished fairly quickly and left the Counseling Service supports the findings of Kirtner and Cartwright (1958b) and Frank et al. (1957) that some clients do get better quickly while others take more time.

Outcomes Associated with Attraction to Counselor

High attraction to counselor was associated with joint terminations, as perceived by both counselors and clients. Lower attraction to counselor was associated with feeling counseling was no help. These findings supported the notion that the clients' global attraction to counselor was, in some way, related to a decision to remain in therapy or leave (Lido, 1957; Hunt et al., 1959).

Exactly what attracts a particular client to a given counselor is unknown, although many attempts have been made to discover these dimensions (Kiesler, 1971). In this sample, professional staff were, in some manner, more attractive to clients than practicum students. However, experience level of counselor was not related to amount of problem relief.

Simons (1976) and Hill (1975a) found many interactions between sex and experience level of counselors and measures of outcome. These studies and others (Kirk & Headley, 1950; Fiester & Rudestam, 1975; LaCrosse & Barak, 1976) underscore the complexity of the interactions between client and

counselor. However, in this study, some support was given to the importance of client-perceived expertness as a building block in the counselor-client relationship (Strong & Dixon, 1971).

Clients reporting higher attraction to counselor felt more of their change was attributable to counseling than those less attracted to their counselors. Thus, a benefit of attraction may be the establishment of a working relationship with a counselor which ultimately served to reduce initial problem severity. Hans Strupp, in his latest thinking (Department of Psychology, Vanderbilt University, personal communication, 1977), has referred to this as the "Helping alliance," a partnership based originally on elements such as attraction to counseling.

The intent of this study was not to point to particular variables responsible for attraction. Rather, it was hoped that a global measure of attraction would be more relevant to predicting outcomes. In this study, the strength of global attraction was related to differential outcomes of clients.

Theoretical Implications

An hypothesis of this study was that global attraction to counselor was directly related to problem relief. This view was presented in the literature by Hunt et al., (1959). However, the findings here strongly suggested that this relationship was not direct.

Global attraction was found to have some impact on the type of terminations clients reported. Type of termination, in turn, was related to reports of problem severity at follow-up. Those clients who reported terminations that had the quality of being finished (joint terminations or unilateral client decision) stated less problem severity at follow-up than those who did not feel finished (counseling was not helpful, client had other priorities).

Attraction to counselor seemed to be an important variable in the client's decision to stay in therapy. Staying in therapy, at least for this sample, was associated with less problem severity at follow-up. Again, staying in therapy was a qualitative and not quantitative factor.

Given these findings, the following conceptualization was formed:

	global attraction	decisions about therapy	outcomes/levels of problem severity
counselor by client inter- actions	low	leave	high severity
	high	stay	low severity

While this model is quite simplistic, it represents two important theoretical considerations: The quality of the relationship between counselor and client is important to outcomes (Hunt et al., 1959) and improvement in therapy is conditional on remaining in treatment (Frank et al., 1957).

Clients who terminated because they felt finished

reported feeling better. This was true for both those clients whose counselor agreed that they were finished (joint termination) and for those clients who decided that they were finished (unilateral client decision). These clients groups did not differ from each other in number of visits to the Counseling Service. Quality of time spent in counseling seemed more important to clients than quantity of time.

At the same time, those clients who reported dropping out of counseling were not characterized by a particular number of visits to the Counseling Service. Much of the previous research on terminations has chosen to classify dropouts by the number of sessions attended (Kirk & Headley, 1950; Gliedman et al., 1957; Hiler, 1958). Findings from this study suggested that early terminators, and also remainers, are more appropriately classified by their own feelings about the therapy situation than by the number of sessions they attended.

Counselor impressions about the classification of clients as dropouts or normal terminators were not useful in this study. Clients seemed able to discriminate between different termination categories. The reliability and validity of clients' decisions may be questioned. The issue of who is better able to judge the process and outcomes of therapy, counselor, client, or independent rater, may never be settled. Regardless, the outcomes associated with client

ratings of termination seemed to make intuitive as well as theoretical sense and were more informative than counselor classifications of termination. In addition, clients, as consumers, would seem entitled to some voice in the therapy they receive.

Limitations of This Study

This study was designed as a first step in understanding some of the variables that intervene between the process of therapy and its outcomes. To this end, strict experimental controls were not imposed. Thus, the major limitation of this study was the lack of a non-counseled control group. While clients in general reported that some part of their change was a direct result of counseling, a non-counseled controls would have provided stronger evidence for the efficacy of therapy.

Further caution in the interpretation of these results was exercised due to the large differences in group sizes found in this study. Many of the results compared groups that were very different in size, including groups of less than ten members. It is possible that this may have affected the statistical outcomes reported here, although, especially in the case of ANOVA, the tests were fairly robust with respect to unequal group sizes. Thus, these results suggested certain conclusions rather than confirming them.

A third major limitation was the failure to collect all closed cases from the Counseling Service in a uniform manner. It was known that approximately 600 attraction scales were distributed during the time of this study. Yet, by the final mailing of follow-up questionnaires, only 200 cases were closed and returned. This left approximately 400 cases open, a number which far exceeded the capacities of the Counseling Service. How many of these 400 cases may have been dropouts from counseling or terminated clients and what effect they may have had on this study is uncertain.

There was a failure also to give all clients the LZAS after the initial counseling session. In comparing those clients for whom full data were available against those for whom a follow-up questionnaire was found, no differences in follow-up variables or demographic variables was noted. It is, nevertheless, impossible to know if attraction to the counselor was the same for these groups. Beyond client differences in attraction which could not be measured here, failure to distribute attraction scales may have been a random event for counselors, but it is equally conceivable that some type of bias was present.

Lastly, and in general, this study suffered the limitations of its methodology, that of a questionnaire study. Missing data were common within any particular subject's responses. In addition, whole sets of data (follow-up

questionnaire, LZAS) were missing for others. The return rate of the follow-up questionnaire was normal for a mailed survey (Kerlinger, 1964). Although some attempts were made to show that those who returned surveys were not different from those who did not, it is impossible to know whether these two groups were alike.

Research Implications

The follow-up questionnaire used in this study had several advantages. First, it returned both good quality and quantity of data for each client given its relatively short length. Secondly, it was relatively low in cost per client. Finally, and most importantly, it was highly flexible and adaptable to a wide range of research issues and counseling settings.

The target complaint approach also seemed particularly useful. It allowed monitoring of relative and absolute problem severity levels. It was also highly sensitive to the individual differences of clients. The follow-up questionnaire used in this study, thus, was seen as a valuable tool for future counseling outcome research.

The measurement of client attraction to counselor as a predictor of the course of therapy also appeared worthwhile. This study has suggested that there is a relationship between global attraction and clients' decisions to remain in therapy.

Further research is needed to more firmly establish this proposal. This would include collecting larger samples from a number of different settings.

The Laing-Zytowski Attraction Scale was, for this study, useful in measuring global attraction to counselor. The coefficient alpha reliability (.86) suggests that the items are relatively consistent in measuring what was assumed to be global attraction. Future research is needed to establish the validity of this instrument or to find other instruments which validly and reliably measure global attraction. Having found this instrument, norms and predicting scores could be established.

Once cutting scores which accurately predict remainers and terminators are established, further research might take two general paths. First, attention could be focused on discovering those variables which are most important in combining to form a global attraction and how those variables interact. Secondly, and more importantly for counseling, research could pursue those interactions which would be most effective in interrupting and modifying therapy for those clients predicted to be terminators.

Hypotheses and Overall Findings

1. Clients who reported low problem severity at follow-up viewed themselves as normal terminators. This included both clients who terminated jointly and those who made a

unilateral decision that counseling was finished. Amount of problem relief was not related to termination, suggesting that what was most important to the client was the absolute state of problem severity rather than the relative change in that severity.

2. Higher problem severity at follow-up was associated with clients who would appropriately be called early terminators. This group included those who felt counseling was no help and those who felt counseling was helpful but had other priorities for their time.

3. Higher attraction to counselor was associated with normal terminations from counseling. Lower attraction was associated with early terminations.

4. No direct relationship was found between attraction and problem relief. However, clients who remained in therapy, those reporting higher attraction, also reported less problem severity at follow-up. Clients who terminated early from therapy, those reporting lower attraction, also reported higher problem severity at follow-up.

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Appendix

Dear student:

As part of a continuing evaluation of the service of the Student Counseling Service at Iowa State University, we are asking our former clients to fill out this form. Please be honest in your replies. We want to know what is good and what is defective in order to improve what we do. Note that your name does not appear on this form. A number is used so that we may keep track of who has and has not responded.

1. Immediately below is the problem which you stated when you came to the Counseling Service:

Now, today, at the present time, how much does this problem bother you? Check the appropriate box:

☐ Not at all ☐ A little ☐ Pretty much ☐ Very much ☐ Couldn't
be worse

Indicate the degree to which your visits to the Counseling Service were responsible for any change in your problem:

☐ Not at all ☐ A little ☐ Pretty much ☐ Very much ☐ 100%

2. In the course of counseling, did any other thing emerge as something which you needed to give your attention to? If yes, write briefly what it concerned:

How much do you feel that this problem is relieved at the present time; how much progress on it did you feel you made?

☐ Worse than ever ☐ No change ☐ Slightly better ☐ Much better
☐ No longer a problem

3. What amount of change in the areas mentioned below do you feel was the result of your visits to the Counseling Service?

I feel about myself: ☐ much better ☐ somewhat better

☐ no change ☐ worse

I relate to people: ☐ much better ☐ somewhat better

☐ no change ☐ worse

I use my time: ☐ much more ☐ somewhat more ☐ no change
effectively effectively

☐ worse

I feel about the future: ☐ much more ☐ somewhat more
confident confident

☐ no change ☐ worse

4. I stopped going to the Counseling Service because:
(check one)

☐ Both the counselor and I agreed I was finished.

☐ I felt I had done enough, so I stopped going.

☐ I wasn't getting any help, so I stopped.

☐ I found counseling helpful but stopped going because I
I had other priorities for my time and effort (e.g.,
work, home activities, school, etc.).

☐ I did not find counseling helpful and I had other pri-
orities for my time and effort (e.g., work, home
activities, school, etc.).

☐ My counselor left the Counseling Service

☐ Other (explain, briefly):

5. Since you completed your visits to the Counseling Service, have you felt a need to resume counseling? (check one which most applies)

☐ None ☐ A little ☐ Moderately ☐ Very much

If you felt the need for further counseling but did not seek it, what were your reasons for not doing so?

6. Have you sought counseling from someone else since finishing your visits at SCS? ☐ Yes ☐ No

If yes, what kind of person or agency? (check those which apply)

☐ Open Line ☐ Clergyman ☐ Faculty member
☐ Private psychiatrist ☐ Friend ☐ Parent(s) ☐ Other
 (specify)

7. Are there any things you would suggest we change in order to improve our services? If yes, please describe them briefly on this sheet.

Thank you very much for your help. Please return this form to us in the postage-paid envelope which is enclosed.

Dear Counseling Service user:

Now that you have talked with a counselor for the first time, please take a moment to complete this short questionnaire. This information will not be seen by your counselor and in no way affects your receipt of further services.

Use the following scale and mark the responses which represent your feelings. You may notice that some of the items are very similar; please try, however, to read and respond to each one carefully.

VM=Very much

PM=Pretty much

DK=Don't know

PN=Probably not

CN=Certainly not

(circle one)

- | | | | | | |
|--|----|----|----|----|----|
| 1. I really could talk easily with this counselor. | VM | PM | DK | PN | CN |
| 2. Other students could be helped by talking with this counselor. | VM | PM | DK | PN | CN |
| 3. I'd stay away from this counselor no matter how bad I felt. | VM | PM | DK | PN | CN |
| 4. Most people would be uncomfortable about revealing their true feelings with this counselor. | VM | PN | DK | PN | CN |
| 5. I'd refer a friend to see this counselor. | VM | PM | DK | PN | CN |
| 6. I expect I would feel worse if I talked with this counselor. | VM | PN | DK | PN | CN |
| 7. I would prefer to talk to another counselor. | VM | PN | DK | PN | CN |
| 8. If I had a problem, I would expect that discussing it with this counselor would help me solve it. | VM | PN | DK | PN | CN |
| 9. I'd expect people to feel better after talking with this counselor. | VM | PN | DK | PN | CN |

- | | | | | | | |
|-----|--|----|----|----|----|----|
| 10. | If I knew that a friend was scheduled to see this counselor, I'd advise my friend to cancel the appointment. | VM | PM | DK | PN | CN |
| 11. | Most people would find it very difficult to talk with this counselor. | VM | PM | DK | PN | CN |
| 12. | I'd be attracted to counseling if I knew that I would be scheduled to see this counselor. | VM | PM | DK | PN | CN |

Thank you for your time. Please return this form to the box in the waiting area.

IOWA STATE UNIVERSITY
Student Counseling Service

Name _____
(Last) (First) (Middle/Maiden)

Local Address _____ Local Phone _____

(City, state and Zip code if other than Ames)

Please check your college:

Please check your level:

__Agriculture __S & H

__Freshman __Special

__Education __Vet Med

__Sophomore __Graduate

__Engineering __Frad

__Junior __not a student

__Home Ec.

__Senior

Major _____ Age _____ Sex _____ Year entered ISU _____

Referred by _____

Have you been a client of ours previously? __ Your counselor's
name: _____

The following information will enable us to evaluate the
service we provide. We will appreciate your participation,
but you may leave it blank if you prefer.

In the box below, please write a sentence or two which de-
scribes what it is that you are not able to do, which you
would like the Counseling Service to help you with.

In general, how much does this problem bother you? Check the box below:

Not at all	A little	Pretty much	Very much	Couldn't be worse
---------------	-------------	----------------	--------------	----------------------

Counselors sometimes record interviews for purposes of re-view. Recordings are never made without your knowledge: your counselor will request your permission.

Do Not Write In This Section

Date of Intake:

_____ Assignment:
 yr. mo. day

HSR _____ ACT _____ MSAT _____ ENG. _____ MATH _____

Release of Counseling Information

It is the policy of the Student Counseling Service of the Iowa State University, Ames, not to release information obtained through counseling without the written permission of the person who was counseled. We shall be glad to send a report to the person designated if the following release is signed.

I hereby request that information concerning me, which is in the possession of the Student Counseling Service, Iowa State University, be sent to:

(PRINT) Name of Person

Institution or Organization

Street

City

State

The purpose for which this information is to be used____

Date_____

Signed_____

Address_____
