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Effectiveness of Subprofessional Volunteer Counselors as Moderated by Two Different Training Approaches: Traditional vs. Human Relations.

Myron G. Mohr
Louisiana State University and Agricultural & Mechanical College

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The Louisiana State University and Agricultural and Mechanical College. Ph.D., 1971
Psychology, clinical

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EFFECTIVENESS OF SUBPROFESSIONAL VOLUNTEER COUNSELORS AS
MODERATED BY TWO DIFFERENT TRAINING APPROACHES:
TRADITIONAL VS. HUMAN RELATIONS

A Dissertation

Submitted to the Graduate Faculty of the
Louisiana State University and
Agricultural and Mechanical College
in partial fulfillment of the
requirements for the degree of
Doctor of Philosophy

in

The Department of Psychology

by
Myron G. Mohr
B.A., Kent State University, 1964
M.A., Louisiana State University, 1967
December, 1971
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The execution and completion of this research project could not have been carried out without the cooperation of The Phone volunteer counselors and staff members, Miss Cecile McDonnell and Miss Barbara King. The further assistance of Mr. and Mrs. William Costelloe, Miss Margaret Cascio, Mr. Terrence Minke and Mr. Dock Saller who served as judges for this project and Mrs. Mary Mevers who typed the manuscript is greatly appreciated.

The list of individuals to whom this author is indebted could go on and on, but hopefully the interest and involvement in the crisis intervention program enhanced by this research will reflect on all of those involved with The Phone and other similar services. A special note of appreciation for her support and encouragement is given to Margaret.
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# TABLE OF CONTENTS

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>ACKNOWLEDGMENTS</td>
<td>ii</td>
</tr>
<tr>
<td>LIST OF TABLES</td>
<td>iv</td>
</tr>
<tr>
<td>ABSTRACT</td>
<td>v</td>
</tr>
<tr>
<td>INTRODUCTION</td>
<td>1</td>
</tr>
<tr>
<td>METHOD</td>
<td>12</td>
</tr>
<tr>
<td>RESULTS</td>
<td>19</td>
</tr>
<tr>
<td>DISCUSSION</td>
<td>25</td>
</tr>
<tr>
<td>CONCLUSION</td>
<td>30</td>
</tr>
<tr>
<td>REFERENCES</td>
<td>32</td>
</tr>
<tr>
<td>APPENDICES</td>
<td>34</td>
</tr>
<tr>
<td>VITA</td>
<td>45</td>
</tr>
</tbody>
</table>
LIST OF TABLES

<table>
<thead>
<tr>
<th>Table</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>I. Interjudge Reliability Coefficients.</td>
<td>18</td>
</tr>
<tr>
<td>II. Mean Ratings for Training Groups and Control Group on Six Variables of Effectiveness.</td>
<td>20</td>
</tr>
<tr>
<td>III. Mean Ratings for All Subjects for Three Types of Calls.</td>
<td>21</td>
</tr>
<tr>
<td>IV. Mean Ratings, Across All Groups and All Calls, for College Students and Non-students on 6 Variables of Effectiveness</td>
<td>23</td>
</tr>
</tbody>
</table>
ABSTRACT

The present research was designed to study the effects of two different training approaches on the counseling styles of subprofessional volunteer counselors. The Phone, a 24-hour telephone crisis intervention program at Louisiana State University, requires a short intensive training program for all volunteers. This study developed two different training programs for one training period for The Phone. One training approach called traditional, was characterized as the didactic or lecture-form of training while the other training program, human relations, stressed trainee involvement and participation on the feeling level rather than the intellectual level.

The subjects used in this experiment were 21 college students and 21 non-college students who had volunteered for The Phone. During the training period 14 subjects participated in each of the two training conditions while the remaining 14 subjects received no training. Following the training period each subject received 3 types of role-played telephone calls which were taped and then rated by judges. The types of calls included: 1) general depression and loneliness, 2) controversial problems of drugs or abortion, and 3) information. The calls were rated on the variables of objectivity, composure, helpfulness, empathy, listening, and competency.

The results indicate that those subjects receiving training were rated significantly higher on all variables than the control group.
The subjects from the human relations group were judged significantly higher than subjects from the traditional group on the variables of helpfulness and empathy. Additional comparisons were made between the college student and the non-college student and on the type of problem presented.

The college student regardless of training is judged more empathetic. Interaction effects of group and type of call reflect little difference among groups for information calls, but the subjects from the human relations group are rated significantly higher for listening to the depressed caller and similar trends are indicated for the other variables.

It may be concluded from this experiment that the type of training program offered to counselors is reflected in subsequent behavior style. The approach for training counselors which emphasizes the counselor's feelings and participation has desirous effects over the traditional didactic training program.
INTRODUCTION

As psychological philosophies, regarding the approach to helping others, have moved away from the medical model the use of "indigenous" workers in the mental health field has become more accepted. Even though there is still some resistance to the use of subprofessional personnel dealing with the personal problems or crisis situations of others, the volunteers' function as a supplement to already overloaded counselors and therapists and their ability to reach people because of their nonprofessional identification assures their continued and wider use.

As Layton, Sandeen and Baker (1971) have pointed out, this increased use of the subprofessional in previously restricted areas of counseling creates new responsibilities for the professionals in the same field. Questions regarding the role, selection, training, supervision and consultation of subprofessionals used as counselors need to be given attention so that the client in need of assistance is given the best possible help. An additional reason for continued attention in this area is to avoid the lowering of professional standards which some professionals feel happens where subprofessionals are employed or volunteer.

While the use and role of the subprofessional have been written about, few experimental studies are done in this area. Those that are done are primarily concerned with the selection procedures or the
resultant effects of the service performed. Relatively little attention has been given to research on training of professional counselors (Layton, et al., 1971) and none is reported on training subprofessional counselors.

Studies involving the training and supervision of professional counselors have indicated that some forms of training have a positive effect. Betz (1969) reported that counselors receiving "affective" group counseling significantly increased in their ability to respond to the counselees' affect in a one-to-one situation. Hurst and Fenner's (1969) findings supported the effectiveness of group counseling for trainees in that it provides "a direct sample of some of the behaviors usually associated with counseling competence: openness, acceptance, empathy, sensitivity, and effectiveness in communication." Using a different training method Miller (1969) and Reddy (1968) demonstrated that reinforcement techniques can be used to teach empathic and understanding responses.

One exception to these studies is an investigation by Carkhuff, Kartochvel and Friel (1968) in which they found that clinical psychology trainees did not change in their therapist functioning from beginning to advanced stages of training. This led Carkhuff (1968) to question the necessity for professional training for persons performing the helping function even though in 1966 he had found that the levels of facilitative conditions offered by a professional counselor were significantly higher than those offered by the "best available friend" to
college students who were set to discuss problems they might have (Martin, Carkhuff and Berenson, 1966).

Could these "best available friends" have been quickly trained to offer the same level of facilitative conditions as the professionals or at a higher level than they did with no training? Jesse Gordon (1965) feels that subprofessionals can be trained to perform work now being done by fully qualified counseling and clinical psychologists. However, he has found that most agencies, when asked to train subprofessionals, "automatically fall back on the patterns established by their own professional training and so they institute workshops, lectures, and seminars." He states that by using these imitations of a university education "you are training a junior professional who knows a little about everything the professional knows," and concludes that training should be role specific and involve different methods of teaching.

Altucher (1967) assumes that learning to be a counselor is both an emotional and an intellectual experience with the emotional part most crucial. Training should help the trainee remain open to his own experiences, such as the group counseling method noted earlier. One form of training now being used extensively in organizations, community development programs and by individuals for personal growth is human relations training. Despite wide acceptance at the present time, little experimental evidence is available concerning the value of human relations techniques in the education of counselors, professional or
subprofessional (Betz, 1969). This study was designed to assess the effectiveness of two different training approaches for subprofessional counselors at a telephone crisis intervention service.

**Human Relations or Laboratory Training**

Human relations or laboratory training is a system of personal and organizational development that evolved from the work of many fields including psychology, education and business administration. This form of training has only been used for a little over 20 years and its philosophy is in contrast to traditional teaching methods and therapy approaches which used the medical model. Its primary use is to train individuals in organizational and interpersonal skills.

The philosophy and aims of the human relations or laboratory training have been summarized by Benne, Bradford, and Lippitt (1964). They view this approach as "that method of training based on the assumption that understanding and skills of participation can be learned validly only through processes of participation in which the learner is involved. . . . Training activities . . . are further designed to provide help from others in inventing and testing more integrative and less crippling patterns of response. . . ." (p. 16).

Some of the goals of human relations training as seen by Campbell and Dunnette (1968) are "increased self-insight or self-awareness concerning one's own behavior and its meaning in a social context; increased sensitivity to the behavior of others; heightened diagnostic skill in social, interpersonal, and intergroup situations;
increased action skills; and learning how to learn." These goals refer to the individual's ability to gain insight into his own feelings, to be empathetic, to be able to diagnose conflict situations and reasons for poor communication, to intervene at the interpersonal level and to be able to help himself and others achieve more effective and satisfying interpersonal relationships. All of these goals would be consistent with the descriptions of an effective counselor given by Carkhuff (1967) or Hurst and Fenner (1969).

There are many variations, or training designs, used in the laboratory method. These include: the training group (T-group), non-verbal exercises, verbal exercises, paper and pencil exercises, etc. The focus of these tools is on the different processes involved in the individual's developing skills in interpersonal relationships. In their writings, Schein and Bennis (1965), Cline (1964) and Cranbach (1955) relate the conflicting results obtained in process-outcome studies in the field of laboratory training. Campbell and Dunnette (1968) point out that research in the area of laboratory training faces unique problems which constrain any effort to explicate the effects of the method. Most studies of this nature investigate outcome in terms of perceived behavior change following an intensive laboratory training experience. This present study will look at the telephone counseling styles of individuals trained with human relations techniques, those trained in a traditional approach and those with no training.
Crisis Intervention Phone Services

Therapists and researchers frequently point out that emotional crises usually occur at night when helping resources are closed, for the most part (Resnik, 1968). The anxious, frightened, lonely or depressed person needs help at these hours perhaps more than at any other time. To utilize such care-giving resources as hospitals, mental health clinics, private practitioners and social agencies one usually must first admit that he is ill or that he has a problem too big for him to solve. He must see himself as sick or needing specialized help before he tries to enter the help-giving system. This situation often causes people to delay seeking help, if they do at all, until relatively simple problems become serious and overwhelming.

First line crisis intervention services or suicide prevention centers can deal with emotional problems before illness as such is identified. The availability of the telephone allows for immediate and anonymous counseling. There are now over 200 such services in the United States and almost all of them use subprofessional volunteers to man the services. A survey of training programs for the subprofessional used by these services indicates that most programs follow the traditional teaching method with on-the-job training. The usual training program consists of an orientation to the goals and purposes of the organization, an introduction to the specific procedures of the organization, an outline of the role or duties of the volunteer and information about what to do and how to do it given through lectures, role
playing, recordings and films followed by the experience gained in actual participation on the job (Cornut, 1960; Griglak; Shneidman and Farberow, 1968). The average length of these training programs is 20 hours, with the longest being 28 hours.

"The Phone," a 24-hour telephone crisis intervention and information-referral service, is typical of these services. It is located at Louisiana State University and serves both the campus and the city of Baton Rouge. It functions as an anonymous and confidential service with one identified LSU student line and one identified community line. "The Phone" has been in operation since April, 1970 and uses subprofessional LSU students from all areas of study and community residents from all walks of life as phone counselors. Following a selection procedure by the professional staff each volunteer goes through an intensive 15 hour training program in a two week period and then spends two shifts of approximately four hours each at "The Phone" with an experienced volunteer before he mans "The Phone" alone.

"The Phone" receives both problem-oriented calls and information calls. Analysis of the problem-oriented calls reveals that the highest number of calls concern: 1) personal crises--this type of call was characterized by those individuals expressing "free-floating" feelings of anxiety, depression and loneliness, 2) dating, 3) pregnancy or fear of pregnancy with further concerns about birth control and abortion and 4) drugs.
Effectiveness

In designing a training program for volunteer counselors practical considerations, such as time, breadth of individual backgrounds, etc., have to be taken into account since this is the volunteer's avocation, not his career. Further, as Betz (1969) has indicated, the role of the subprofessional should be adequately defined so that a short-term training program is designed to teach the specific aspects of that defined role. It is obvious that a training program has to include the specific policies and procedures of the organization in which the subprofessional counselor is to function, but what conditions or behaviors should be emphasized as facilitators for creating a helping relationship? Carkhuff (1967) has listed "the therapist-offered conditions of empathy, positive-regard, genuineness, and concreteness or specificity of expression" as a few dimensions which elicit the greatest client process involvement and ultimately the greatest constructive gains or change. Most crisis intervention services use the Rogerian model (Rogers, 1961) to define an effective telephone counselor. Rogers feels that the counselor must grow in terms of accepting and understanding his own feelings and will then be better able to understand others and open channels of communication.

A "Phone" counselor is not expected to function as a psychotherapist, in other words he is not expected to establish a contract for continuing meetings or calls. In a telephone crisis intervention service the counselor usually has only one anonymous interchange with
the caller and his role is to help the person in crisis define his situation and then assist in looking at alternatives available to the caller. Very rarely does a "Phone" counselor know directly whether a caller has made constructive changes or not as the therapist in a traditional counseling setting does.

To develop a local standard of effectiveness for subprofessional counselors 400 users or potential users of "The Phone" were sampled regarding their knowledge, acceptance and use of the service. Each respondent was also asked to list the five characteristics which he felt would describe an effective "Phone" counselor and to further list the characteristics representing an ineffective counselor. Six separate criteria or variables emerged from the most frequently occurring adjectives or short statements given by respondents. To further define each criterion "The Phone" staff volunteers were asked to sort approximately 100 of the responses into the criterion category which they felt the response was synonymous with or which one it best described. The six variables and their definitions included:

1) **Objectivity:** This variable was not seen as "professional aloofness," but rather as a nonexploitative relationship with the caller. Did the counselor avoid evaluative statements such as "that's good" or "that's wrong?" Was the counselor accepting and tolerant thus allowing the locus of evaluation to remain with the caller? Synonyms include: non-judgmental, unbiased and open-minded.
2) **Composure:** Did the counselor sound relaxed and appropriately friendly or was his own anxiety shown by a quavering voice, stuttering, stammering, mixing words, breaking each silence, etc.?

3) **Helpfulness:** Ability to be of assistance in guiding the discussion of personally relevant feelings and experiences in specific and concrete terms. Could this be done without giving advice and thus avoiding dependency? Did the counselor exhibit support and encouragement without being unrealistic? In calls for information was he able to help by giving the correct information or where it could be obtained?

4) **Empathy:** Facilitators communicate understanding of the caller's deeper as well as surface feelings through the use of reflection. This is not defined as sympathy. Was the counselor able to help the caller look at his feelings or did he remain on the content level as indicated, in one way, by continual questioning?

5) **Listening:** Did the counselor do most of the talking by interrupting and talking over the caller's words or did he allow the caller ample time to discuss his feelings? Did the counselor's responses indicate that he was hearing correctly? "Courteousness, patience and interest" were included in this variable.
6) **Competency:** This variable was an over-all quality and included statements by respondents such as "intelligent, knowledgeable, experienced, has had training, etc."

It is apparent that these conditions or qualities of effectiveness based on a local population sampling are comparable to those held by other researchers and theorists.

**Problem**

As was shown earlier there is some question whether training is valid for those individuals, professional or subprofessional, functioning as a counselor or helper to others. One attempt of this study will be to compare the counseling styles of trained subprofessional volunteers on "The Phone" with untrained subprofessional volunteers for "The Phone." It is clear that various methods of education are used in training programs for subprofessionals. The most commonly used method is the didactic or lecture type. Human relations training techniques are also quite popular and controversial in the field of training. This investigation will examine the effects of the traditional teaching method versus a training program utilizing the tools of human relations or laboratory training.

Since "The Phone" receives many types of calls, counselor effectiveness will also be evaluated on three different kinds of calls. An additional comparison will be made across groups between college student volunteers and non-college student volunteers.
METHOD

Subjects

The subjects used in this study were 21 Louisiana State University students (7 males and 14 females) and 21 community residents of Baton Rouge (5 males and 16 females). All of the subjects had been screened and selected for training for "The Phone." Fourteen students, ranging in age from 19 to 26, and 14 community residents, ranging in age from 22 to 60, received the experimental treatment or training and the additional 14 students and non-students in the same age ranges made up the control group by having no training.

Treatment Conditions

Two different training programs were developed for this "Phone" training period. Each training program consisted of five 3-hour sessions over a two week period and used the same training personnel. A training manual of assorted written material about "The Phone," other services and how to deal with specific calls, such as "pranks, chronics," etc., was made available to both groups. The specific content of the newly established criteria for effectiveness was given to both groups, but the teaching methods were different. The two training approaches were referred to as traditional training and human relations training.

1. Traditional Training Condition

The five sessions included:
a) An orientation meeting lasting 3 hours was given by the director and his assistant. Purposes and goals of "The Phone" were related, policies and procedures were explained. The role of the volunteer and the characteristics that make for an effective volunteer were discussed. Additional information concerning types of calls received, possible problems to expect, etc. was explained. This meeting was characterized as a lecture with a question and answer period.

b) A lecture with a question and answer period lasting 3 hours was concerned with the specific topic of drugs. This session was given by a student health physician who initially described the existing medical resources available on campus and in the city and then spoke about drugs--types, history, use, effects, etc.

c) The discussion of psychological problems, the underlying dynamics and possible ways of dealing with the person in crisis was handled under the same format as in previous sessions. The leader of this meeting was a member of the LSU psychology faculty. He also described and discussed the variables listed for phone effectiveness.

d) and e) The last two training sessions were used for role-playing. In these sessions trainees were instructed to form trios and while 1 member of the trio observed the other 2 members took roles of the caller and "The Phone" counselor respectively. The "caller" then presented a problem of his choice which the "counselor" practiced handling. Following this interaction the 2 participants along with the observer shared their impressions and feelings. Then members of the
trios exchanged roles. Following this members of the trios changed
groups so that each trio was made up of a new combination of trainees.
During both role-playing sessions there were two professionally trained
psychologists or social workers and several experienced "Phone" volun-
teers available as roving observers.

2. Human Relations Training Condition

The characteristic quality of this training approach was in the
use of human relations training techniques to illustrate the variables
for effectiveness which were given in lecture form in the traditional
training group. The five sessions included:

a) The orientation to the purpose, goals, etc. was preceded by
an hour of non-verbal exercises. These exercises stressed the aware-
ness of new or different feelings and the ability or inability to share
them with others.

b) During the meeting related to drugs there were two breaks of
30 minutes each in which participants formed small groups of 3 or 4
members to discuss what was going on and to use the leader as a con-
sultant.

c) Preceding the discussion led by the psychologist an exercise
in communication and listening was done by using the One-Way--Two-Way
technique (Nylen, Mitchell, and Stout) and one break for small group
discussion was made available.

d) Before the first role-playing session the concepts of feed-
back and exposure were illustrated with the Jo-Hari Window exercise and,
e) before the second role-playing session more non-verbal exercises were used along with fantasy games. Both of these role-playing periods then continued as in the traditional program.

Following both of these training programs each new volunteer spent two shifts on "The Phone" with an experienced volunteer. During the first shift he observed and during the second shift he took the calls.

Groups

The volunteers during this training period for "The Phone" were divided randomly into 2 different training groups with an even number of students and non-students in each group. Initially each training group consisted of 10 students and 10 non-students. During the training period 1 volunteer from the human relations group and 2 volunteers from the traditional group were counseled out of the program and 3 volunteers from each group were unable to complete the training program for various reasons. For the purposes of statistical analysis it was necessary to randomly drop from this study 1 student and 1 non-student from the human relations group and 1 student from the traditional group. The control group subjects were randomly chosen from newly screened applicants.

Procedure

During the training programs it was explained that each volunteer while manning "The Phone" would receive some role-played calls which
would be taped to be used for individual feedback and research. During
the new volunteer counselor's first 2 shifts on "The Phone" alone he
received 3 role-played calls which were taped by an electronic device
placed on the phone of the individual making the call. The role-played
calls were made by 10 psychology and social work graduate students who
had practiced role-playing different types of calls before making them.

Each subject received one call characterized as general depres­
sion and loneliness, another call relating to the controversial problems
of drugs or abortion and a third call asking for information relating
to campus policies or community agencies depending on the identifica­
tion of the subject. After the period in which the calls were recorded
the tapes were made available for the subject to hear and discuss.

The subjects in the control group received the same 3 types of
calls, but due to practical limitations it was necessary for them to
receive these calls in their homes (see Appendix C). They were in­
structed that these calls were for research purposes only and were not
part of "The Phone" screening procedure. The order of taped calls and
the individuals making them was balanced across groups.

Measurement

To measure effectiveness a rating scale (see Appendix A) was
developed from the criteria for effectiveness established previously.
This rating scale included 6 variables: 1) objectivity, 2) composure,
3) helpfulness, 4) empathy, 5) listening, and 6) competency. Each
subject was rated from 1 to 9 on these variables for each of the taped
calls made to him. Subject ratings were made by 4 judges. The judges were a female clinical psychology graduate student, a female Family Court juvenile counselor, a male academic and guidance counselor and a male experienced "Phone" volunteer. A 3 hour meeting was held with the judges to discuss the variables on the rating scale, their definitions, connotations and how they could be distinguished from each other. To obtain reliability measures among judges each judge rated the 20 previously taped practice calls which were similar to the experimental tapes. Reliability among judges was computed by the Pearson product moment correlational technique and the reliability coefficients appear in Table I. Identity of the subjects was not known by the judges and the order of groups and types of calls was balanced across judging sessions.
### TABLE I

**Interjudge Reliability Coefficients**

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<table>
<thead>
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<tbody>
<tr>
<td>1. Objectivity</td>
<td>.68</td>
</tr>
<tr>
<td>2. Composure</td>
<td>.59</td>
</tr>
<tr>
<td>3. Helpfulness</td>
<td>.83</td>
</tr>
<tr>
<td>4. Empathy</td>
<td>.73</td>
</tr>
<tr>
<td>5. Listening</td>
<td>.70</td>
</tr>
<tr>
<td>6. Competency</td>
<td>.81</td>
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</tbody>
</table>
RESULTS

Analyses of variance of mean ratings for each of the 6 variables were computed by the Statistical Analysis System Program developed by Barr and Goodnight (1971). Post-analysis of variance testing was done by using orthogonal comparisons. The .05 level of significance was required for both statistical procedures. Analyses of variance tables and F scores are shown in Appendix B.

Training Effects

Statistically significant variance was indicated among groups on all 6 variables for 3 types of calls. Table II gives the mean ratings for each group. Orthogonal comparisons between training groups and the group with no training reveal that those subjects receiving either training approach were rated significantly higher on all conditions than those subjects who had had no training.

In comparing the 2 training groups it can be seen that the human relations group was rated higher on all variables, but was significantly different on only "Helpfulness" and "Empathy." Significance was approached on the variable "Listening."

Types of Call Effects

Analyses of the means (see Table III) for all subjects for the 3 different types of calls show significant variance in 4 of the 6 variables: "Objectivity," "Composure," "Helpfulness" and "Competency."
<table>
<thead>
<tr>
<th></th>
<th>Human Relations</th>
<th>Traditional</th>
<th>No Training</th>
</tr>
</thead>
<tbody>
<tr>
<td>Objectivity</td>
<td>6.43</td>
<td>5.97</td>
<td>5.33</td>
</tr>
<tr>
<td>Composure</td>
<td>6.98</td>
<td>6.64</td>
<td>5.31</td>
</tr>
<tr>
<td>Helpfulness</td>
<td>6.83</td>
<td>5.90</td>
<td>4.57</td>
</tr>
<tr>
<td>Empathy</td>
<td>5.88</td>
<td>4.26</td>
<td>3.59</td>
</tr>
<tr>
<td>Listening</td>
<td>6.07</td>
<td>5.04</td>
<td>4.35</td>
</tr>
<tr>
<td>Competency</td>
<td>6.57</td>
<td>5.73</td>
<td>4.33</td>
</tr>
</tbody>
</table>

Table II--Mean Ratings for Training Groups and Control Group on Six Variables of Effectiveness
Table III—Mean ratings for all subjects for three types of calls

<table>
<thead>
<tr>
<th></th>
<th>Free-floating Anxiety</th>
<th>Drugs or Abortion</th>
<th>Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Objectivity</td>
<td>6.43</td>
<td>6.12</td>
<td>5.19</td>
</tr>
<tr>
<td>Composure</td>
<td>6.45</td>
<td>5.90</td>
<td>6.57</td>
</tr>
<tr>
<td>Helpfulness</td>
<td>5.43</td>
<td>5.40</td>
<td>6.48</td>
</tr>
<tr>
<td>Empathy</td>
<td>4.60</td>
<td>4.57</td>
<td>4.57</td>
</tr>
<tr>
<td>Listening</td>
<td>5.14</td>
<td>5.14</td>
<td>5.19</td>
</tr>
<tr>
<td>Competency</td>
<td>5.31</td>
<td>5.10</td>
<td>6.24</td>
</tr>
</tbody>
</table>
The calls concerning "free-floating" anxiety and drugs or abortion were defined as problem-oriented calls and were compared with the information type call on the variables found to have significant variance. Subjects were judged to be significantly less judgmental on problem calls than on those calls asking for information. In handling information calls all subjects were found to be significantly more composed, more helpful and more competent than when dealing with calls about personal problems. A significant difference between the problem-oriented calls occurred on the "Composure" variable only. The data indicate that subjects were seen as less composed when talking with a caller about the controversial issues of drugs or abortion than when the caller was concerned over depressive and lonely feelings.

**Student vs. Non-Student**

The comparison between college student counselors and non-college student counselors across all groups on the variables for effectiveness revealed a significant difference on only one variable: "Empathy." College students were judged more empathetic than non-students. The means for this comparison are shown in Table IV.

**Interaction Effects**

A significant interaction effect between group and call was found on the "listening" variable. Those subjects having training were judged to be significantly better listeners from the non-trained subjects on the 2 problem types of calls, but no different on information calls.
<table>
<thead>
<tr>
<th>Variable</th>
<th>Student</th>
<th>Non-Student</th>
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Table IV--Mean ratings, across all groups and all calls, for college students and non-students on 6 variables of Effectiveness
The human relations group was rated higher on listening when taking a call about feelings of depression than the traditional group in the same situation. Even though the mean ratings for "Listening" for the human relations group were again higher than the traditional group no significant difference was revealed between the two groups for the controversial calls or informational calls. There was a trend towards a significant interaction between group and call on the "Empathy" variable. It showed the same types of differences as shown on the "Listening" variable.

One triple interaction effect among group, call and type (student or non-student) was found to be significant on the "Empathy" variable. This triple interaction effect is difficult to interpret statistically. Mean ratings for the human relations group including students and non-students were higher than both of the other two groups on all types of calls. The traditional group is rated higher than the non-trained group on this variable except for non-students dealing with a call about general depression. On this same variable a greater disparity among ratings is seen across types of calls and the student vs. non-student category for the training groups than for the non-trained group. These were the only interaction effects showing significance.
DISCUSSION

Counseling effectiveness is not a dimension which lends itself to easy definition or quantification. The many subtle nuances of the client population imply that one rigid counseling style would not prove effective in all counseling situations and as was noted earlier in anonymous crisis intervention settings follow-up studies are critically limited due to practical considerations. Therefore judgments of how effective or facilitative a telephone counselor is have to be made on one initial non-face-to-face encounter.

By definition most telephone crisis centers attempt to avoid the stigma of "professionalism" and emphasize the importance of natural human qualities. It is these qualities, i.e., acceptance of others, warmth, willingness to help, etc. which some writers feel get suppressed with training in "how to help." This present study shows that a short intensive training program for subprofessionals enhances or strengthens such qualities.

The results show that "The Phone" counselors who had received either form of training were found to be less judgmental, more understanding and more willing to listen to those in need than volunteers who had had no specific "Phone" training. Also trained counselors in this area exhibit less anxiety in the counseling situation and are of more immediate direct help to callers with crises or needs for specific information. A specific training period assists the subprofessional in
defining his role and his expectations and thus allows him to feel some
degree of competency in handling different types of situations which
may arise on "The Phone."

With no training volunteers ask "What should I do?" and "how
should I do it?" responses of "be yourself" leave them in a void and
they resort to our culture's usual manner of assistance by telling the
individual in the crisis situation what to do, in other words advice
in the "Dear Abby" style. This is further borne out by the fact that
all subjects felt more relaxed, gave more immediate help and were
judged more competent when dealing with callers asking a specific
question.

In looking at the type of call which is handled, problem or
information, it is apparent that everyone is more facilitative in dis-
pensing specific details. The "objectivity" rating for information
calls was lower for all subjects because for these calls the middle
rating of "neither judgmental nor non-judgmental" was used.

As might be expected all subjects were more "composed" when
answering an information call and were also more "composed" or relaxed
with calls concerning a person's feelings of depression than when
dealing with the topics of drugs or abortion. Where the individual is
confronted with issues which involve society's value system and his own
and he is vainly trying to remain objective and helpful his own con-
flicts may be reflected not in what he says, but in how he says it.

There was no difference shown among types of calls on the
variables "Empathy" and "Listening" for all subjects; however, when comparing training groups with the non-trained group on types of calls those with training are considered better listeners for problem calls and show more empathy on the non-information calls. These two facilitative conditions are both qualities that everyone has to some degree, but are also the qualities which are considered lacking in interpersonal relationships in today's society. As an individual one may be aware of these qualities, but how these feelings can be communicated is what training should deal with.

While any training for crisis-intervention phone counseling may be better than no training this study has additionally shown that a training approach which involves the participants to a greater degree and offers them a direct opportunity to experience and express feelings during training has desirable effects over the traditional didactic training program. Those "Phone" counselors who were trained in the program using human relations or laboratory training techniques were more helpful and empathetic for all callers than those in the traditional group. A trend was also indicated that they were better listeners. While the traditional group was told what it meant to be aware of your own feelings and how communication styles affect others the human relations group got the opportunity to experience these concepts through the use of specifically designed exercises. In terms of specific content about "The Phone," drugs, and psychological dynamics the traditional group was given more information than the human
relations group since there were no breaks for discussion or experi­entential exercises. However, on those variables involving more direct interaction with the caller the human relations group was judged more effective. This would support Altucher's (1967) previously noted assumption that the emotional experience in learning to be a counselor is more crucial than the intellectual experience.

The individual who has the opportunity to examine his own feel­ings will have a better appreciation of the feelings of others is one of the tenets of laboratory training and this concept can best be exemplified in the variables of "Empathy" and "Listening." When com­paring the two training groups on specific calls the human relations group was judged better listeners and more empathetic for those calls about depression. Again the controversial calls created further prob­lems for the individual, but even in these situations the mean ratings for the human relations group were higher.

The student vs. non-student comparison showed only one over-all significant difference and this was on the variable "Empathy." The social milieu and mean age of the student group probably accounts for this ability to put oneself in the other person's position. Empathy is a concept which is now held to be an invaluable asset in interpersonal relationships by the recent youth movement in the present culture. In each of the three experimental groups the student population was rated higher on all other variables, although not significantly, than the non-student subjects. One observable difference in working with these
groups is that the students appear to volunteer for more altruistic reasons while the non-students see their volunteering as a civic duty.

It was also on the variable "Empathy" where a triple interaction was evidenced. It appears that on the problem type calls those counselors with human relations training are better able to talk on a feeling level than either of the other two groups. The extremely low rating for empathy given to non-students in the traditional group on general depression calls may reflect an intolerance or impatience to deal with feelings which seem to have no specific focus.

Those individuals who have training show an improvement in being able to reflect feelings appropriately in problem calls while non-trained subjects show no difference in empathy between a problem call and an information call. One effect of training, especially human relations training, may be in helping the counselor discriminate between when talking on a feeling level is more appropriate than content and vice versa.

Mean ratings were not at the extremes of the rating scale and this is not so unusual, however, it is expected that those ratings for trained groups would improve with experience. These ratings were made on the first two shifts the volunteer counselor manned "The Phone" following all phases of training. It is also possible that a rating scale of 7 or 5 would discriminate more precisely among groups.
CONCLUSION

There are overwhelming social needs requiring increased professional attention. However, a shortage of professional personnel and sometimes the inappropriateness of the underlying structures of the professions as they are presently constituted make the use of the sub-professional a necessity. This study has looked at a specific service manned by subprofessionals and found that short-intensive training does have beneficial effects. It has also shown that the type of training program offered is reflected in subsequent behavior style. Sub-professional volunteers for a telephone crisis intervention and information-referral service who have received training utilizing laboratory training techniques are seen as more helpful, more empathetic and better listeners than a similar group trained under a traditional teaching program.

Research such as this indicates that the use and training of subprofessionals for counseling increases professional standards in that it requires that the fully qualified professionals develop new and more advanced skills than those which are currently included in their repertoire. The professional's role is changing in this area in that he is becoming a trainer or consultant and traditional, graduate training for psychologists will have to be reexamined in terms of its goals and the content which it offers to the student.

This present study opens the way for many follow-up studies
involving such questions as: what are the long-term effects of these different training programs, and what are the personal feelings of the participants as they see the training program? A comparison between the trained subprofessional counselor and an academically trained counselor in a crisis-intervention center would be beneficial in determining whether short-intensive training programs for specific roles are as effective for the specific role they are designed as the longer, global professional training.
REFERENCES


APPENDICES
**APPENDIX A**

Judge __________________

Subject # ______________

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Objectivity
9— Completely non-judgmental
8— Allows caller to evaluate
7— Open-minded— little evaluation on part of counselor
6— More non-judgmental than not
5— Neither judgmental nor non-judgmental
4— More judgmental than not
3— Evaluative statements made by counselor
2— Biased as to callers behavior or ideas
1— Completely judgmental

Composure
9— Completely relaxed, but aware
8— Talks easily, no fright indicated
7— Little anxiety indicated
6— More composed than not, little inappropriate hesitation
5— Neutral— sometimes relaxed, sometimes not
4— Not composed, less than friendly
3— Long pauses— "uh, uh, uh"
2— Difficulty speaking— frightened
1— Extremely anxious— can't talk

Helpfulness
9— Completely helpful
8— Encouraging, excellent alternatives discussed
7— Alternatives offered, appropriate information
6— More alternatives than advice
5— Supportive
4— Alternatives, but inappropriate
3— Mostly advice
2— Advice, "this is what to do"
1— No help given whatsoever

Listening
9— Amount of talking and listening highly appropriate
8— Listens well
7— Listens fairly well
6— Listens with some patience— hears appropriately
5— Listens sometimes— then takes over
4— Hurries the caller
3— Not really hearing
2— Doing most of the talking
1— Not listening at all— doing all the talking
Empathy

9--Highly reflective on feeling level
8--Understanding appropriate feelings and indicated through reflection
7--Mostly reflective of feelings
6--More feelings reflected than not
5--Understanding reflected, mostly on content level
4--Remained completely on content level, direct questioning
3--Sympathetic understanding
2--Little understanding indicated
1--No understanding of caller's reasons for calling

Competency

9--Superior
8--Excellent
7--Very good
6--Good
5--Neutral
4--Fair
3--Poor
2--Very Poor
1--Extremely poor--incompetent
APPENDIX B

Analysis of variance for variable Y1
Objectivity

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Orthogonal Comparisons

Trained Groups vs. Non-trained Group - 6.30*

Human Relations Group vs. Traditional Group - 1.25 NS

Problem Calls vs. Information Calls - 26.16*

General Depression Call vs. Controversial Call - 1.71 NS
## Analysis of variance for variable Y2

**Composure**

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**Orthogonal Comparisons**

- Trained Groups vs. Non-trained Group - 10.356*
- Human Relations Group vs. Traditional Group - .40NS
- Problem Calls vs. Information Calls - 5.64*
- General Depression Call vs. Controversial Call - 7.5*
Analysis of variance for variable Y3
Helpfulness

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**Orthogonal Comparisons**

Trained Groups vs. Non-trained Group - 22.60*

Human Relations Group vs. Traditional Group - 4.52*

Problem Calls vs. Information Calls - 15.66*

General Depression Calls vs. Controversial Calls - .0009 NS
Analysis of variance for variable $Y_4$

**Empathy**

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**Orthogonal Comparisons**

Trained Groups vs. Non-trained Group - 11.726*

Human Relations Group vs. Traditional Group - 10.52*
Analysis of variance for variable Y5
Listening

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Orthogonal Comparisons

Trained Groups vs. Non-trained Group - 6.18*

Human Relations Group vs. Traditional Group - 3.35 NS

Trained Groups vs. Non-trained Group on General Depression Calls - 6.532*

Human Relations Group vs. Traditional Group on General Depression Calls - 9.65*

Trained Groups vs. Non-trained Group on Controversial Calls - 21.881*

Human Relations Group vs. Traditional Group on Controversial Calls - 2.62 NS

Trained Groups vs. Non-trained Group on Information Calls - .48 NS
### Analysis of variance for variable Y6 Competency

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### Orthogonal Comparisons

- Trained Groups vs. Non-trained Group - 16.86*
- Human Relations Group vs. Traditional Group - 2.65 NS
- Problem Calls vs. Information Calls - 17.83*
APPENDIX C

Following this present research an additional investigation was made to test for the situational difference in which the subjects were tested in this study. After the next "Phone" training program 14 of the newly trained counselors were randomly asked to take 3 role-played calls in their home environment. These calls were taped and judged using the same procedures as this present study.

These new ratings were then statistically compared with the ratings of randomly selected subjects from the experimental groups of the present study. The results indicate no significant difference on the 6 variables for effectiveness between trained volunteers who take calls in their home situation or in "The Phone" office setting. Therefore, it may be concluded that the situational difference is not accounting for the significant variance found in this present investigation.
VITA

Myron G. Mohr was born in Van Wert, Ohio, on November 25, 1942. He was graduated from Anglaize-Brow Local High School in Oakwood, Ohio in 1960. He then attended Kent State University and was graduated in 1964 with a Bachelor of Arts degree. In January of 1967 he received the Master of Arts degree in Psychology from Louisiana State University and is presently a candidate for the Doctor of Philosophy degree in Psychology from the same university. He is a member of the Sigma Xi, Psi Chi, and Pi Gamma Mu honor societies and is now serving as Director of The Phone with Student Health Services at Louisiana State University.
Candidate: Myron G. Mohr

Major Field: Psychology

Title of Thesis: Effectiveness of Subprofessional Volunteer Counselors as Moderated by Two Different Training Approaches: Traditional vs. Human Relations

Approved:

[Signature]
Major Professor and Chairman

[Signature]
Dean of the Graduate School

EXAMINING COMMITTEE:

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[Signature]
William G. Haag

[Signature]
Billy McLeary

Date of Examination:

October 8, 1971