

CHARLES B. TRUAX,  
*University of Calgary.*

## COUNSELOR FOCUS ON CLIENT ANXIETY SOURCE AND CLIENT OUTCOME IN JUVENILE DELINQUENTS

Virtually all approaches to counseling have directly and indirectly indicated that the counselor should focus on the client's anxiety source or threat source. This is explicit in some approaches (Truax and Carflhuff, 1967). The present study is an attempt to test the hypothesis that the greater the degree of the therapist's focus on the client's anxiety or threat source, the more favorable the outcome in group counseling.

### *Procedure*

A total of eight counseling groups with initial ten juvenile delinquents in each group ( $N = 80$ ) were seen by six different counselors. Two saw two groups each while the remaining four counselors saw one group each. The 80 juvenile delinquents were assigned to groups from the available populations of the two cooperating institutions. The delinquents were seen on a twice weekly basis for time-limited counseling consisting of twenty-four sessions over a time-span of approximately three months.

All group therapy sessions were completely tape recorded to allow for analysis of the actual degree of the counselor's focus on the client's anxiety threat source.

Clients were given a battery of psychological tests, pre- and post-therapy, which served as the basis measure of client outcome.

The client population consisted of forty male and forty female juvenile delinquents ranging in age from fourteen to eighteen with a modal age of sixteen years. Selection for group counseling was made randomly within the two participating institutions except that juveniles rated as immature behaving were excluded at the request of the administration. Clients were otherwise selected randomly from the respective population who met the following criteria: no planned release during the three-month period of counseling; no evidence of mental deficiency; and reading ability at fourth grade achievement level or better.

### *Counselors*

Six experienced counselors and four co-counselors who participated for training purposes were assigned to the eight groups within the samples from the participating institutions. The counselors as a group were relatively experienced in individual and group counseling. They were heterogeneous in orientation including two that would be described as client-centered, one could be described as didactic oriented, one as psychoanalytically oriented, and the remaining as eclectic in orientation.

TABLE 1  
Mean Values and Results of Analyses of Covariance for Effects of Degree of  
Counselor Focus on Client Anxiety source Upon Outcome Measures

Client Outcome Measures	Mean Values		F Values for Analysis of Covariance
	Hi Focus On Threat Source	Lo Focus On Threat Source	
Time Out of Institution in 1-year Follow Up	211.8	186.6	5.3*
Anxiety Reaction Scale, General Factor	18.7	-2.8	.8
Anxiety Reaction Scale, Social Self-Consciousness	6.0	-.3	1.2
Anxiety Reaction, Internalized Anxiety	1.2	-2.5	.9
FOC	.2	-.3	5.5**
Q-Sort, Self Adjustment	8.4	-2.6	28.6***
Q-Sort, Self-Expert r	.2	-.1	18.4***
Q-Sort, Ideal, Adjustment	2.5	-1.0	5.1*
Q-Sort, Self-Ideal r	.2	-.1	40.1***
Q-Sort, Ideal-Expert r	.1	-.1	5.3*
MCI V Scale	-1.8	-.6	1.6
MCI Constructive Personality Change Index	19.5	9.7	8.1**
MCI Family Relationships	2.7	-1.6	4.8*
MCI Social Relationships	6.1	-2.6	13.8**
MCI Emotional Stability	5.2	-.8	1.0
MCI Conformity	1.0	-.7	3.5
MCI Adjustment to Reality	5.8	-.4	9.8**
MCI Mood	1.1	-1.2	.9
MCI Leadership	2.8	-.9	13.8**

\*  $P < .05$ , one-tailed test

\*\*  $P < .05$ , two-tailed test

\*\*\*  $P < .05$ , two tailed test

#### *Measurement of Therapist's Focus on Client Anxiety Source*

A five-point Likert scale ranging from no implicit or explicit focus on the client's anxiety source to explicit focus on anxiety source in the client was used. This scale was rated by two experienced graduate students with an obtained Pearson correlation of .81. The ratings were made on a set of tape recordings consisting of two three-minute samples from the middle one-third of each counselor session successfully recorded (366 samples). These samples were obtained by running the tape recorder at re-wind to the middle section of the tape and stopping. The three-minute samples were then taken beginning with the first new utterance by a client or counselor and continuing for three minutes or until the conclusion of a statement (to preserve intelligibility). Samples were re-recorded individually onto small, single spools which were then randomly assigned code numbers and presented to the two raters in boxes of twelve samples.

#### *Measurement of Client Personality Change*

Although eighty delinquents participated, testing was available on only seventy-three since seven clients dropped out prior to the fourth group meeting. Additionally from one to three juvenile delinquents produced invalid testing on the measures derived from the Q-Sorts for self concepts.

The test battery in the present group administered pre and posttherapy included the Minnesota Counseling Inventory, with the eight sub-scales and the Truax Constructive Personality Change Index (CPC) derived from the MCI; the Truax Anxiety Reaction Scale with the three sub-scales of social

self-consciousness, internalized anxiety and general anxiety, and Q-Sort measures for self concept obtained from the Q-Sort for self and ideal concepts (Butler and Haigh, 1954) which included five specific measures of self and ideal concepts; and the Finney Palo Alto Group Therapy Scale (Finney, 1954).

The Q-Sort deck, (or 80 item deck) was used for only two Sorts (self and ideal) pre and posttherapy. The five measures obtained were: (1) change in the correlation between self and expert Q-Sorts from pre to posttherapy; (2) change in the correlation between self and ideal Q-Sort; (3) change in the correlation between ideal and expert Q-Sort; (4) change in the self Q-Sort adjustment scores; and, (5) change in ideal adjustment scores. The "expert" Q-Sort is a Q-Sort representing ideal adjustment made by a panel of 14 experts. The "adjustment" Q-Sorts, both self and ideal, refer to a method of scoring the Q-Sort on the basis of an imposed true-false type of dichotomy.

The Palo Alto Group Therapy Scale consists of a number of true-false items referring to the specific behavior engaged in by the patient during group psychotherapy itself. It seems to be essentially a measure of the level and extent of social interaction engaged in by a patient during group therapy. In the Forsythe and Fairweather (1961) study, their data indicated that it was the only measure in a large battery that was predictive of follow-up adjustment posttherapy.

Additionally, the time spent in a detention institution during a twelve-month follow-up served as a further and perhaps crucial measure of therapeutic outcome: since the aim of treatment or rehabilitation is to make delinquents into non-delinquents, their ability to remain out of the detention institution during the one-year follow-up is of central significance.

A Final Outcome Criterion (FOC) was added by transforming the following measures to Z scores and summing them, per delinquent: (1) Q-Sort self adjustment change; (2) Q-Sort self Expert change; (3) general anxiety change; (4) change in MCI Family Relationship Scale; (5) change in MCI Emotional Stability Scale; (6) change in MCI CPC Scale; (7) Palo Alto Scale change (8) time out of institution in follow-up.

### *Results and Discussion*

Change scores for each client in all eighteen individual test measures of outcome were obtained by subtracting the score earned pre-counseling from the score earned post-counseling for each delinquent. These change scores served as the basic estimate of degree of constructive personality change. Additionally, the time spent out of the institution during the one year follow-up and the final outcome criterion (FOC) served as the nineteenth and twentieth measures of outcome. To guard against possible differences in initial status in evaluating the hypothesis, analysis of co-variance to partial out the effects of pre-counseling scores in its effect on the change score was used in all data analysis.

To test the hypothesis of a positive relationship between the level of counselor focus on client anxiety source and outcome, analysis of covariance was performed on data. The obtained results are presented in Table 1, along with the mean values. As can be seen, the findings tended to strongly confirm the hypothesis. On thirteen of the measures significant differences favored

better outcome for counselors who focused most on client anxiety source as compared to counselors who focused least on client anxiety source. All mean differences except on the validity (V) scale favored high focus on client anxiety source. (Chi Square = 34.1,  $p < .001$ ). Further, on the one measure on which the low focus on anxiety source scored slightly higher, that difference was totally non-significant. When the absolute average level of change considered in terms of its direction as either improvement or deterioration, it can be seen that the juvenile delinquents receiving high focus on their anxiety source showed improvement on eighteen measures and deterioration on only one; whereas, the delinquents having low focus on their anxieties source show improvement on only two measures and show an absolute deterioration on seventeen measures (Chi Square = 23.7,  $p < .001$ ). Additionally the overall measure, the final outcome criterion, significantly favored a higher level of focus on client anxiety source.

Perhaps of most practical significance, delinquents who counselors focused most highly on client anxiety source spent more days out of the institution during the one-year follow-up.

In summary the present findings with juvenile delinquents in group counseling strongly supported the therapeutic relevance of the degree to which the counselor focuses on the client's anxiety source.

#### REFERENCES

- Butler, J. M., & Haigh, G. V. Changes in the relation between self-concepts and ideal-concepts consequent upon client-centered counseling. In, Rogers, C. R., & Dymond, R. F. (Eds.) *Psychotherapy and Personality Change*, Chicago: University of Chicago Press, 1954, 55-75.
- Finney, J. The Palo Alto Group Therapy Scale. Unpublished manuscript, 1961, Palo Alto Veterans Administration Hospital, Palo Alto, California.
- Forsyth, R. P., & Fairweather, G. W. Psychotherapeutic and other hospital criteria. *Journal of Abnormal and Social Psychology*, **62**: 598-604, 1961.
- Truax, C. B., & Carkhuff, R. R. *Toward Effective Counseling and Psychotherapy: Training and Practice*. Chicago: Aldine, 1967.

## L'INFLUENCE DE L'ATTENTION DU CONSEILLOR SUR L'ORIGINE DE L'ANXIÉTÉ DU CLIENT ET LES RESULTATS OBTENUS AVEC DES DELINQUANTS JUVENILES

CHARLES B. TRUAX

Cette étude vérifie l'hypothèse que plus le thérapeute concentre son attention sur l'anxiété du client, ou sur ce qui le menace, plus les résultats du counselling de groupe sont favorables. Huit groupes de counselling constitués de délinquants juvéniles (âgés de 14 à 18 ans) ont été formés et chaque groupe fut soumis à un total de 24 sessions s'étendant sur une période de trois mois. Afin d'identifier de degré de concentration, on fit l'analyse d'échantillons d'une durée de trois minutes prélevés de chacune des sessions. Le point de vue théorique adopté par les conseillers était variable.

Les mesures utilisées pour évaluer le changement étaient les suivantes: (1) le changement au Q-Sort de l'adaptation du moi; (2) le changement au Q-Sort Self Expert; (3) le changement dans l'anxiété générale; (4) le changement à l'Echelle des Relations familiales du Minnesota Counseling Inventory (MCI); (5) le changement à l'Echelle de Stabilité émotionnelle du MCI; (6) le changement à l'Echelle Truax de Personnalité constructive du MCI; (7) le changement à l'Echelle Palo Alto; et (8) le temps en surveillance écoulé en dehors de l'institution.

Lorsqu'on considère le niveau moyen absolu du changement obtenu, soit dans la direction de l'amélioration ou celle de la détérioration, on constate que les délinquants juvéniles pour lesquels on a accordé un degré élevé d'attention à la source de leur anxiété ont manifesté une amélioration à 18 des mesures et de la détérioration à une seule mesure; ils sont aussi demeurés plus de jours en dehors de l'institution durant l'année de surveillance. D'un autre côté, les délinquants qui avaient reçu peu d'attention n'ont manifesté de l'amélioration qu'à seulement deux des mesures et une détérioration absolue à 17 des mesures.

