

AGREEMENT ON THE CONCEPT OF THE IDEAL THERAPIST AS A FUNCTION OF EXPERIENCE¹

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PROBLEM

Fiedler⁽³⁾ showed that experienced therapists of different schools agreed more highly with each other than with non-experts of their own schools concerning the nature of the ideal psychotherapeutic relationship. However, Fiedler's concept of experience pertained only to time spent with patients in a therapeutic relationship or as an actual subject of therapy. He did not take into consideration the type of clinical sophistication and change in attitude which may result from academic exposure to therapeutic processes and to the theories behind them. His non-experts had already had some academic training and thus they were not completely unfamiliar with the theories, practices, etc. Perhaps the lack of large statistical differences between Fiedler's expert and non-expert groups was partly the result of a similarity in amount of academic training.

In further criticism^(1, 2) of Fiedler's study, there were some rather important weaknesses in his Q-sort which was weighted with banalities and extreme statements (*e.g.*, ". . . is hostile."). Sets of items were included with identical content but with different adverbs (*e.g.*, always . . . , sometimes . . . , never . . .) so that the items fell rather easily into categories ranging from most to least characteristic. Such items tend to compel agreement among sorters. Fiedler did not indicate any pretesting of the Q sort with the aim of maximizing item variability and minimizing the average correlations between sorts, which Apfelbaum⁽¹⁾ has demonstrated to be important. High item variability and low average correlation between sorts would seem to be important in studies involving "ideal" concepts because variability can be expected to be somewhat lessened already by social desirability and social stereotype factors.

Thus, while this study and its hypothesis are based on Fiedler's investigation of the therapeutic relationship, an attempt has been made to improve the method by using a carefully constructed and pretested Q sort and by using groups differing in amount of academic training as well as amount of therapeutic experience. The hypothesis is: Experienced psychotherapists will agree more than less experienced therapists on the qualities of the ideal psychotherapist. Here the term experience includes exposure to academic training as well as the actual experience with patients.

METHOD

Of the students beginning formal psychotherapeutic training, those with the least experience are nursing students undergoing training in psychiatric nursing therapy. Sixty-five *Ss* were selected from the Duke University School of Nursing to represent four different degrees of experience. Group I was composed of 19 volunteer freshman students who had no experience in psychiatric nursing. Group II was composed of 20 senior students who were about to begin their rotation in psychiatric nursing. They had not worked with psychiatric patients at this time, but they had taken several courses and seminars in psychology, sociology, and psychosomatic problems. Group II was also tested after their rotation (called Group IIa before and Group IIb after psychiatric rotation) to assess changes and to help assess differences between Groups II and III. Group III was composed of 20 senior students who had just completed their twelve-week rotation in psychiatric nursing in addition to the courses and seminars mentioned above. The psychiatric nursing

¹This study grew out of an undergraduate thesis for honors in Psychology at Duke University. The study was carried out under the auspices of and was partially supported by Grant M-1599, "Criteria for Effective Psychiatric Nursing Therapy", from the National Institute of Mental Health. The authors wish to express their appreciation to the other investigators on the project and to Kenneth J. Gergen, Jack W. Brehm, and Louis D. Cohen for their help.

rotation of twelve weeks was interpersonally and psychodynamically oriented and included lectures, conferences, experience on open and closed psychiatric wards, an intensive relationship with at least one patient, and individual supervision and counseling. Group IV was composed of all but one of the psychiatric nurses from the instructional and service staff of Duke Hospital who had more than two years of graduate experience ($N = 6$).

A sixty-item Q sort, constructed by Apfelbaum⁽¹⁾, with a forced normal distribution into nine categories, was used because of its advantages over Fiedler's Q sorts. Apfelbaum used single adjectives or short phrases referring to the same level of behavior and carefully pretested the items to maximize inter-item variance and minimize inter-person correlations in describing psychotherapists.

In order to assess whether changes were specific to the concept of the ideal psychiatric nursing therapist and to assess the possibility that differences in life experiences or age alone, rather than experience in psychiatric nursing, might influence differences in concepts of the ideal psychiatric nursing therapist, half of the Ss in Groups I, II, and III were asked to describe the ideal female high school teacher. This is a concept which might be expected to change with age or life experience of Ss as much (or as little) as the concept of the ideal psychiatric nurse but would not be expected to change as a result of training in psychiatric nursing. Also this concept referred to a role with which all the groups had had equal experience. The other 10 Ss in Groups I, II, and III described the ideal psychiatric nursing therapist. All Ss in Group IV rated the ideal psychiatric nurse first and the ideal female high school teacher at least a day later.

RESULTS

Within-group correlations were calculated, resulting in 45 intercorrelations each for ideal psychiatric nurse and ideal female high school teacher in Groups I, II, and III, and 15 each in Group IV. The mean intercorrelations for each group are presented in Table 1. The significance of differences between groups was evaluated

TABLE 1. WITHIN GROUP MEAN INTERCORRELATIONS

	Concept of the Ideal Psychiatric Nurse Therapist	Concept of the Ideal Female High School Teacher
Group I	.36	.40
Group II		
a. Pretraining	.54	.40
Group II		
b. Posttraining	.48	not administered
Group III	.49	.43
Group IV	.60	.34

(Table 2) by *t* tests of the differences in mean variances of item placement (the more item variance, the less agreement). Group I showed less agreement than all other groups and the differences in agreement were significant with all Groups but IIb. Group IV showed more agreement than all groups and the differences in agreement were significant with all groups except IIa. The level of agreement on the concept of the ideal female high school teacher was consistently moderate (about .40) and did not differ significantly among the groups. Thus the differences in agreement were specific to the concept of the ideal psychiatric nurse and it therefore seems unlikely that the age or life experiences of the Ss was the important factor in the agreement on the concept of the ideal psychiatric nurse. Thus the hypothesis is generally supported. The greatest increase in agreement was that between Groups I and IIa, accompanying considerable academic training but no contact with psychiatric patients.

TABLE 2. *t* TESTS OF THE DIFFERENCES IN WITHIN-GROUP MEAN VARIANCES OF ITEM PLACEMENT FOR THE CONCEPT OF THE IDEAL PSYCHIATRIC NURSE THERAPIST

Groups	<i>t</i>	<i>P</i>
I and IIa	3.49	.01
I and IIb	1.74	NS
I and III	2.00	.05
I and IV	4.09	.01
IIa and IIb	1.78	NS
IIa and III	1.56	NS
IIb and IV	2.49	.05
IIb and III	.02	NS
IIa and IV	.88	NS
III and IV	2.01	.05

To insure that the groups were agreeing on approximately the same qualities for the ideal psychiatric nursing therapist, composite Q sorts were constructed for each group and intercorrelated. The correlations ranged from .53 to .81 and suggested relatively high inter-group agreement. Examples of items on which all groups agreed were: Most characteristic; "Is able to sense other people's feelings"; least characteristic; "Reacts to most people in about the same way."

DISCUSSION

The results generally support the hypothesis that increased experience as a psychotherapist and, most especially, increased academic training in psychology, sociology, and psychosomatic medicine leads to more agreement about the concept of the ideal therapist. However, a focused and intensive period of training in the kind of therapy involved in this study did not result in an increase in agreement, as might be expected from Fiedler's results. Thus it may be that the degree of agreement that Fiedler found may have been partly due to shared academic experiences of his Ss. Concerning the effect of the training, considerable discussion among the investigators, their colleagues, the instructional staff in psychiatric nursing, and some of the Ss suggested that such a period of training tends to bombard students with so many experiences and role models that a temporary confusion of role concepts develops. A follow-up testing some weeks after the conclusion of such training might help to clarify whether such intensive clinical training leads to increased agreement on the concept of the ideal therapist at all.

The major increase in agreement found between Groups I and II, explained as a result of increased academic exposure to therapeutic processes and theories, may alternatively be explained by the fact that these groups differed not only in academic contact with psychiatric nursing but also in contact with general nursing. Group II had experienced at least two years of contact with patients on the surgical, obstetric, pediatric, and medical wards; Group I had no such experience. This suggests that the increase in agreement concerning the qualities of the ideal psychiatric nurse may in fact be reflecting an increased agreement on the concept of the ideal nurse in general. Comparison of the concept of the ideal psychiatric nurse with that of the ideal nurse might clarify the issue.

The present results suggest that adequately constructed and pretested Q sorts like Apfelbaum's reveal more interpretable results than some earlier Q sorts. For instance, the range between correlations of experienced and inexperienced therapists was much greater in the present study (.24 to .81) than in Fiedler's (.48 to .78). With the use of such instruments and sound methods, it is hoped that investigators can

begin to test some of Fiedler's other often quoted ideas, *e.g.*, that experienced therapists of different schools agree with each other more than they do with beginning therapists in their own schools and that the therapeutic relationship may not be greatly different from other kinds of interpersonal relationships.

SUMMARY

Four groups of nurses ($N = 65$), varying in experience in psychiatric nursing therapy, were asked to describe the ideal psychiatric nursing therapist or the ideal female high school teacher, using a Q sort selected because its construction and pre-testing suggested that it would have better psychometric qualities than the Q sort Fiedler used. Agreement significantly increased with increased experience except for Ss tested immediately after an intensive training period, which may have temporarily confused their role concepts. Agreement on the control concept, that of the ideal high school teacher, did not differ among the four groups; this suggests that the increases found in the concept of the ideal psychiatric nurse were not the result of differences in age or general life experience of the subjects. There was a large increase in agreement for the concept of the ideal psychiatric nursing therapist for the two groups which differed only in academic experience; neither group had had actual experience with psychiatric patients. It is therefore argued that Fiedler's findings concerning agreement about the ideal psychotherapist have been due, not only to weaknesses in his Q sort, but also to shared academic experiences of his Ss.

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IMMEDIACY IN TIME ATTITUDES BEFORE AND AFTER TIME-LIMITED PSYCHOTHERAPY¹

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PROBLEM

Maladjustment has been explained as "repetition compulsion"⁽¹⁾ or as the imposition of past perceptions upon present experience⁽⁶⁾. Repetition of the past involves not only inaccurate perceptual *content*, but more especially a structure-bound *manner of experiencing*.^(3, 7, 9) There is experiencing of structures and patterns instead of the richly detailed immediacy of present events.⁽⁸⁾ It follows that immediacy of experiencing is a mark of adjustment.

Increased immediacy of experiencing has also been viewed as inherent in the process of therapy.^(3, 7) A previous study⁽²⁾ found that successful clients discuss both present and past events, but were significantly more often observed to express themselves with immediacy to the therapist, and often found that the therapy situation itself was momentarily an instance of a problem, and often a new experience constituting a first overcoming of a problem. Theoretically, the present events of the therapy relationship constitute for the client an immediate experiencing which

¹The authors are deeply indebted to Marjorie Page for collaboration in the inception of this study, and to Ariadne Beck for collaboration in the analysis and interpretation of the data. The project was supported by the Wiebolt Foundation and the Ford Foundation.

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