

A STUDY OF CHANGE IN SELF-CONCEPT OF NURSING
STUDENTS IN LEADER AND LEADERLESS GROUPS
USING STRUCTURED TECHNIQUES IN SELF-DISCLOSURE

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DEDICATION

This dissertation is dedicated to the memory of my oldest daughter, Deborah Sue Malan. Debbie was a victim of a brutal homicide on August 18, 1977, in Tucson, Arizona. Her frequently expressed desire for me to receive a doctorate will never be forgotten. I offer this dissertation as a lasting memorial to "my Debbie."

"Daddy"

L. V. Atkins

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CHAPTER I

INTRODUCTION

Since the first T-group conducted in 1947 at Bethel, Maine, the use of groups has experienced a phenomenal growth. This growth has been due in part to the adoption of groups by industries, church and religious organizations, government agencies, educational institutions, and correctional institutions. Today groups are accepted as one approach in assisting people to develop improved interpersonal relations as well as to encourage personal development. Groups have also become a widely used technique in psychotherapy. Groups are so common and widely used that "today's American is fairly likely to come face to face with the question of membership in an encounter group" (Lieberman, Yalom, and Miles, 1973, p. 3) at sometime in his life.

Not only are groups widely used, but several different types have developed. Rogers (1970) lists ten different types of groups as a result of the diversity of emphasis. Included in his listing are T-group, encounter group, sensitivity training group, task-oriented group, sensory awareness group, body awareness and body movement groups, creativity workshops, organizational development group, team building group, Gestalt group, and Synanon group or game (Rogers, 1970). Other groups can be added to Rogers' list such as transactional analysis, Esalen eclectic, personal growth, marathon, psychoanalytically oriented, leaderless groups with encounter tapes, as well as psycho drama. The

list continues to increase as different and new techniques are developed.

Need for the Study

One technique that has been employed by group leaders is the structured exercise. The structured exercise is an outgrowth of simulation games and activities. A structured exercise is defined "as a leader intervention that includes a set of specific orders or prescriptions for behavior. These orders limit the participants' behavioral alternatives" (Lieberman, Yalom, Miles, 1973).

As might be expected, the use of structured exercises in the encounter group setting has met with both acceptance and opposition. One of the most outspoken critics of structured exercises is Argyris (1967). Argyris (1967) views groups that use structured exercises as not producing the sort of environment that will result in effective learning for the participants. However, others such as Trotzer (1973), Schutz (1967), and Sax and Hollander (1971) strongly encourage the use of structured exercises and/or games. These proponents assert that structured exercises produce desirable changes of behavior and thus are more desirable than having groups spend many sessions groping aimlessly for an understanding of their behavior. The empirical evidence available does not settle the issue.

Through personal participation in group settings, the writer was introduced to structured exercises. Workshops and seminars on the use of these exercises were also attended. As a result, the writer incorporated these structured exercises into his professional duties, as college counselor and later while employed by a community mental health

clinic. The persons involved in these groups verbally reported positive effects on and changes in their individual lifestyles. Some of these comments were recognized by the writer as being related to changes in the participant's self-concept. As a result of these experiences, the writer began to consider and desire additional information regarding the effectiveness of structured exercises on changing the self-concept of the group participants.

A part of the writer's professional duties included conducting group sessions with student nurses. In preparation for conducting these groups, the writer referred to the work done by Sidney Jourard (1963, 1964, 1971, 1974) who had completed some research in the area of self-disclosure and its usefulness to student nurses. In The Transparent Self, Jourard (1964) states that one of the changes that needs to take place toward helping nurses is a change "from within any particular nurse" (p. 152). This change can occur through self-disclosure. Jourard (1964) describes self-disclosure as "talking about oneself to another person." Jourard (1964) explicitly states that "'real' self-disclosure is both a symptom of personality health and at the same time a means of ultimately achieving healthy personality" (p. 24). An assumption that may follow is that self-disclosure brings about measurable change in one's self-concept.

As has been previously mentioned, groups differ with regard to emphasis. One emphasis is to eliminate the leader as a participant of the group. The antecedents for the leaderless group date from the 1920's when they were largely used as an assessment technique (McLaughlin, 1972). Following World War II, there was a rapid growth of people demanding counseling and psychotherapy. This led to

modifications and increased use of leaderless groups. Leaderless groups also became a topic of research. A somewhat recent movement in leaderless groups is "to extend the leaderless group model to normal, relatively healthy growth-seeking persons" (Taylor, 1975, p. 201). It has been suggested that leaderless groups give participants greater responsibility for their own learning. Some studies (Beyon, Reisel, and Davis, 1968) indicate that the self-administered nature of these groups promoted "positive changes in the subjects' ability to be more open, congruent, self-accepting, and self-motivating" (Taylor, 1975, p. 201). In a study conducted by Solomon, Beyon, and Weedmay (1968) where a program of materials was used to guide the interaction of self-directed, leaderless personal growth groups, the "results indicated that the participants in the self-directed groups showed significant, positive increases in self-concept compared to no-experience controls" (Vicino, 1973, p. 738). There are additional advantages to the leaderless group model. These groups are less expensive, since no professional leader is required, and more people can be reached than in one-to-one counseling.

In his book on small group research, McGrath (1966) states that "a large proportion of small group research studies are done in laboratory settings and relatively few in naturalistic or field settings" (p. 76). Much of the professional literature supports this.

It was with this background of professional duties and the information obtained from the professional literature that this study was developed.

Statement of the Problem

A review of the professional literature gives evidence that there

has been much research in the small group field. This research has produced diverse conclusions, as well as a diversity of terms, concepts, and processes. The studies of small group research by McGrath and Altman (1966) and Gazda and Peters (1973) substantiate this view.

The use of structured exercises in small groups has also received wide attention from those interested in professional research. The research is not conclusive and there is no systematic body of knowledge available on the topic (Inbar and Stoll, 1970). In addition, the issue of whether leaderless groups in general are helpful is equivocal and can only be resolved by further research (Seligman and Desmond, 1973). Some of the claims about leaderless groups are warranted, and it could well be that the dimensions of the leaderless group movement have not been fully recognized.

This study was specifically concerned with determining differences in self-concept between nursing students participating in a group with a professional leader and nursing students participating in a leaderless group. This investigation also attempted to shed light on the use of structured exercises in self-disclosure as used in both leader and leaderless groups. The structured exercises employed in this study were designed to encourage group members to participate in a dyadic encounter and to encourage self-disclosure, especially with regard to each participant's successful experiences. The study was done in the natural setting of a small school of nursing in Southern Illinois.

It is felt that more data is needed regarding the effectiveness or value of structured exercises used in leader and leaderless groups (Seligman and Desmond, 1973). These data could be helpful to those evaluating current use of these approaches.

In summary, this investigation attempts to determine differences in self-concept between nursing students participating in a leader group and nursing students participating in a leaderless group. Structured exercises in self-disclosure will be used by both groups. As a result of this study, it is hoped that some evidence will evolve that will be helpful in developing more conclusive evidence about structured exercises and leader and leaderless groups when used in a nursing education program.

Procedure of the Study

The review of the selected literature in Chapter II is divided into four sections. These include: (1) self-disclosure, (2) structured procedures used in small groups, (3) leaderless and leader groups, and (4) self-concept. The reviews include what research has been done, the populations included in the research, the statistical methods used, and the findings reported.

In Chapter III the writer outlines the design of the study to be conducted. This includes the null hypotheses, the measuring instrument selected, a description of the subjects, the statistical method to be used, and limitations of the study. Chapter IV presents an analysis of the data obtained from the study and a discussion of the findings. The last chapter includes the conclusions and recommendations made by the writer.

CHAPTER II

REVIEW OF LITERATURE

The use of groups in various settings, for diverse reasons, and by a variety of individuals and institutions, has led to rather extensive research and writing. When one scans the several indexes of periodicals, it soon becomes evident that there is a proliferation of writing about groups and their different aspects. Some of the literature is critical of the research reported on leaderless groups (Seligman and Desmond, 1973), and group procedures (Gazda and Peters, 1973). In addition, in referring to literature on the effects of games and simulation games used in groups, Inbar and Stoll (1970) state, ". . . we are very far from having anything resembling a systematic body of knowledge" (p. 53). McGrath and Altman (1966) agree that there has been a large amount of research in the small group field, however, they too express some very serious faults of this research. These same authors in their book, Small Group Research, indicate there is a diversity of terms, concepts, and operations used in small group research and that replication is almost non-existent. They agree that there is a need for standardization of terminology as well as a need for replication in small group research. These same authors indicate an additional need for a diversity of research settings.

The January, 1973, issue of Educational Technology contains a review of research in group procedures since 1938. Gazda and Peters

(1973) included 198 studies, using nine criteria to describe and summarize each of the studies conducted. As a result of their research, the authors made several recommendations, including "(1) a need for consistency in terms of operational definitions of terms; (2) replication of studies; (3) wider range of clients for group treatment; (4) follow-up measurements of the treatment groups; and (5) employing more sophisticated statistical analysis" (pp. 70-74). The authors are more critical of the research in Group Counseling than that done in Group Psychotherapy and Human Relations Training Groups. In the studies reviewed, certain changes in group research were observed. There has been a decrease in the number of sessions and the number of weeks over which the treatment was conducted. Also, there has been a relatively significant increase in the use of the Tennessee Self-Concept Scale in the research. Most of the changes observed have occurred since 1970.

There are many contradictions and much confusion in the literature related to group procedures. In referring to group counseling, Gazda and Peters (1973) write: "The effectiveness of group counseling has not yet been demonstrated unequivocally . . ." (p. 73). It is conceded, however, that recent studies report greater statistically significant findings in the predicted direction. On the other hand, Danish and Zelenski (1972) state that the empirical evidence to substantiate that T-groups or encounter groups have any significant influence in increasing interpersonal effectiveness is equivocal. Referring to Human Relations Training groups, Gibbs (1968) reports that evidence indicates that intensive group training experiences do have therapeutic effects. Contradictions such as these will no doubt remain with us largely because of the lack of uniformity in research done and the diversity of

group procedures. It is suggested that the practitioner of group procedures heed the adverse effects reported in the studies and select from the variety of methods and techniques those which will tend to produce positive effects for clients. Much of the literature supports the notion that significant changes do occur within and between clients and subjects that participate in group treatment with various group procedures (Stone and Gotlib, 1975; Clark and Culbert, 1965; and Danish and Zelenski, 1972).

Self-Disclosure

One of the proponents in the research of self-disclosure is Sidney Jourard. Jourard (1971) indicates that through mutual self-disclosure only, do people come to know one another. Many people are fearful of disclosure and limit self-revelation to safe and superficial topics. Jourard's (1974) research confirmed that "one of the most powerful correlates, if not determiners, of one person's self-disclosure was self-disclosure from the other person in the dyad" (p. 358). There are certain conditions under which people will fully disclose themselves to others. These conditions include: (1) perception of the other person as trustworthy, (2) considerable measure of security and self-esteem, (3) for some people, a stranger, and (4) willingness of the other person to disclose himself, the most powerful condition. Research conducted by Jourard (1974) "has shown that people tend to disclose themselves to one another at a mutually regulated pace and depth" (p. 223). Jourard (1974) cautions that one should not assume the sheer amount of self-disclosure between participants in a relationship is an index of the health of the relationship of the persons. Other factors are

timing, interest of the other person, appropriateness, and effect of disclosure on either participant. Jourard (1971) has developed exercises to help people with a feel for the pleasure and anxieties of mutual self-revelation, as well as a Self-disclosure Questionnaire. This questionnaire assesses the extent to which one has discussed certain data about himself with important people in his life. The instrument has been adapted for use by other researchers. Self-disclosure has also been the topic of the following researchers.

Meador (1971) observed that the level of self-disclosure deepened and became more meaningful as the group experience progressed. Meador (1971) hypothesized that for each individual in a basic encounter group there would be positive process movement. The results show that individuals can make significant gains in their process levels of self-disclosure in a weekend basic encounter group. Individuals moved from a distancing of feelings, rigidity, and past orientation to all owning feelings to be expressed in the present, risking relating on a feeling level, and experiencing the inner-self as referent for behavior.

In a study with 252 urban Indian females ranging in age from 12-18 years, Sinha (1972) concluded the extent of self-disclosure varies with the advancement of adolescence. Mid-adolescence seems to be the period of most inhibitions and taboos on disclosure for Indian female adolescents. Late adolescence is when they start disclosing themselves. Sinha (1972) reports that this variation of self-disclosure at different age levels is a true and significant variation at the 0.001 level. These same adolescents also differed from each other in their self-disclosure at different levels of age development.

In another study of self-disclosure, Culbert (1968) attempted to

assess the effects that more or less self-disclosing trainer behavior had upon the members of two T-groups. Culbert (1968) suggests there is some "rating which characterizes the optimum level of self-awareness for T-group participation, and the present data indicate that it can be achieved with or without high amounts of trainer self-disclosure" (p. 71). Early attainment of this optimum level is to the group's advantage. It seems then, from Culbert's (1968) study, that during early meetings of the group, self-disclosing trainer participation is beneficial. The trainer provides the model, for self-disclosing participation, and by gradually pulling back frees members to concentrate on their involvements with one another, as well as with the trainers, as they see fit.

Danish and Zelerski (1972) observed that participants of structured group interaction (SGI) commented "about the difficulty in finding topics they wished to discuss (p. 54). This led the researchers to include in their procedures attempts to provide the group members possible content areas of discussion. An adapted self-disclosure questionnaire was developed, and for each group, a self-disclosure questionnaire was developed that focused on that group's common problem or situation. Live models were employed to demonstrate effective interpersonal behavior. Most of the time was spent in dyads, but some group sessions were conducted. To facilitate the transfer of learning, homework assignments were used. The group leaders were consultants. Danish and Zelerski (1972) indicated that research is still needed to assess the effectiveness of SGI, but they conclude that the future of SGI as a technique to facilitate interpersonal effectiveness seems promising.

In his study to examine the feasibility of three methods of

learning verbal self-disclosing behavior, Boyum (1972) cautions against making inferences beyond the type of population in his pilot study. The population was undergraduate students from the University of Northern Colorado who volunteered to participate in the study and were not truly random. Nevertheless, some of the conclusions are worthy of consideration. Boyum (1972) observed that neither a handout or a videotape technique contributed significantly to levels of self-disclosure in a 90-minute isolated dyad encounter. He concluded that the best predictor of self-disclosure in the isolated dyad was the subject's perception of his partner's level of self-disclosure. Boyum (1972) also concluded that self-disclosure is a very complex kind of behavior which makes measurement difficult. It was indicated in the study that the subjects wanted to let others come to know and understand them better. It was concluded that in order to encourage this, new and better ways are needed to help people come to know and understand one another for what they really are.

Self-disclosure is frequently accomplished through self-awareness. Argyris (1967) conducted a study related to man's need for self-awareness. Argyris (1967) suggests that creating conditions when the person himself and others are minimally defensive, valid information from others is obtained that helps meet this need for self-awareness. One approach to creating this appropriate condition is through laboratory education. Argyris (1967) attempted to create conditions where the individual can define their own goals, the paths to their goals, and the strength of the behavior that they wish to overcome. Although the model is aimed toward the classroom educator, in a sense the group facilitator is also an educator; and for both, it is essential they

understand the importance of self-awareness, especially to the members in the group and/or classroom. Argyris (1967) also states that more research was needed on the several issues he presented.

The studies conducted by Clark and Culbert (1965) support the position that the group is a genuine therapeutic experience. The two-person interaction between members of T-groups seemed to be the most significant determinant of change in awareness and behavior of individuals. The study reports that personality changing occurred in T-groups and that such changing occurred when two members were acting therapeutically toward each other. It also supports the theory that interpersonal behavior is the prime determinant of therapeutic growth. Clark and Culbert (1965) suggest that the group facilitator can use himself as a model for therapeutic behavior in the group.

Structured Procedures in Groups

The Kentucky Group (1973) conducted a study at the University of Kentucky to attempt at clarifying the differences of simulation, gaming, and role-playing as used in groups. The Group identified some distinctions and constructed the Kentucky Simulation Model. This Model became the standard operating procedure for the Group as they researched new and different ideas related to simulation, gaming, and role-playing. From this Model, it is indicated that those attempting to understand the different activities of simulation, gaming, and role-playing, do so by considering the environment where the activities are employed, the activity, and the participant latitude. The Kentucky Group provided a model which can be used by others and did not indicate effects of or a preference for any particular technique.

The use and/or non-use of simulation, gaming, and role-playing is another topic of controversy in the literature of small group procedures. For example, Gazda and Peter (1973) report that "There is no clear evidence as yet to indicate differential effects of programmed and non-programmed groups" (p. 71). One of the unorthodox studies done on programmed groups was conducted by Aronin (1974). In his study, subjects were kindergarten and first grade children. Cooperation between the counselor and physical education teachers led to a program to strengthen a child's self-concept while improving sensory-motor skills. Small group activities were utilized to develop coordination. These activities included walking on balance beam and other similar physical activities aimed at improving sensory-motor skills. Counselors and participating teachers produced subjective evaluations of the children's progress in (a) social relationships, (b) amount of involvement in school activities, and (c) increased coordination. Positive results were obtained.

Closely related to Aronin's (1974) study, is the research done by Crocker and Wroblewski (1975). Several helpful functions of recreational games in group counseling were suggested. Recreational games may be used as follows: (a) as projective techniques, (b) to set up a situation in which anxiety about a certain condition can be confronted and dealt with, and (c) as an opportunity to deal with the rules of the game as an analogy to living by acceptable norms of society. In addition, recreational games allow a player's childlike playfulness to emerge, create a safe and permissive climate in which individuals can experiment with new behaviors, and may help participants learn coping behavior. Crocker and Wroblewski (1975) suggest three criteria to

govern the selection of a recreational game for use in small group counseling. These criteria are (a) the game should be familiar to the group or simple to learn so little time is spent in learning the rules, (b) the game should have clearly helpful effects that are understood by the counselor, and (c) these effects should be applicable to the group members. These authors point out that "games can enhance the efficacy of counseling but cannot replace a warm, human relationship" (Crocker and Wroblewski, 1975, p. 457).

Material written about group counseling in popular magazines and books such as Joy (Schutz, 1967) have tended to confuse the public's perception of the group process and purpose. As a result, when counselors and group facilitators utilize different techniques, the participants are somewhat reluctant and hesitant. Communication exercises are frequently associated with sensitivity training, encounter groups, and other similarly named groups. It is, therefore, helpful and almost a must for the counselor to have a rationale that will clarify and explain the use of communication exercises (Trotzer, 1973). Trotzer (1973) suggests using communication exercises in group counseling for initiation purposes, facilitation, and termination or bringing closure. There are difficulties that may arise, such as counselor creating a dependency situation on the exercises used and the counselor not choosing an activity that will benefit the group. Trotzer (1973) warns that using communication exercises to facilitate movement is difficult to master. Exercises most effective for facilitative use are "in response to a situation that has emerged in the group" (Trotzer, 1973, p. 353). Trotzer's (1973) conclusion is that structured exercises such as communication activities and methods should not be used by the counselor

just for the sake of having something to do or because they might be fun. Such exercises if applied properly "do add flexibilities and breadth to the group counseling process" (Trotzer, 1973, p. 377).

A successful group counseling project in which communication games were used convinced Blaker and Samo (1973) that a valuable untapped source for improving emotional climate are the kinds of positive feedback that students were eager to share. After the counselor had described the rationale of the groups to be conducted, sent information to parents, and elicited the support of administrators and teachers, groups were obtained from high school freshmen who volunteered. Modifications were made of those communication games available from several resources. The games played a very important part in helping the freshmen to "overcome their reluctance to look at and talk with fellow group members" (Blaker and Samo, 1973, p. 49). Games were used by the counselor only when required to motivate interaction and reduce tension. The action-oriented games and games that were more visual were found to be the most productive. Subjective data were obtained from participants, counselor observations, and general comments from teachers, parents, and students. The data indicated that attitudes and relationships were generally "improved for the students who were in the groups" (Blaker, 1973, p. 49).

Landreth (1973) points out that structuring may be accomplished in other ways than with exercises. He gives some suggestions of how a counselor can structure groups verbally, as well as through his own behavior. He asserts that structuring may be helpful to both the counselor and group members; and if handled properly, "a facilitative relationship will be established which provides the freedom and security

necessary for growth-promoting self-exploration" (Landreth, 1973, p. 374).

Additional support for the effectiveness and usefulness of structured exercises used in groups is found in the studies reported by Bender (1973) and Levin and Kurtz (1974). The former encourages elementary school counselors to use structured exercises to enhance their group work. The latter reports on the effective results of using structured exercises in Human Relations Training.

Leader and Leaderless Groups

In addition to different techniques or tools, there is also interest in group counseling and psychotherapy in alternative therapeutic strategies. Rising on the scene are the groups that meet without designated or professional leaders. These groups are usually labeled leaderless groups. Although through usual group dynamics, a leader will emerge. Leaderless groups are so named because no specific group member has been assigned the role of leader and frequently there is not a professional leader included in the group. Leaderless groups have been and are used in diverse settings such as leaderless discussion groups, educational settings, psychiatric hospitals, and peer self-help groups. The antecedents for speculations about leaderless groups date from the 1920's; and until the 1960's, the leaderless group procedure was used as an assessment technique only. Psychoanalysts were the first clinicians to experiment with leaderless group psychotherapy sessions.

There is also controversy over the effectiveness of leader and leaderless groups. According to Siligman and Desmond (1973), Wolfe and Schwartz opposed the use of leaderless groups, that is, groups that met

regularly without a professional leader. It is asserted that although group members of leaderless groups communicate, "they are communicating pathology . . . without working through . . . problems" (Seligman and Desmond, 1973, p. 73). In their review, the same authors reported that continuous leaderless groups are "more powerful than groups with leaders in producing personal and group growth" (Seligman and Desmond, 1973, p. 73). Some of the advantages of having the leader absent is there is more group cohesiveness, it stimulates development of separateness and independence, and the group members are often more receptive to feedback from another group participant than from the leader (Seligman and Desmond, 1973).

In their review on leaderless groups, Seligman and Desmond (1973) reported that some specific kinds of groups were successful in leaderless functioning. The type of subject was crucial. For example, the more successful leaderless groups were composed of young, intelligent members who had acute rather than chronic problems. Leaderless groups receiving structured feedback were more successful, and previous experience of the subjects in therapy or in therapy groups enhanced progress of the leaderless groups. Seligman and Desmond (1973) state that the future of leaderless groups looks promising but also bears careful watching.

Katzman (1972) concluded from her study that leaderless group counseling does effect change in autonomy at the 0.04 level, social extroversion at the 0.02 level, and anxiety at the 0.03 level, in the direction of increased personal autonomy, greater interest in relating to others, and less anxiety. At the same time, Katzman (1972) stated that there was no significant change in areas of interpersonal feelings

or self-concept. Katzman (1972) recommends further that research and practice in leaderless group counseling is needed.

One innovation of leaderless groups is the Encountertapes (Taylor, 1975). The proponents of this approach believe that such groups promote positive changes in the subjects' ability to be more open, congruent, self-accepting, and self-motivating (Taylor, 1975). A study was conducted to investigate the effectiveness of the Personal Growth Encountertapes in bringing about an increase in rational thinking, the feeling of having fewer problems, and positive changes in how people feel others view them (Taylor, 1975). Participants reported no overall increase in experiencing those factors upon which the Encountertapes were based. Half of the group members believed that a group leader who could get the group more involved was necessary (Taylor, 1975).

McLaughlin, Davis, and Reed (1972) studied three types of group leadership on the self-perception of undergraduate nursing students. It was concluded that in a self-directed group, no indication was found that psychological injury would result (McLaughlin, Davis, and Reed, 1972). Also, the "participants reported a positive response toward the leaderless group format" (McLaughlin, Davis, and Reed, 1972, p. 248). These authors supported the need for further experimentation to study the effectiveness of leaderless groups (McLaughlin, Davis, and Reed, 1972).

Nursing programs have been a leader in the development of differing modes of interpersonal small group experiences (McLaughlin, Davis, and Reed, 1972). Partly due to the scarcity of qualified persons to conduct such groups in schools of nursing, alternative group formats were considered. These alternative formats included the alternate

group format and leaderless group sessions.

During the Fall Quarter in 1969, 66 fourth-year baccalaureate nursing students at the University of California (San Francisco) participated in a study (McLaughlin, Davis, and Reed, 1972) of group leadership structure. In two of the conditions of the study, a group leader was included. The third condition met with a leader the first meeting; after that, programmed tapes were used. The group was assured that a leader would be near-by and could be summoned for assistance if needed. It was concluded from this study that the group condition using the programmed tapes displayed the highest amount of personal self-disclosure, discussed nonpertinent or unrelated topics less frequently, and had a relatively low amount of interactive communication as well as a lesser amount of laughter within the group (McLaughlin, Davis, and Reed, 1972). The authors also concluded that the use of programmed tapes "has a place in the repertoire of leadership formats established for small group experiences with undergraduate nursing students" (McLaughlin, Davis, and Reed, 1972, p. 256).

Self-Concept and Self-Evaluation

There are two general theoretical positions of self-evaluation as related to self-concept. The self-enhancement theory (Dittes, 1959) implies that everyone has the need to have favorable attitudes toward himself, and that the more this need is frustrated the more strongly one will wish to have it satisfied. The need for self-enhancement arises as one evaluates the self-concept.

The consistency theories (Festinger, 1957; Heider, 1958) imply that one should react more favorably to evaluations from others which are

consistent with one's initially held impressions about himself.

Shranger and Lund (1975) examined differences in the reactions of people with generally high or low self-esteem to favorable or unfavorable evaluative feedback from others. They also assessed concurrently several ways in which such individuals might differ in their reactions to evaluative feedback. Shranger and Lund (1975) report results that showed little if any support for the self-enhancement theory. The most salient way high and low self-esteem individuals differed in their response of evaluative feedback was in the credibility they ascribed to their evaluator. There are strong tendencies for people to describe themselves positively. The person who has a high self-esteem defends himself more against negative feedback (Shranger and Lund, 1975) and tends to assume that the interviewer held much more favorable impressions of them than did the low self-esteem subjects (Shranger and Lund, 1975). It was reported that there was no indication that low self-esteem subjects had an actual preference for unfavorable outcomes as compared to favorable outcomes (Shranger and Lund, 1975).

Both self-disclosure and self-evaluation are employed by persons in developing their self-concept. Through mutual self-disclosure with another person, one can know the views other people have of them. This can then be utilized by that person for self-evaluation and possibly making changes in their self-concept. Studies do not support the notion of automatic and cause-and-effect processes. Certain conditions must be present before people will disclose themselves fully and authentically. The same is true for self-evaluation. Leader and Leaderless Groups using Structured Techniques can enhance these conditions.

Summary

The proliferation of literature related to groups in psychology and education has been an underlying factor of some of the present misconceptions about the topic. A theme which reoccurred in some of the literature reviewed was the need for replication of studies (McGrath and Altman, 1966, and Gazda and Peters, 1973). Contradictory results were observed, and the standardization of terminology was recommended (McGrath and Altman, 1966, and Gazda and Peters, 1973).

It is through mutual self-disclosure that group members come to know one another better. As the group process progresses, individual group members make positive movement and self-disclosure becomes more meaningful. The amount of self-disclosure is influenced by diverse conditions. These conditions include the age of the individual group members (Sinha, 1972); the group leader and/or trainer (Culbert, 1968); the use of structured techniques (Danish and Zellerski, 1972); and self-awareness (Argyris, 1967). Evidence in the literature reviewed, indicated that structured techniques contributed significantly to the efficacy of small groups (Aronin, 1974; Crocker and Wroblewski, 1975; Blaker and Samo, 1973; and Levin and Kurtz, 1974) and provided group structure of benefit to the group process (Trotzer, 1973, and Landreth, 1973). Effective structured procedures are applicable to the group membership and purpose, easy to learn, and have a rationale for use (Crocker and Wroblewski, 1975). Effective structured procedures permit all group members to participate and provide a safe and permissive climate to experiment and learn new behaviors (Levin and Kurtz, 1974). For the group leader, structured exercises are facilitative and "enhance

. . . group Work" (Bender, 1973, p. 71).

The literature reviewed indicated nursing programs have been a leader in utilizing small groups (Jourard, 1964, and McLaughlin, Davis, and Reed, 1972). However, in many settings the scarcity of qualified persons to conduct such groups has hindered the optimal use of this educational tool (McLaughlin, Davis, and Reed, 1972).

The next chapter is a description of a study done with nursing students from a school of nursing located in Southern Illinois.

CHAPTER III

METHODOLOGY

This chapter includes a brief description of the study, the null hypotheses, instrument used, and the procedures for collecting and analyzing the data. The study subjects are described and limitations to be considered are presented. For the benefit of the reader, definitions of several of the major concepts used in the study are also included.

Description of Research

The objective of the study was to compare the self-concept of nursing students participating in a growth group having no assigned leader with nursing students participating in a similar group with an assigned leader. Both groups utilized structured exercises with emphasis on self-disclosure.

The dependent variable studied was the change in self-concept as a result of participating in a growth group, structured to increase self-disclosure and improve self-concept.

The independent variable was the type of group--leader vs. leaderless. Printed instructions and exercises were incorporated in both types of groups.

The questions of this study were based on the assumption that "a facilitative relationship will be established which provides . . .

growth-promoting self-explorations" (Landreth, 1973, p. 374) in groups where there is proper structuring. This, as well as the discussion of the use of groups and structured exercises in Chapter I and the review of literature in Chapter II, generated the following hypotheses.

Null Hypotheses

Null Hypothesis I

Nursing students who participate in groups with a leader and use structured exercises in self-disclosure will not show a significant change in self-concept as measured by the Total P Score of the Tennessee Self-Concept Scale, when compared with nursing students who participate in groups without a leader and use the same structured exercises.

Null Hypothesis II

Nursing students who participate in groups with a leader and use structured exercises in self-disclosure will not show a significant change in the capacity for self-criticism as measured by the Self-Criticism Score of the Tennessee Self-Concept Scale, when compared with nursing students who participate in groups without a leader and use the same structured exercises.

Null Hypothesis III

Nursing students will not show a significant change in self-concept as measured by the Total P Score of the Tennessee Self-Concept Scale after participating in groups with a leader and using structured exercises in self-disclosure.

Null Hypothesis IV

Nursing students will not show a significant change in the capacity for self-criticism as measured by the Self-Criticism Score of the Tennessee Self-Concept Scale after participating in groups with a leader and using structured exercises in self-disclosure.

Null Hypothesis V

Nursing students will not show a significant change in self-concept as measured by the Total P Score of the Tennessee Self-Concept Scale after participating in groups without a leader and using structured exercises in self-disclosure.

Null Hypothesis VI

Nursing students will not show a significant change in the capacity for self-criticism as measured by the Self-Criticism Score of the Tennessee Self-Concept Scale after participating in groups without a leader and using structured exercises in self-disclosure.

Instrumentation

This study used the Tennessee Self-Concept Scale developed by William H. Fitts in 1955 and will be referred to hereafter as the TSCS. The TSCS was selected for this study based on the reliability of the instrument and for its ease of self-administration. Another consideration was the broad criteria which compose the construct self-concept.

The TSCS is available in two forms: (1) Counseling Form and (2) Clinical Research Form. The Clinical Research form was selected

for this study since it provides for a wider analysis of self-concept. Two subscores were used in the statistical analysis. One, the Total P Score, is described by Fitts (1965) as ". . . the most important single score on the Counseling Form" (p. 2). The other subscore, Self-Criticism, is a measure of the capacity for self-criticism. This measure was important to the study to assess if structured self-disclosure changes one's capacity for being self-critical.

The standardization group from which the norms were developed was a broad sample of 626 people. Included in the sample were people from various parts of the country, and age ranges from 12 to 68. Both Negro and white subjects were included with approximately equal numbers of both sexes. Subjects were obtained from high school and college classes as well as various other sources. The effects of such demographic variables as sex, age, education, and intelligence on the scores of the TSCS are quite negligible.

Fitts (1965) reports reliability data based on test-retest with 60 college students over a two-week period. For the Self-Criticism Score the reliability coefficient is 0.75 and for the Total P Score is 0.92. Other evidence of reliability is found in remarkable similarity of profile patterns found through repeated measures of the same individuals over long periods of time.

Validation procedures for the TSCS are of four kinds: (1) content validity, (2) discrimination between groups, (3) correlation with other personality measures, and (4) personality changes under particular conditions (Fitts, 1965). Validation studies conducted are presented in the TSCS Manual with supporting data.

Approach to the Problem

Each subject was randomly assigned to a group by means of random numbers. The Table of Random Numbers by Kendal and Smith as presented by Popham (1967) was used. One group was randomly selected to be the group with a leader and was referred to as the Leader Group. The other group was to meet without a leader and was referred to as the Leaderless Group. The groups met for four three-hour sessions over a period of four weeks. These group sessions were scheduled into the subjects' academic calendar and were conducted during the fall quarters of 1976 and 1977. Instructions for each group session were developed by the writer. These instructions were provided to each subject in the Leaderless Group in printed form. The instructions for each group session were presented at the beginning of that group session and returned by the subjects at the close of the session. The same instructions were incorporated in the Leader Group, however, the instructions were presented verbally by the leader. During the four group sessions, four different structured exercises were utilized by the subjects. The structured exercise to be used was included with the printed instructions for that group session. These same structured exercises were also incorporated in the Leader Group by the leader. For those structured exercises where a printed form was needed, a copy was provided for each subject in both groups. The structured exercises, in the order used, were: (1) The Comfort Shot, (2) Dyadic Encounter, (3) Success Analysis Chart, and (4) Strength Bombardment Target. A summary of the structured exercises used with an example of each is included in Appendix B.

At the first group session, Ground Rules for the group to follow were presented in printed form. Any additional ground rules desired by the group were determined at this same session. The group was instructed to adopt these Ground Rules as a guide for the four sessions. Each subject self-administered the TSCS at the beginning of the first group session and at the close of the last group session.

Analysis of Data

To analyze the data, the t-test was applied to both the comparison and dependent variables. To compare the two groups prior to treatment, four variables were used. These variables were: (1) age, (2) highest grade of education completed, (3) pre-test Total P scores on the TSCS, and (4) pre-test Self-Criticism Scores on the TSCS. To determine if there were differences between the groups in change of self-concept and self-criticism after treatment, the gain score was obtained by subtracting the pre-test score from the post-test score. The t-test was applied to the gain scores on the Total P and Self-Criticism Scores of the TSCS. The 0.05 level of significance was established by the writer prior to gathering the data. The mean and standard deviation for the variables were also computed and are included in the study.

Subjects

Subjects for the study were from a population of nursing students enrolled in the first level or year of an Associate Degree Nursing Program at Illinois Eastern Community Colleges, College of Continuing Education, Fairfield, Illinois. Included as subjects were married and single individuals and both sexes with women predominant in number.

The subjects were mainly from the Southern Illinois geographical area. One subject lived in Southern Indiana. All of the subjects commuted to classes.

Table I presents data comparing the two groups by age and education, as measured by the highest grade level completed. The range, t -values, and P -scores for each variable are included, as well as the mean and standard deviations.

The Leader Group consisted of 16 nursing students with an age range of 17 years through 48 years. The mean age was 25.81 with a standard deviation of 9.16 years. This group had an education mean of 11.81, with a standard deviation of 1.17. The range of education was from 8 years through 14 years.

Seventeen nursing students made up the Leaderless Group, with a range of ages from 17 years through 50 years. The Group had a mean age of 29.82 years with a standard deviation of 9.98. These nursing students had a mean grade level (education) of 11.29 years, with a standard deviation of 1.05 years. The range for education was from 9 years through 12 years.

The data presented in Table I indicates the two groups were not significantly different on the two variables, age and education grade level. It was determined statistically appropriate to make further comparisons of the two groups.

The general nature of the study was explained to the entire classes before the group sessions were conducted. At this time, each subject was guaranteed anonymity. Each subject participated voluntarily, attending group sessions during regular class meeting time. A Release for Permission to use the Tennessee Self-Concept Scale Scores was signed

TABLE I

COMPARISON OF LEADER AND LEADERLESS GROUPS BY AGE AND EDUCATION

	Leader Group (N = 16)			Leaderless Groups (N = 17)			t-value	P
	M	SD	RANGE	M	SD	RANGE		
Age (Years)	25.81	9.16	17-48	29.82	9.98	17-50	-1.20	0.239
Education (grade level completed)	11.81	1.17	8-14	11.29	1.05	9-12	1.30	0.200

by each subject. These signed forms were kept on file by the researcher. A sample copy of these forms is included in Appendix C.

Limitations

Limitations frequently are found in research done in the natural setting. This study was no exception. The following are some rather obvious limitations:

1. This study considered only nursing students in the first level of a nursing program of study at a community college. Generalizations to students in other types of programs and schools should be made with caution. Students with differing educational goals and choice of college may change differently in different group settings.
2. This study was limited to a specific geographical area. None of the subjects were living in or near a large metropolitan area at the time of the study.
3. This study limited its selection variables to age and education.
4. Both groups in the study used selected structured exercises in self-disclosure.
5. For the Leader Group, there was only one leader. The possible effects of the leader on the group was observed.
6. The study involved a small sample. There should always be caution in generalizing to a larger population.

Definitions

As an aid to the reader, the following definitions are included.

These concepts and terms are referred to frequently throughout the study and a knowledge of their meaning will be helpful.

1. **Leader Group:** A leader group in this study was the group that had the writer as the designated group leader or facilitator.
2. **Leaderless Group:** A leaderless group in this study was the group of randomly assigned subjects without a designated group leader.
3. **Level:** Level is used to identify the academic position of the student in the nursing education program.
4. **Self-Concept:** In this study, self-concept is the "beliefs a person has acquired regarding who he is . . ." (Jourard, 1974, p. 151). It is open to change and is influenced by views other people have of the person and are made aware to that person. The self-concept also includes the assumptions a person has about his strengths (Jourard, 1974). It is both an internal and external frame of reference (Fitts, 1965) highly influential in much of a person's behavior.
5. **Self-Criticism:** For this study, self-criticism was used as measured by the Tennessee Self-Concept Scale by the Self-Criticism Score. This is defined as "mildly derogatory statements that most people admit as being true for them" (Fitts, 1965).
6. **Self-Disclosure:** As defined by Jourard (1974, p. 151), self-disclosure is the art of communicating one's experiences to others through words and actions. For this study, the emphasis was to communicate one's successful experiences.
7. **Structured Exercise:** Structured exercise is defined "as a

leader intervention that includes a set of specific orders or prescriptions for behavior. These orders limit the participants' behavioral alternatives" (Lieberman, 1973, p. 409). The term is often used interchangeably with simulation games and activities.

8. **Successful Experience:** A successful experience is any positive personal experience that can be recalled by the subject and includes a personal accomplishment and/or achievement. It can be an ordinary or common experience or an extraordinary achievement by the person.
9. **Two Groups:** When used in the study, two groups refer to the Leader and Leaderless Groups as described above.

CHAPTER IV

ANALYSIS OF DATA AND DISCUSSION OF RESULTS

Introduction

This study was conducted to assess the difference in change of self-concept of leader and leaderless groups using structured exercises in self-disclosure. The subjects consisted of 33 men and women enrolled in the first level of a nursing education program at a community college. These nursing students were randomly divided into two groups--Leader and Leaderless--as described in Chapter III.

The analyses of data and discussion of results for this study will be presented as they relate to the research. As has been previously stated in Chapter III, the data were analyzed by applying the t-test to each of the variables selected. The format for presenting the data and discussion will be to state the null hypothesis, present the data related to the hypothesis in tabular form, state each t-test as applied, and present a discussion of the data. Additional tables of statistical data are presented in the appendixes. All presented significant differences are at the 0.05 level of confidence.

Comparison of Leader and Leaderless Groups:

Pre-test Scores

A comparison of the two groups on pre-test scores of the TSCS is

presented in Table II. The t-test was applied to these scores to identify if any significant differences in self-concept existed between the groups prior to the treatment of the research. No significant differences were found between the two groups.

TABLE II
COMPARISON OF LEADER AND LEADERLESS GROUPS ON THE
TOTAL P AND SELF-CRITICISM PRE-TEST SCORES
OF THE TENNESSEE SELF-CONCEPT SCALE

	Leader (N = 16)		Leaderless (N = 17)		t-value	P
	M	SD	M	SD		
Total P	326.75	31.61	316.59	29.06	0.96	0.343
Self-Criticism (S.C.)	37.81	5.27	35.59	6.30	1.10	0.281

It was supported by the data that the two groups were not significantly different on two criteria measures of the TSCS at the beginning of the research. The Pre-test Total P Score and Self-Criticism Scores for the Leader Group were not significantly different than the same scores for the Leaderless Group. On the Total P Pre-test Scores, the t-test results were t-value = 0.96 and P = 0.343. In general, the two groups were not significantly different in how they viewed themselves, how they felt about themselves, and how they felt

about their behavior as was measured by the Total P Score on the TSCS.

The two groups were not significantly different in the capacity to be self-critical as measured by the Self-Criticism Score on the TSCS. Using the Pre-test Self-Criticism Scores for the two groups, the t-test resulted in $P = 0.281$, with a t-value of 1.10.

As was indicated in Chapter III, Table I, there were no significant differences between the age and education level of the two groups. The data obtained from applying the independent t-tests to age, grade level, Pre-test Total P, and Self-Criticism Scores on the TSCS, established what the groups were like before the treatment. It is reasonable for the writer to believe that these two groups were statistically similar at the start of the research on these four criteria.

Null Hypothesis I: Self-Concept

Nursing students who participate in groups with a leader and use structured exercises in self-disclosure will not show a significant change in self-concept as measured by the Total P Score of the Tennessee Self-Concept Scale, when compared with nursing students who participate in groups without a leader and use the same structured exercises.

This null hypothesis was rejected by the writer based on the results of the data presented in Table III of the t-test for the two groups on the Total P Score of the TSCS. A significant difference was found between the two groups.

On the Total P Score, there was a significant difference between the two groups. For the Total P Gain Score, $P = 0.028$. The mean score for the Leader Group was 17.38 with a standard deviation of 18.74. For the Leaderless Group on the Total P Gain Score, the mean was 2.76 with a

standard deviation of 17.73. The data presented in the table indicates the Leader Group had noticeable higher Total P Scores.

TABLE III
COMPARISON OF LEADER AND LEADERLESS GROUPS ON THE
TOTAL P POST-TEST MINUS PRE-TEST GAIN SCORES
OF THE TENNESSEE SELF-CONCEPT SCALE

	Leader (N = 16)		Leaderless (N = 17)		t-value	P
	M	SD	M	SD		
Total P	17.38	18.74	2.78	17.73	2.30	0.028

In analyzing these data, it can be determined that after participating in a group with a leader and using structured exercises in self-disclosure, the nursing students tend to like themselves more and to feel that they are persons of value and worth. In general, it can be determined that the Leader Group made a significant change in self-concept as measured by the Total P Score on the TSCS. The Leaderless Group did not.

Null Hypothesis II: Self-Criticism

Nursing students who participate in groups with a leader and use structured exercises in self-disclosure will not show a significant change in the capacity for self-criticism as measured by the

Self-Criticism Score of the Tennessee Self-Concept Scale when compared with nursing students who participate in groups without a leader and use the same structured exercises.

This null hypothesis was also rejected. Table IV presents the t-test results for the Leader and Leaderless Groups on the Self-Criticism Score of the TSCS. The t value of -2.28 was found to have $P = 0.030$. This is significant below the 0.05 level. That the Leader Group made a significant change in the capacity for self-criticism as measured by the Self-Criticism Score of the TSCS, is supported by the data presented in this table.

TABLE IV
COMPARISON OF LEADER AND LEADERLESS GROUPS ON THE
SELF-CRITICISM POST-TEST MINUS PRE-TEST GAIN
SCORES OF THE TENNESSEE SELF-CONCEPT SCALE

	Leader (N = 16)		Leaderless (N = 17)		t-value	P
	M	SD	M	SD		
Self-Criticism (S.C.)	-2.44	4.31	1.18	4.77	-2.28	0.030

The mean Self-Criticism Score for the Leader Group was -2.44. This indicates the change made by the Leader Group was of a negative direction. It seems reasonable to suggest that the members of the

Leader Group became less open to self-criticism and had a lower capacity for self-criticism as measured by the Self-Criticism Score on the TSCS after participating in the group. In addition, the lowered Self-Criticism Score received by the Leader Group suggests that this Group became more defensive when talking about themselves. The same cannot be said about the Leaderless Group. The mean Self-Criticism Gain Score for the Leaderless Group was 1.18. The members of the Leaderless Group were more open to self-criticism after participating in the group. However, this was not a significant gain when compared with the Leader Group.

The structured exercises in self-disclosure that were used by both groups emphasized only positive verbalizing about one's self. In addition, a suggested Ground Rule for the groups was: There are to be no negatives, that is, a group member is not to "put-down" or dehumanize any group member--verbally or non-verbally. It seems reasonable to suspect that emphasis of this Ground Rule by the leader of the Leader Group may have produced a response set in the group participants. It also seems reasonable that the emphasis on only positive verbalizations influenced the group participants toward more defensiveness. Since both groups used the same structured exercises and Ground Rules and the Leaderless Group did not have a decrease in the Self-Criticism Score, it would seem possible that the lower capacity for self-criticism, as was measured by the Self-Criticism Score on the TSCS, by the Leader Group resulted from the interaction of the leader with the Group. The question of the influence of the leader on the group members was not presented for investigation in the study but was an observation of the writer when the data were analyzed.

Null Hypothesis III: Self-Concept, Leader Group

Nursing students will not show a significant change in self-concept as measured by the Total P Score of the Tennessee Self-Concept Scale after participating in groups with a leader and using structured exercises in self-disclosure.

This hypothesis was rejected. The results of the t-test applied to the Gain Score of the Post-test minus Pre-test on the Total P Score for the Leader Group is presented in Table V.

TABLE V
COMPARISON OF THE PRE-TEST AND POST-TEST TOTAL
P SCORES OF THE TENNESSEE SELF-CONCEPT
SCALE FOR THE LEADER GROUP

	Pre-test		Post-test		t-value	P
	M	SD	M	SD		
Total P	326.75	31.61	344.13	27.14	-3.71	0.002

The Total P Score was significantly greater for the Post-test than for the Pre-test. The $P = 0.002$ is well below the 0.05 level of significance. The Post-test mean score was equal to 344.13, and the Pre-test mean score was equal to 326.75. The data indicate the Leader Group showed a significant higher level of self-esteem after participating in the group sessions as measured by the Total P Score on the TSCS. It

seems reasonable to say that when using structured exercises in self-disclosure in a group with a leader, the nursing students developed more confidence in themselves, liked themselves better, felt they are persons of more worth and value, and act accordingly as is measured by the Total P Score on the TSCS.

Null Hypothesis IV: Self-Criticism, Leader Group

Nursing students will not show a significant change in the capacity for self-criticism as measured by the Self-Criticism Score of the Tennessee Self-Concept Scale after participating in groups with a leader and using structured exercises in self-disclosure.

The results of the t-test for the Leader Group on the Self-Criticism Score is presented in Table VI

TABLE VI

COMPARISON OF THE PRE-TEST AND POST-TEST SELF-CRITICISM SCORES OF THE TENNESSEE SELF-CONCEPT SCALE FOR THE LEADER GROUP

	Pre-test		Post-test		t-value	P
	M	SD	M	SD		
Self-Criticism (S.C.)	37.81	5.27	35.38	5.54	2.27	0.039

The hypothesis was rejected at the 0.05 level of significance with

$P = 0.039$. The table indicates the mean score for the Pre-test was 37.81; for the Post-test the mean score was 35.38. This suggests that the nursing students were less open to self-criticism as measured by the Self-Criticism Score on the TSCS after participating in a group with a leader. It is to be noted here that the results of the Self-Criticism Score for the Leader Group is in contrast to that of the Total P Score for the same group. That is, the significant change made by the Group on the Self-Criticism Score was lower. At the same time, the SD for the Post-test became slightly greater (5.54) than the SD for the Pre-test (5.27). In general, the Leader Group became more defensive and made a more deliberate effort to present a favorable picture of themselves as is measured by the Self-Criticism Score on the TSCS.

Null Hypothesis V: Self-Concept,
Leaderless Group

Nursing students will not show a significant change in self-concept as measured by the Total P Score of the Tennessee Self-Concept Scale after participating in groups without a leader and using structured exercises in self-disclosure.

Table VII presents the results of the t-test for the Leaderless Group, using the Pre-test minus Post-test Gain Scores on the Total P Score of the TSCS.

This hypothesis was accepted at the 0.05 level of confidence, $P = 0.529$. The Leaderless Group showed a slight gain in self-concept as measured by the Total P Score on the TSCS. The mean for the Pre-test was 316.59, with the mean for the Post-test at 319.35. For nursing students who participate in a group without a leader and use structured

exercises in self-disclosure, there was no significant change in self-concept as measured by the Total P Score on the TSCS. The direction of change for the Leaderless Group is the same as for the Leader Group, in a positive direction.

TABLE VII
COMPARISON OF THE PRE-TEST AND POST-TEST TOTAL
P SCORES OF THE TENNESSEE SELF-CONCEPT
SCALE FOR THE LEADERLESS GROUP

	Pre-test		Post-test		t-value	P
	M	SD	M	SD		
Total P	316.59	29.06	319.35	24.46	-0.64	0.529

Null Hypothesis VI: Self-Criticism,
Leaderless Group

Nursing students will not show a significant change in the capacity for self-criticism as measured by the Self-Criticism Score of the Tennessee Self-Concept Scale after participating in groups without a leader and using structured exercises in self-disclosure.

The results of the t-test computed for the Self-Criticism Gain Score for the Leaderless Group is presented in Table VIII.

This hypothesis is accepted based on the results of the t-test computed for the Self-Criticism Gain Score for the Leaderless Group,

using the 0.05 level of significance. The P-value for the Self-Criticism Score was 0.325 for the Leaderless Group. In analyzing the data, it was observed that the Leaderless Group made a change in the capacity to be self-critical as measured by the Self-Criticism Score on the TSCS. The mean scores were: Pre-test, 35.59, and Post-test, 36.76. In contrast to the Leader Group, the Leaderless Group improved in the capacity to be self-critical, although this was not a significant difference.

TABLE VIII
COMPARISON OF THE PRE-TEST AND POST-TEST SELF-CRITICISM SCORES OF THE TENNESSEE SELF-CONCEPT SCALE FOR THE LEADERLESS GROUP

	Pre-test		Post-test		t-value	P
	M	SD	M	SD		
Self-Criticism (S.C.)	35.59	6.30	36.76	5.97	-1.02	0.325

Included in Appendixes F through K are the individual raw scores for the participants in both groups. The reader may refer to these for more detailed information of the scores for the variables used.

The next chapter includes a summary of the study, conclusions made by the writer based on the data, and recommendations for future research.

CHAPTER V

SUMMARY, CONCLUSIONS, AND RECOMMENDATIONS

This chapter will present a summary of the study, conclusions based on the data which resulted from the study, and recommendations for future research with groups and structured exercises. The reader is cautioned in making generalizations to other populations.

Summary

Nursing students enrolled in the first level of an Associate Degree in Nursing Program at the Illinois Eastern Community Colleges, College of Continuing Education, Fairfield, Illinois, were randomly divided into two groups. One group was designated the Leader Group, and the writer functioned as the leader. The other group was designated as the Leaderless Group and was provided with printed instructions for each group session. Both groups incorporated four structured exercises in self-disclosure during the group sessions. Groups met for three hours weekly for four weeks. Pre-test and post-test gain scores on the Tennessee Self-Concept Scale were used to measure the effects of the two group methods: the Total P Score to measure self-concept and the Self-Criticism Score to measure the capacity to be self-critical. Gain Scores were analyzed by the t-test to ascertain whether the difference in mean gains between the two groups was significant at the 0.05 level. The t-test was also used to determine whether each group made a

significant change in the two variables.

Analysis of four comparison variables show the similarity of the two groups at the beginning of the study. These variables included age of the participants, highest grade level of education completed by the participants, and pre-test Total P and Self-Criticism Scores on the TSCS. Analysis of data yielded evidence that significant differences in mean scores did occur on the two variables measured among members of the Leader Group after participating in a group using structured exercises in self-disclosure. The Leader Group did effect change on the variables of self-concept (0.028 level) and the capacity to be self-critical (0.030 level). A positive change for the self-concept variable was observed in both groups; the Leaderless Group showed a positive change although not a statistical significant change (0.325 level). For the self-criticism variable, the Leader Group showed a statistical significant change (0.039 level) in a negative direction.

Conclusions

The findings of this study support the efficacy of leader groups in effecting changes in nursing students in the variables measured by the study, self-concept and the capacity to be self-critical. Implications are that structured exercises are useful in both leader and leaderless groups in effecting these changes. These results were based on the variables, self-concept and self-criticism, as measured by the Total P and Self-Criticism Scores on the Tennessee Self-Concept Scale.

In this study, nursing students who participated in a group with a leader showed a significant change in self-concept when compared to those nursing students who participated in a group without a leader.

Both groups incorporated structured exercises in the group procedure.

Also, those nursing students who participated in a group with a leader showed a significant change in the capacity to be self-critical when compared to those nursing students who participated in a group without a leader. Structured exercises in self-disclosure were used by both groups.

It was observed in the analysis of the data obtained in the study that the change in the capacity to be self-critical in the participants of the Leader Group was in a negative direction. This negative change was found to be significant when the self-critical variable was compared with the Leaderless Group and when the Pre-test and Post-test Scores were compared for the Leader Group. For the Leaderless Group on the same variable, the change was observed to be in the positive direction. However, the change was not a statistically significant one.

It may also be implied from the results of this study that structured exercises in self-disclosure when used in both leader and leaderless groups may encourage a change to be effected in both the self-concept and the capacity to be self-critical.

Recommendations for Research

On the basis of the information obtained in this study, recommendations seem justified for future research.

1. Why the significantly lower change in self-criticism in contrast to improved self-concept in the Leader Group? Does the emphasis on only positive aspects of self-disclosure produce increased defensiveness when one is self-critical? These are two questions that could be researched by additional studies.

2. The effects of the structured exercises in self-disclosure as used by different leaders presents another area for further research. Do such factors as the sex, background, and personality of the leader produce different changes in the group participants?
3. Do subjects who are different in age and with different education backgrounds change similarly in a leader or leaderless group? The subjects of this study were young adults or older. The use of subjects of different age and education backgrounds could be researched.
4. Applying additional tests to the data to measure interaction effects and investigating the additional sub-categories of the Tennessee Self-Concept Scale may also produce useful information.
5. More research is needed in the natural setting to assist those in the field to make decisions about new and different methods. Mental health clinics, institutions of learning, churches, and social agencies could benefit from additional support for the continued utilization of effective group procedures. Replication of this study may add this needed support for the use of structured exercises in both leader and leaderless groups.
6. Replication will also aid in eliminating some of the contradictions mentioned earlier in the review of literature.

Concluding Remarks

Hopefully this study has provided additional insight into the current utilization of leader and leaderless groups. Likewise, the

study has added to the current information of structured exercises. Many questions still remain unanswered. However, the diligent and persistent proponent of small groups to effect change in the participants, as well as the hesitant but courageous advocates of structured exercises, should seek to move toward a more stable platform from which to operate. Such a platform can only be based on the very best that advocates of small group processes can offer. This study has attempted to contribute additional knowledge to three small group procedures: leader and leaderless groups and the use of structured exercises.

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APPENDIX A

PRINTED INSTRUCTIONS FOR THE FOUR GROUP SESSIONS

INTRODUCTION

Thank you for volunteering to be a member of this Personal Growth Group. You have been randomly assigned to this group and will remain with this same group throughout the four (4) scheduled sessions.

No one person of your group has been designated as the "leader." Therefore, at the beginning of each group session, each group member will be given printed instructions and other materials to be used during that group session. Each group member is asked to read the instructions as presented. After each person has read the instructions, the group will proceed with the suggested activity as indicated.

(It would be most appropriate if you would read the instructions as presented and refrain from "looking ahead.")

Again, thank you for your willingness to participate.

L. Vernon Atkins
Doctoral Candidate
Oklahoma State University

(Turn to next page only.)

PURPOSE

You have become a member of a Personal Growth Group. The four group sessions and activities are designed with the following purposes in mind.

First, these group sessions will offer to each person an opportunity to "grow" as a person. The growth that may result can be exciting and helpful to you as an individual person.

Secondly, these group sessions offer to each member a learning experience. The learning includes that of acquiring more knowledge about groups and group dynamics. More significant, however, the learning will include learning interpersonal skills. The skills used can then be utilized later by you--especially in your nursing career.

A third purpose is that as a result of your group experience you will be more effective as you perform your duties as a nurse.

In his book, The Transparent Self, Dr. Sidney Jourard states that one of the changes that needs to take place toward helping nurses is a change "from within any particular nurse" (p. 152). Facilitating this "change within" is another purpose of these Personal Growth Groups.

These groups are not intended to be therapeutic groups. That is to say that these groups are not designed as a part of treatment for any specific and/or identified dysfunction.

The group sessions are not designed as what may be considered "sensitivity groups." Becoming more aware of oneself, however, will make that person more "sensitive" of himself and others.

Lastly, these groups are not designed to "put-down" or belittle a person for who and what he/she may be. On the contrary, the intent is toward healthy "growth" and learning "to respond authentically, by being credible, trustworthy, responsive, and genuine, both as an individual and as a member of a society."¹

(Turn to next page only.)

¹Muriel James and Dorothy Jongeward, Born to Win: Transactional Analysis with Gestalt Experiments (Merlo Park, California, 1971), p. 1.

(REMOVE THIS PAGE AND KEEP FOR FUTURE REFERENCE.)

GROUND RULES

The first important agenda item is that of developing "ground rules" for the group to follow. These "ground rules" should be agreed upon by the group members and be followed during each session.

Some general ground rules have been suggested. Discuss these rules and their implications and application. Any additional ground rules desired by the group may be added.

- A₁. There are to be no negatives--that is to say that a group member is not to "put-down" or dehumanize any group member--verbally or non-verbally. (This applies to you also.)
- A₂. Discuss Ground Rule A₁.
- B₁. Each member is to speak for him/her self only. More specifically this means a group member verbalizes his own thoughts, ideas, and feelings only and not those of another person.
- B₂. Discuss Ground Rule B₁.
- C₁. There is to be no force or abuse, verbal or physical.
- C₂. Discuss Ground Rule C₁.
- D₁. Each member is permitted to share with the group only that which he/she desires to.
- D₂. Discuss Ground Rule D₁.
- E₁. Each member is to be honest and authentic with the other group members.
- E₂. Discuss Ground Rule E₁.
- F₁. Each member should honor and practice confidentiality of information when with other persons not members of the group.
- F₂. Discuss Ground Rule F₁.
- G₁. Any additional ground rules decided and accepted by the group.
- G₂. Discuss and develop any additional ground rules and write same on reverse side of this page.

(After completing these instructions, turn to next page only.)

TENNESSEE SELF-CONCEPT SCALE

The next agenda item (#2) is for each member to write (complete) the Tennessee Self-Concept Scale.

The scores you obtain will be utilized as a measurement of the effectiveness of the Personal Growth Group experience. (It is also a measurement of certain of your characteristics.)

The scores will not be used in any way to determine grades you receive. The scores are confidential and will not be revealed to other persons, agencies, or schools, without your signed permission.

Your scores will be made available to you on an individual basis at your request and arrangements with L. V. Atkins (Phone 842-9831).

It is suggested that when completing the Scale, you are honest. There are no right or wrong answers.

Specific instructions appear on the inside cover of the Booklet. Two reminders:

1. Be certain to write your name on the answer sheet only, and
2. Keep a record of the amount of time it takes for you to write the Scale and record it in the appropriate space.

(After each member has completed the Tennessee Self-Concept Scale, turn to next page.)

After Step 4 of the Structured Exercise I is completed, the group is dismissed.

LEAVE ALL PRINTED MATERIALS ON THE
TABLE PROVIDED.

PERSONAL GROWTH GROUP II

Following are the procedures for you to undertake during today's Personal Growth Group. PLEASE PROCEED AS INDICATED BY THE INSTRUCTIONS. You will need additional materials, when so indicated obtain same from the table.

The session is divided into five different sections. Suggested time allotment is:

Part I	5-10 minutes
Part II	15 minutes (<u>limit</u>)
Part III	60 minutes
Part IV	30 minutes
Part V	5 minutes

These suggested times are to be a guide only. Move from one part to another when the majority of the group members are ready to do so.

(Turn to next page only.)

PROCEDURES FOR PARTS I AND II

PART I:

Refer to the Ground Rules developed at the first group session. Briefly review these Ground Rules and explore any area a group member desires to.

When Group has completed this, proceed to,

PART II:

Explore and discuss any personal reactions, you or another group member may have, related to the previous Group Session.

(SUGGESTED QUESTIONS)

Did you do any additional "self-disclosing" outside the group setting?

Did you "listen" differently to what others express?

Did you experience, during the week, any concerns about what you expressed in the Group setting?

When on the "floor" did you "listen" to what the patients told you about themselves?

When the group has completed this section, proceed to Part III.

(Turn to next page only.)

PROCEDURES FOR PART III
"STRUCTURED EXERCISE II; DYADIC ENCOUNTER"

A "dyadic encounter" is an encounter between two people only. The exercise is to be done reciprocally as you proceed.

1. Select another group member whom you do not know well, or whom you would like to get to know better. Mutually agree with that person for the two of you to proceed through this Exercise as "partners." (Note: If there is an uneven number in the group, one "dyad" will have three members.)
2. After you have selected a "partner," each one obtain a copy of the booklet "DYADIC ENCOUNTER" from the table.
3. Each dyad relocates in a part of the room and/or building, somewhat separate from any other dyad. (The distance between dyads should be such that overhearing is difficult.)
4. Read pages 2-5 in the booklet, "Dyad Encounter," and proceed as you are instructed on these pages.
5. When the majority of the group has completed the entire booklet, return booklets to the table, and reconvene as a group.

When group has reassembled:

(Turn to next page only.)

PART IV:

As a group, verbally explore the reactions to the "Dyadic Encounter."

The following questions may be utilized by the group--however, it is of utmost importance to discuss what the group members desire to discuss.

1. Did you feel uneasy at any time during the encounter? If so, when? Why?
2. Did you do any "stretching" of yourself?
3. Did the relationship with your partner experience any changes? If so, what were these changes?
4. Additional personal reactions.

PART V: Structured Exercise #3 - Success Analysis Chart**Introduction**

This Structured Exercise will provide the major focus of the remaining two group sessions. You will be responsible to complete this part of the Exercise BEFORE the next group meeting. You are also responsible to bring your Success Analysis Chart with you to the next group meeting.

If the group has completed all previous instructions; obtain the Success Analysis Chart material from the table provided.

Group may be dismissed if the majority of the members so desire or if the time has elapsed.

Please leave these instructions on the table as you leave.

PERSONAL GROWTH GROUP III

Following are the procedures for you to undertake during today's Personal Growth Group. PLEASE PROCEED AS INDICATED BY THE INSTRUCTIONS. You will need additional materials; when so indicated, obtain these materials from the table.

The Session is focused around the SUCCESS ANALYSIS CHARTS you completed prior to today's session. You will have additional time to continue with today's Structured Exercise at the next group. Do not "rush" with the Exercise--strive to receive maximum benefit from each group member as each participates.

(Turn to next page only.)

"Warming-up"

Spend 10-15 minutes in reviewing the previous group sessions.

Some suggested questions to discuss:

1. Are you more aware of what others say? That is, do you "listen" more attentively?
2. Have you continued with self-disclosure with others outside your group?
3. Have you become "closer" to any other group member as a result of the group activities?

After approximately 10-15 minutes, proceed to the next page.

(Turn to next page only.)

PROCEDURES FOR STRENGTH BOMBARDMENT TARGET

1. Locate your completed "Success Analysis Chart" and have available for your use when needed.
2. Have available for your use a writing implement--pen or pencil.
3. It would also be advantageous if you had available a hard-cover notebook or tablet. (This is optional.)
4. Obtain from the table the following materials:
 - (a) One (1) Strength Bombardment Target
 - (b) One "sheet" of small self-adhering stickers.

- NOTE -

Before you start this Exercise, I want to remind you that you will also have time to complete this exercise at the next group session.

(Turn to next page only.)

PERSONAL GROWTH GROUP IV

Following are the procedures for you to follow during today's Personal Growth Group. PLEASE PROCEED AS INDICATED BY THE INSTRUCTIONS. You will need the same materials that you used in the Growth Group III--writing implement, hard cover notebook (optional), completed Success Analysis Chart, Strength Bombardment Target, and self-adhering labels. If you do NOT have any of these materials, obtain some NOW.

The Session is focused around the Structural Exercise that you started during Group III. In addition there is a final evaluation.

(Turn to next page only.)

"Warming-up"

Spend 10-15 minutes in discussing the previous group sessions.

Some suggested questions to discuss:

1. Did any member that received a Strength Bombardment Target during the last group session share the Target with someone outside the group? If so who? What was the result?
2. Did any member refer to the (completed) Strength Bombardment Target since the last group session? Why?
3. If you were a "receiver" of "strengths," did this influence your self-concept in any manner? How?
4. As a result of "giving strengths" at the last group session, did you verbalize similar characteristics to others outside the group? Why or why not?

After approximately 10-15 minutes, proceed to the next page.

(Turn to next page only.)

PROCEDURES FOR STRENGTH BOMBARDMENT TARGET

1. Locate your completed "Success Analysis Chart" and have available for your use when needed.
2. Have available for your use a writing implement--pen or pencil.
3. It would also be advantageous if you had available a hard-cover notebook or tablet. (This is optional.)
4. Obtain from the table the following materials:
 - (a) One (1) Strength Bombardment Target
 - (b) One "sheet" of small self-adhering stickers.

After all group members have completed the Strength Bombardment Target,

(Turn to next page only.)

TENNESSEE SELF-CONCEPT SCALE

The next agenda item is for each member to write (complete) the Tennessee Self-Concept Scale (TSCS). Obtain a booklet from the table-- the answer sheet is inside the cover.

The scores you obtain will be utilized as a measurement of the effectiveness of the Personal Growth Group experience. (It is also a measurement of certain of your characteristics.)

The scores are confidential and will not be revealed to other persons, agencies, or schools, without your signed permission.

Your scores will be made available to you on an individual basis at your request and arrangements with L. V. Atkins (Phone 842-9831).

It is suggested that when completing the Scale, you are honest. There are no right or wrong answers.

Specific instructions appear on the inside cover of the Booklet. Two reminders:

1. Be certain to write your name on the answer sheet only, and
2. Keep a record of the amount of time it takes for you to write the Scale and record it in the appropriate space on the answer sheet.

Read the Instructions on the inside cover and proceed with the Scale.

After you have completed the TSCS, leave your answer sheet and Booklet on the table. You are then dismissed.

Thank you for your cooperation.

APPENDIX B

THE STRUCTURED EXERCISES FOR THE FOUR
GROUP SESSIONS

TABLE IX
 SUMMARY OF STRUCTURED EXERCISES USED IN EACH
 OF THE FOUR GROUP SESSIONS

Group Session	Structured Exercise	Purposes
I	"Comfort Shot"	<p>Develop a sense of feeling at ease in a group.</p> <p>Provide each group member with a "successful experience."</p> <p>Provide opportunity for listening to other group members.</p>
II	"Dyadic Encounter"	<p>Provide structured procedure for self-disclosure.</p> <p>Practice listening to other group member.</p> <p>Practice in understanding other group members' verbal messages.</p>
	"Success Analysis Chart"	<p>Analyze personal successful experiences.</p> <p>Use in "reporting" to group.</p>
III and IV	"Strength Bombardment Target"	<p>Identifying personal strengths based on successes.</p> <p>Identifying strengths of other group members based on success.</p> <p>Provide a structured procedure in self-disclosure.</p> <p>Provide a visible and permanent source for self-encouragement.</p>

STRUCTURED EXERCISE I
COMFORT SHOT

(Agenda Item #3)

Step 1. (Approximately 3 minutes)

- A. Each member is to think of one item of significance to you, taken from your clothing, purse, or wallet.
- B. Be prepared to describe this item and why it is of significance to you.

(Read Steps 2 and 3 in entirety before proceeding.)

Step 2. Each member is to verbally express to the entire group the following:

- a. Your name
- b. Where do you presently reside?
- c. Place of birth
- d. Describe the above item (Step 1A)
- e. Describe why this item is of significance to you (Step 1B)

Step 3.

- A. Each member is to listen to the one speaking, with the purpose of learning something about the speaker. In listening, ask yourself: "What would happen if I was asked to repeat what the person on my right said?" "What have I learned about that person?"
- B. After a member has completed Steps 2a-e, the member to his/her left is to express to the group what was learned about the person on the right.

(Proceed to Step 4 after entire group has completed Steps 1-3.)

Step 4. Verbally "explore" as a group your personal reactions to the exercise--use these questions:

- a. Do you feel differently about disclosing something about yourself to others?
- b. Did you choose a "safe" item?
- c. What did you learn about other people?

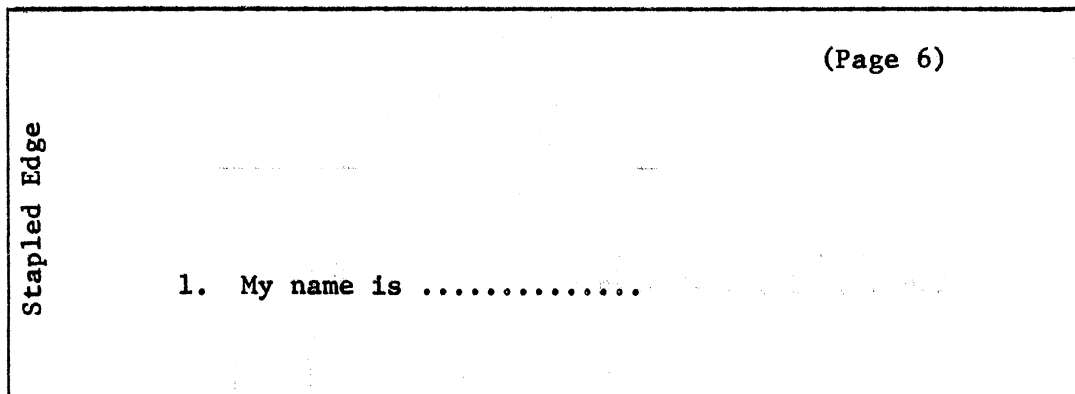
It should be emphasized here that every group member was "successful" at self-disclosure, and there were no negative results.

After Step 4 is completed, turn to page 6 only.

STRUCTURED EXERCISE II
DYADIC ENCOUNTER

The printed instructions and content of the "Dyadic Encounter Exercise" were prepared in a booklet $8\frac{1}{2} \times 2\frac{3}{4}$ inches in size. Each page included either specific instructions for the Exercise, or an incomplete sentence. The following is a specimen page from the booklet to provide the reader with some idea of its format.

$8\frac{1}{2}$ "



The format of the booklet prevented exact duplication to be included in this Appendix. However, each page with its contents is provided on the following pages.

(Cover)

DYADIC ENCOUNTER

John C. and Johanna Jones

Reproduced for educational purposes

(Page 2)READ SILENTLY. DO NOT LOOK AHEAD IN THIS BOOKLET.

A theme that is frequently voiced when persons are brought together for the first time is, "I'd like to get to know you, but I don't know how." This sentiment is expressed often in encounter groups and emerges in marriage and other dyadic relationships. Getting to know another person involves a learnable set of skills and attitudes. The basic dimensions of encountering another person are self-disclosure, self-awareness, non-possessive caring, risk-taking, trust, acceptance, and feedback. In an understanding, non-evaluative atmosphere one confides significant data about himself to another, who

(Page 3)

reciprocated by disclosing himself. This "stretching" and the relationship becomes closer, allowing more significant self-disclosure and greater risk-taking. As the two continue to share their experience authentically they come to know and trust each other in ways that enable them to be highly resourceful to each other. This dyadic encounter experience is designed to facilitate getting to know another person on a fairly intimate level. The discussion items which follow are open-ended statements and can be completed at whatever level of self-disclosure one wishes. The following ground rules should govern this experience:

(Page 4)

1. All of the data should be kept strictly confidential.
 2. Don't look ahead in the booklet.
 3. Each partner responds to each statement before continuing. The statements are to be completed in the order in which they appear. Don't skip items.
 4. You may decline to answer any questions asked by your partner.
 5. Stop the exercise when either partner is becoming obviously uncomfortable or anxious. Either partner can stop the interchange.
-

(Page 5)

Look up. If your partner has finished reading, turn the page and begin.

(Page 6)

1. My name is

(Page 7)

2. My title is

(Page 8)

3. My marital status is

(Page 9)

4. My hometown is

(Page 10)

5. The reason I'm here is

(Page 11)

6. Right now I'm feeling
-

(Page 12)

One of the most important skills in getting to know another person is listening. In order to get a check on your ability to understand what your partner is communicating, the two of you should go through steps one at a time.

- a. Decide which one of you is to be the first speaker in this unit.
- b. The first speaker is to complete the following item in two or three sentences.
-

(Page 13)

7. When I think about the future, I see myself
- c. The second speaker repeats in his own words what the first speaker has just said. The first speaker must be satisfied that he has been heard accurately.
- d. The second speaker completes item 7 himself in two or three sentences.
- e. The first speaker paraphrases what the second speaker has just said, to the satisfaction of the second speaker.
-

(Page 14)

- f. Share what you may have learned about yourself as a listener with your partner. The two of you may find yourselves later saying to each other, "What I hear you saying is ..." to keep a check on your listening.
-

(Page 15)

8. When I am in a new group, I

(Page 16)

9. When I enter a room full of people, I

(Page 17)

10. When I am feeling anxious in a new situation, I usually

(Page 18)

11. In a group I feel most comfortable when the leader

(Page 19)

12. Social norms make me feel

(Page 20)

13. In ambiguous, unstructured situations I

Listening check: What I hear you saying is

(Page 21)

14. I am happiest when

(Page 22)

15. The thing that turns me on the most is

(Page 23)

LOOK YOUR PARTNER IN THE EYES WHILE YOU RESPOND TO THIS ITEM.

16. Right now I'm feeling

(Page 24)

17. The thing that concerns me most about joining groups is

(Page 25)

18. When I am rejected, I usually

(Page 26)

19. To me, belonging is

(Page 27)

20. A forceful leader makes me feel

(Page 28)

21. Breaking rules that seem arbitrary makes me feel

(Page 29)

22. I like to be just a follower when

(Page 30)

23. The thing that turns me off the most is

(Page 31)

24. I feel most affectionate when

(Page 32)

ESTABLISH EYE CONTACT AND HOLD YOUR PARTNER'S HAND WHILE COMPLETING THIS ITEM.

25. Toward you right now I feel

(Page 33)

26. When I am alone, I usually

(Page 34)

27. In crowds I

(Page 35)

28. In a group I usually get most involved when

LISTENING CHECK: What I hear you saying is

(Page 36)

29. To me, taking orders from another person

(Page 37)

30. I am rebellious when

(Page 38)

31. In a working meeting, having an agenda

(Page 39)

CHECK UP: Have a two- or three-minute discussion about this experience so far. Keep eye contact as much as you can, and try to cover the following points:

- a. How well are you listening?
 - b. How open and honest have you been?
 - c. How eager are you to continue this interchange?
 - d. Do you feel that you are getting to know each other?
-

(Page 40)

32. The emotion I find most difficult to control is

(Page 41)

33. My most frequent daydreams are about

(Page 42)

34. My weakest point is

(Page 43)

35. I love

(Page 44)

36. I feel jealous about

(Page 45)

37. Right now I'm feeling

(Page 46)

38. I am afraid of

(Page 47)

39. I believe in

(Page 48)

40. I am most ashamed of

(Page 49)

41. Right now I am most reluctant to discuss

(Page 50)

42. Interracial dating or marriage makes me feel

(Page 51)

43. Premarital and extramarital sex

(Page 52)

44. Right now, this experience is making me feel

(Page 53)

45. EXPRESS HOW YOU ARE FEELING TOWARD YOUR PARTNER RIGHT NOW WITHOUT USING WORDS.

You may want to touch.

AFTERWARDS, tell what you intended to communicate. Also, explore how this form of communication felt.

(Page 54)

46. The thing I like best about you is

(Page 55)

47. You are

(Page 56)

48. What I think you need to know is

(Page 57)

49. Right now I'm responding most to

(Page 58)

50. I want you to

(Page 59)

Time permitting, you might wish to continue this encounter through topics of your own choosing. Several possibilities are the following: money, politics, religion, race, marriage, the future, aggression, and the two of you.

(KEEP THIS MATERIAL FOR FUTURE USE)

STRUCTURED EXERCISE III
SUCCESS ANALYSIS
CHART

Attached is your personal Success Analysis Chart. It is divided into seven different sections. Parts I-IV are divided by age periods, and Parts V-VII are divided as indicated on the Chart.

1. On the left side of the Chart, list three (3) successes for each of the age periods given. Be as detailed as possible. The moment of success you record does not have to be earth-shaking as long as it is meaningful to YOU. It could, for example, be mastering a ten-speed bicycle, winning an election in school or elsewhere, having a baby, etc. Put down the first things that come to your mind. Be honest.

If, for any reason, you cannot recall a success for a certain period of your life, go on to the period you do recall. Your memory will come back as you work.

When you have completed this Step (#1), you will have listed twelve (12) successes, three (3) for each age period of life.

2. When you have finished Parts I-IV, complete Parts V-VII--giving successes as requested on the Chart. (You will have a total of 16 successes recorded.)
3. The attached page gives several reasons why an experience can be considered a success. For each success, select one of the Reasons as why you considered the experience a "success." If the Reasons listed are not adequate, you can list a reason of your own. Be certain you have a "reason" for each successful experience. (You may use one reason more than once.)

You should now have a complete Success Analysis Chart to use in the remaining group sessions. Remember, this is your own personal chart--it gives you an opportunity to review your life and helps identify your patterns further.

SUCCESS ANALYSIS CHART

List Successes	Reasons Why a Success
I. Pre-School 1. 2. 3.	
II. Elementary School 4. 5. 6.	
III. High School 7. 8. 9.	
IV. Post-High School 10. 11. 12.	
V. Most Successful Experience 13.	
VI. One Success During the Past Week 14.	
VII. Two Anticipated Successes in the Next Few Weeks 15. 16.	

REASONS

1. I used skill and know how.
2. I was free to decide what I did or now I did it.
3. I influenced somebody or got them to do what I wanted them to do.
4. I helped someone else do something important to them.
5. I met a challenge or had an adventure.
6. I increased my self respect.
7. I received recognition, support, or respect from others.
8. I received money or its equal.
9. I received love and acceptance from my family.
10. I learned something new.

REMINDER:

If these "suggested" Reasons are not adequate, or do not express exactly how you perceived the Success, you may give your own "Reason."

STRUCTURED EXERCISE IV
STRENGTH BOMBARDMENT
TARGET

This Structured Exercise involves each member of the group in three (3) different aspects:

- (1) as a self-disclosing participant;
- (2) as a listener of self-disclosure from other group members; and
- (3) as a source of identifying strengths in each of the other group members.

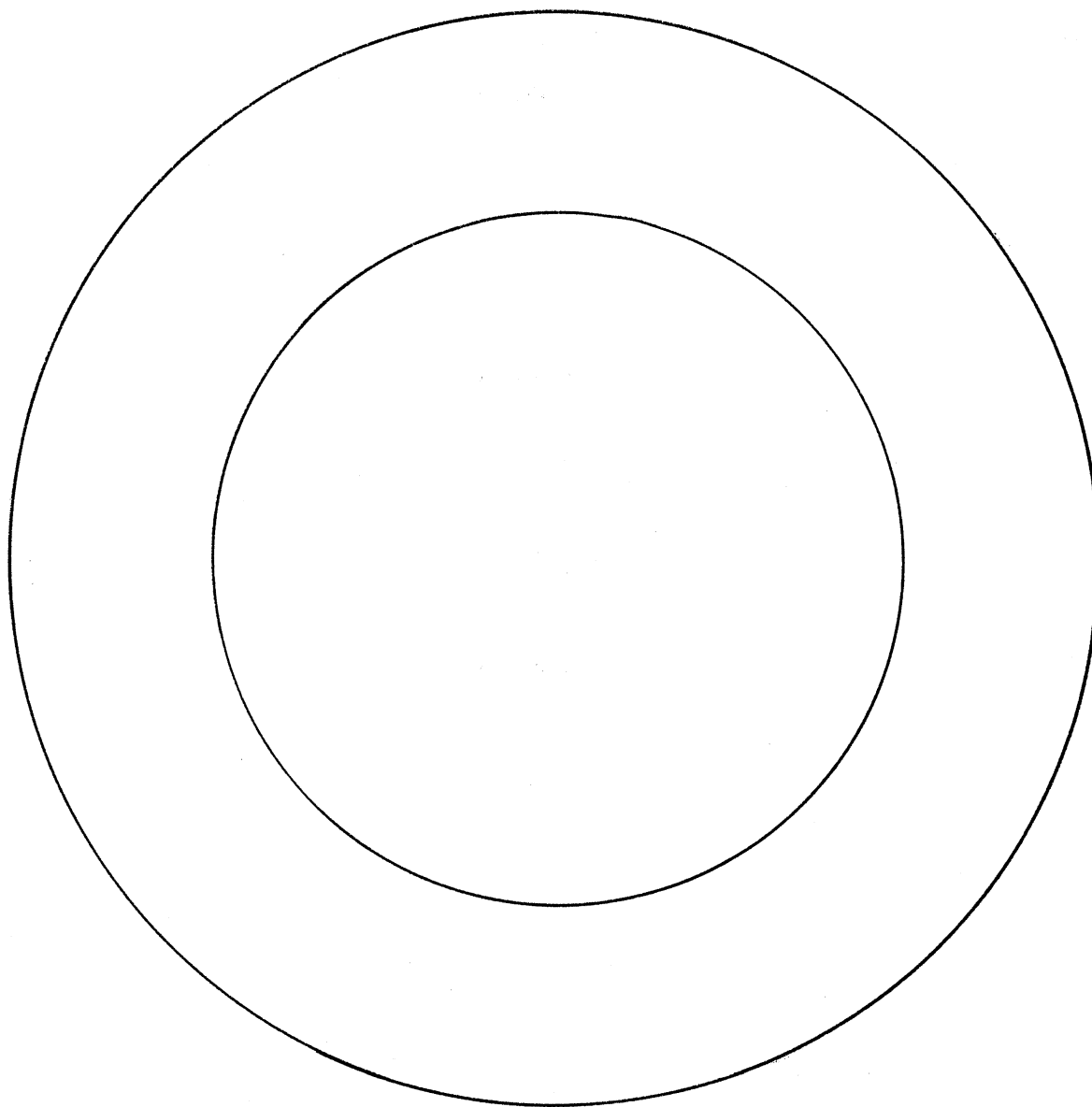
Read all the instructions before proceeding:

1. Each group member is to read aloud to the group his/her completed Success Analysis Chart. The Chart is to be read as follows:
 - (a) Start with Success #1.
 - (b) Read the "Success" and the reason given why it was a "success."
 - (c) Read the entire "Chart."
2. While a group member is reading his/her Chart, the remaining group members identify strengths indicated from what is being presented.
3. Write each strength identified on a separate label. You may have several strengths (labels) for each person.
4. After the Chart has been read in entirety, each of the other group members come to that member, one by one. Facing each other, the strengths are read and placed on the member's Strength Bombardment Target.
5. After ALL the members have given the strengths identified and they have been placed on the target, the person receiving the strengths verbalizes to the group his/her immediate reactions--feelings, etc.
6. Proceed around the group until all have completed these steps, and each group member has his/her own completed Strength Bombardment Target.

- NOTE -

At the end of the group session return these instructions to the table. Also return any unused "labels."

MY STRENGTH BOMBARDMENT TARGET



Name _____ Date _____ 19 _____

APPENDIX C

PERMISSION RELEASE FORM

I, _____, hereby give consent to

Mr. L. Vernon Atkins to use the following information:

- 1. Tennessee Self-Concept Scale Profile Sheet (including scores obtained); and
- 2. ACT scores received from Illinois Eastern Community Colleges. (233 E. Chestnut Street, Olney, Illinois, 62450)

I understand that this information will be used only for research purposes and will be anonymously identified.

(Witness' Signature)

(Signature)

Date of Signature 19

(Name)

I desire an individual appointment with L. V. Atkins to discuss my Tennessee Self-Concept Scale.

I prefer an appointment on _____ at _____.
(Day) (approximate time)

APPENDIX D

TABLES ON AGE OF EACH SUBJECT IN THE
LEADER AND LEADERLESS GROUPS

TABLE X
AGE OF EACH SUBJECT IN
LEADER GROUP

Subject	Age (in years)
A	19
B	41
C	22
D	28
E	21
F	48
G	29
H	20
I	20
J	19
K	17
L	26
M	35
N	32
O	18
P	18

TABLE XI
AGE OF EACH SUBJECT IN
LEADERLESS GROUP

Subject	Age (in years)
AA	34
BB	19
CC	19
DD	44
EE	33
FF	37
GG	24
HH	19
II	18
JJ	50
KK	31
LL	33
MM	31
NN	33
OO	42
PP	17
QQ	23

TABLE XII
MEAN AND S.D. OF AGE FOR BOTH GROUPS
AND TOTAL POPULATION

Item	M	S.D.
Total Population	27.88	9.66
Leader Group	25.81	9.16
Leaderless Group	29.82	9.98

APPENDIX E

TABLES ON HIGHEST LEVEL OF EDUCATION COMPLETED
FOR EACH SUBJECT IN THE LEADER AND
LEADERLESS GROUPS

TABLE XIII
HIGHEST GRADE LEVEL OF EDUCATION
COMPLETED FOR EACH SUBJECT IN
LEADER GROUP

Subject	Grade
A	11
B	12
C	12
D	12
E	14
F	08
G	12
H	12
I	12
J	12
K	12
L	12
M	12
N	12
O	12
P	12

TABLE XIV
HIGHEST GRADE LEVEL OF EDUCATION
COMPLETED FOR EACH SUBJECT IN
LEADERLESS GROUP

Subject	Grade
AA	10
BB	12
CC	12
DD	12
EE	12
FF	12
GG	11
HH	12
II	12
JJ	12
KK	12
LL	10
MM	11
NN	12
OO	09
PP	12
QQ	09

TABLE XV
MEAN AND S.D. OF HIGHEST GRADE LEVEL
OF EDUCATION FOR BOTH GROUPS AND
TOTAL POPULATION

Item	M	S.D.
Total Population	11.55	1.15
Leader Group	11.81	1.17
Leaderless Group	11.29	1.11

APPENDIX F

INDIVIDUAL RAW SCORES ON THE PRE-TEST TOTAL

P SCORE OF THE TENNESSEE SELF-CONCEPT

SCALE FOR THE LEADER AND

LEADERLESS GROUPS

TABLE XVI
INDIVIDUAL RAW SCORES ON THE PRE-TEST
TOTAL P SCORE FOR THE TENNESSEE
SELF-CONCEPT SCALE FOR THE
LEADER GROUP

Subject	Raw Score
A	358
B	271
C	330
D	335
E	338
F	334
G	244
H	315
I	352
J	354
K	301
L	351
M	348
N	347
O	334
P	316

N = 16

TABLE XVII
INDIVIDUAL RAW SCORES ON THE PRE-TEST
TOTAL P SCORE OF THE TENNESSEE
SELF-CONCEPT SCALE FOR THE
LEADERLESS GROUP

Subject	Raw Score
AA	272
BB	281
CC	382
DD	319
EE	310
FF	350
GG	339
HH	338
II	326
JJ	346
KK	303
LL	288
MM	333
NN	310
OO	284
PP	300
QQ	301

N = 17

APPENDIX G

INDIVIDUAL RAW SCORES ON THE PRE-TEST SELF-
CRITICISM SCORE OF THE TENNESSEE SELF-
CONCEPT SCALE FOR THE LEADER AND
LEADERLESS GROUPS

TABLE XVIII
INDIVIDUAL RAW SCORES ON THE PRE-TEST
S.C. SCORE OF THE TENNESSEE SELF-
CONCEPT SCALE FOR THE
LEADER GROUP

Subject	Raw Score
A	36
B	46
C	34
D	41
E	36
F	42
G	42
H	39
I	32
J	46
K	38
L	35
M	40
N	37
O	25
P	36

N = 16

TABLE XIX
INDIVIDUAL RAW SCORES ON THE PRE-TEST
S.C. SCORE OF THE TENNESSEE SELF-
CONCEPT SCALE FOR THE
LEADERLESS GROUP

Subject	Raw Score
AA	40
BB	33
CC	35
DD	25
EE	26
FF	35
GG	28
HH	42
II	33
JJ	34
KK	39
LL	42
MM	42
NN	28
OO	35
PP	43
QQ	45

N = 17

APPENDIX H

INDIVIDUAL RAW SCORES ON THE POST-TEST TOTAL
P SCORE OF THE TENNESSEE SELF-CONCEPT
SCALE FOR THE LEADER AND
LEADERLESS GROUPS

TABLE XX
INDIVIDUAL RAW SCORES ON THE POST-TEST
TOTAL P SCORE OF THE TENNESSEE SELF-
CONCEPT SCALE FOR THE
LEADER GROUP

Subject	Raw Score
A	383
B	312
C	387
D	347
E	339
F	357
G	285
H	351
I	366
J	371
K	309
L	341
M	353
N	345
O	336
P	330

N = 16

TABLE XXI
INDIVIDUAL RAW SCORES ON THE POST-TEST
TOTAL P SCORE OF THE TENNESSEE SELF-
CONCEPT SCALE FOR THE
LEADERLESS GROUP

Subject	Raw Score
AA	292
BB	283
CC	347
DD	309
EE	309
FF	332
GG	348
HH	322
II	333
JJ	338
KK	318
LL	292
MM	378
NN	309
OO	295
PP	310
QQ	314

N = 17

APPENDIX I

INDIVIDUAL RAW SCORES ON THE POST-TEST SELF-
CRITICISM SCORE OF THE TENNESSEE SELF-
CONCEPT SCALE FOR THE LEADER AND
LEADERLESS GROUPS

TABLE XXII
INDIVIDUAL RAW SCORES ON THE POST-TEST
S.C. SCORE OF THE TENNESSEE SELF-
CONCEPT SCALE FOR THE
LEADER GROUP

Subject	Raw Score
A	35
B	40
C	34
D	32
E	36
F	41
G	37
H	33
I	22
J	39
K	43
L	39
M	39
N	36
O	25
P	35

N = 16

TABLE XXIII
INDIVIDUAL RAW SCORES ON THE POST-TEST
S.C. SCORE OF THE TENNESSEE SELF-
CONCEPT SCALE FOR THE
LEADERLESS GROUP

Subject	Raw Score
AA	44
BB	45
CC	35
DD	35
EE	28
FF	38
GG	31
HH	44
II	34
JJ	31
KK	33
LL	41
MM	35
NN	28
OO	34
PP	45
QQ	44

N = 17

APPENDIX J

INDIVIDUAL GAIN SCORES OF THE TOTAL P RAW SCORE
ON THE TENNESSEE SELF-CONCEPT SCALE FOR
THE LEADER AND LEADERLESS GROUPS

TABLE XXIV
 INDIVIDUAL POST-TEST MINUS PRE-TEST GAIN SCORES
 OF THE TOTAL P RAW SCORE ON THE TENNESSEE
 SELF-CONCEPT SCALE FOR THE
 LEADER GROUP

Subject	Raw Scores		Gain
	Post-test	Pre-test	
A	383	358	25
B	312	271	41
C	387	330	57
D	347	335	12
E	339	338	01
F	357	334	23
G	285	244	41
H	351	315	36
I	366	352	14
J	371	354	17
K	309	301	08
L	341	351	-10
M	353	348	05
N	345	347	-02
O	330	334	-04
P	330	316	14

TABLE XXV
 INDIVIDUAL POST-TEST MINUS PRE-TEST GAIN SCORES
 OF THE TOTAL P RAW SCORE ON THE TENNESSEE
 SELF-CONCEPT SCALE FOR THE
 LEADERLESS GROUP

Subject	Raw Scores		Gain Score
	Post-test	Pre-test	
AA	292	272	20
BB	283	281	02
CC	347	382	-35
DD	309	319	-10
EE	309	310	-01
FF	332	350	-18
GG	348	339	09
HH	322	338	-16
II	333	326	07
JJ	338	346	-08
KK	318	303	15
LL	292	288	04
MM	378	333	45
NN	309	310	-01
OO	295	284	11
PP	310	300	10
QQ	314	301	13

N = 17

APPENDIX K

INDIVIDUAL GAIN SCORES OF THE SELF-CRITICISM
RAW SCORES ON THE TENNESSEE SELF-CONCEPT
SCALE FOR THE LEADER AND
LEADERLESS GROUPS

TABLE XXVI
 INDIVIDUAL POST-TEST MINUS PRE-TEST GAIN SCORES
 OF THE S.C. RAW SCORE ON THE TENNESSEE
 SELF-CONCEPT SCALE FOR THE
 LEADER GROUP

Subject	Raw Scores		Gain Score
	Post-test	Pre-test	
A	35	36	-01
B	40	46	-06
C	34	34	00
D	32	41	-09
E	36	36	00
F	41	42	-01
G	37	42	-05
H	33	39	-06
I	22	32	-10
J	39	46	-07
K	43	38	05
L	39	35	04
M	39	40	-01
N	36	37	-01
O	25	25	00
P	35	36	-01

N = 16

TABLE XXVII
 INDIVIDUAL POST-TEST MINUS PRE-TEST GAIN SCORES
 OF THE S.C. RAW SCORE ON THE TENNESSEE
 SELF-CONCEPT SCALE FOR THE
 LEADERLESS GROUP

Subject	Raw Score		Gain Score
	Post-test	Pre-test	
AA	44	40	4
BB	45	33	12
CC	35	35	00
DD	35	25	10
EE	28	26	02
FF	38	35	03
GG	31	28	03
HH	44	42	02
II	34	33	01
JJ	31	34	-03
KK	33	39	-06
LL	41	42	-01
MM	35	42	-07
NN	28	28	00
OO	34	35	-01
PP	45	43	02
QQ	44	45	-01

N = 17

VITA

L. Vernon Atkins

Candidate for the Degree of

Doctor of Education

Thesis: A STUDY OF CHANGE IN SELF-CONCEPT OF NURSING STUDENTS IN LEADER AND LEADERLESS GROUPS USING STRUCTURED TECHNIQUES IN SELF-DISCLOSURE

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Personal Data: Born in Conneaut, Ohio, September 3, 1933; married to Lois R. Garthwaite, June 4, 1955; father of five children, Deborah, deceased, Daniel, 19 years, Diane, 17 years, Denise, 15 years, and Doug, 12 years.

Education: Rowe High School, Conneaut, Ohio, graduating May, 1951; received Bachelor of Arts degree from Houghton College, Houghton, New York, with a major in Social Science, concentrations in Sociology and History, minors in Psychology and Education, June, 1955; received Master of Science in Education Degree from Alfred University, Alfred, New York, with a major in Counseling and Guidance in June, 1959; completing requirements for the Doctor of Education Degree at Oklahoma State University with a major in Student Personnel and Guidance, December, 1977.

Professional Experience: Appointed classroom teacher and counselor in Allentown Union School, Allentown, New York, 1955-59; appointed counselor by Co-operative Board of Education, Little Valley, New York, for Little Valley and Cattaraugus High Schools, 1959-61; appointed counselor and Professor of Psychology, Miltonvale Wesleyan College, Miltonvale, Kansas, 1961-68; appointed Director of Admissions at MWC, 1966-68; received Graduate Assistantship with Dean of Student Personnel at Oklahoma State University, Stillwater, Oklahoma, 1969-1970; appointed school psychologist for Bi-State Mental Health Clinic, Ponca City, Oklahoma, 1968-1970; appointed counselor and Associate Professor of Psychology at Greenville College, Greenville, Illinois, 1970-1973; appointed therapist

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Professional Organizations: Direct Service Providers Association, present membership; past membership in several other organizations.

Community Involvement: Member of Fairfield, Illinois, Grade School Board of Education, 1976-present; Member of Cumberland Presbyterian Church, Fairfield, Illinois; Member of Advisory Committee of the Illinois Eastern Community College, Associate Degree in Nursing Program.