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# PERCEPTION OF THERAPEUTIC CONDITIONS AS A FUNCTION OF PERCEIVED LEVEL OF PARENTAL ACCEPTANCE-REJECTION\*

ABSTRACT: The impact of the subject's perceived level of parental acceptance-rejection on his perception of therapeutic conditions in a simulated counseling interview was investigated. It was hypothesized that subjects who report a low level of parental acceptance-affection are unable to perceive the counselor-offered therapeutic conditions as the majority or modal group members. Based on the score indicating subject's perception of the counselor responses in video-taped interviews, a total of 222 secondary-school subjects were classified as: High-Perceivers, having perceived high levels of therapeutic conditions (top 33% of the sample); Low-Perceivers, having perceived low levels of conditions (bottom 33%); Average-Perceivers, (middle 33%). The dependent variable, the perceived level of parental acceptance-rejection, was compared among the groups. Results: There was no significant difference in the perceived level of parental acceptance-rejection between High- and Average-Perceivers. However, compared to Average-Perceivers, Low-Perceivers indicated a significantly lower level of the mother acceptance-affection.

A growing body of evidence indicates that when clients receive high levels of therapeutic conditions (i.e., accurate empathy, regard, congruence, and unconditionality) there is significantly more constructive behavioral change and/or self-exploration in the outcome measures of counseling than when clients receive relatively lower levels of therapeutic conditions (Barrett-Lennard, 1962; Cartwright & Lerner, 1963; Truax, 1968).

In studies concerned with the client's actual perception of these therapeutic conditions, on the other hand, a number of studies have reported that (a) the client-perceived therapeutic conditions appear to be unrelated to the judge-perceived conditions, and (b) constructive behavioral change of the client can result independently of his perceived level of therapeutic conditions (Burnstein & Carkhuff, 1968).

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Typically, the search for reasons for clients' failure to perceive correctly the counselor-offered therapeutic conditions was limited to a categorical description of client population; that is, these clients were hospitalized groups of patients who might be unable to perceive correctly and report their perceived therapeutic conditions. However, Lee and Nevison (1971) found that, among their secondary school "normal" subjects, there were large individual differences among the subjects in their perception of therapeutic conditions in the videotaped counseling interviews. When asked to rate the counselor responses after seeing a video-taped interview, some students were "deviant" in their perception of therapeutic conditions from those of the "majority" or modal group in the sense that they have consistently over- or under-rated the level of conditions in their repeatedly measured perception scores.

Lest the basic proposition — that an individual's past history of social reinforcement influences his present receptivity to social reinforcers — be obscured, it seems that an individual's characteristic life-long reinforcement history should be emphasized in investigating the client's actual perception of therapeutic conditions. While the notion of reinforcement history within the operant conditioning paradigm may require a different set of assumptions about the learning process, it may be assumed that an individual's verbalized level of overall coreconditions or acceptance-affection in the past is equivalent to the verbalized amount of positive reinforcement that he has received in the past.

Any number of the major parameters of an individual's past core-conditions or reinforcement histories may be a proper variable for study. However, one of the variables which has relevance for the perception of therapeutic conditions in the counseling interview may be the perceived experience of parental acceptance-affection vs. rejection. Using an experimental analogue, the present study investigated the impact of the earlier experienced therapeutic conditions or reinforcement histories in terms of parental acceptance-rejection on later perception of therapeutic conditions in a simulated counseling interview situation. It was predicted that subjects who report a lower level of parental acceptance-affection would be unable to perceive the counselor-offered therapeutic conditions as the majority or modal group members. Viewed in this way, the present study assumes that a subject's characteristic history of reinforcements in terms of parental acceptance-rejection serves as an internal norm or frame of reference in determining his perception of the counselor's therapeutic responses in the interview setting.

#### METHOD

Subjects

A total of 222 subjects (males, females) in grades 8 and 9 were drawn from a large secondary school in Burnaby, B. C.

# Video-taped Interviews

Two video-taped counseling films, hereafter to be named as Tape LLL and Tape HHH, developed by Lee and Nevison (1971) were used. In these tapes, each 21 minutes in length, a male counselor interviewed a client, who role-played a grade-12 male student with problems in his family relationship together with personality adjustment difficulties. In the two tapes, the nature of the client's problem and his verbal and nonverbal behaviors were controlled, while the counselor's functioning level with regard to overall therapeutic conditions differed. That is, in Tape LLL, the counselor offered a consistently low level of therapeutic conditions, whereas in Tape HHH the counselor offered a consistently high level of these conditions.

## Measurement of Perception of Therapeutic Conditions

In order to measure the subject's perception of the counselor responses in the tapes, the Barret-Lennard Relationship Inventory (Barrett-Lennard, 1962) (BRI) was employed. The BRI, with the theoretical rationale provided by Rogers' "necessary and sufficient conditions" formulation, is an inventory to measure therapeutic conditions along four components: empathy, regard, congruency, and unconditionality. The instrument is so designed that the items can be used to describe any two-person relationship with the specific relationship to be evaluated being specified by the examiner. Since its development, the BRI, in its various forms, has been used in more than 50 studies (Barrett-Lennard & Jewel, 1966). Based on the factor analytic study of Walker and Little (1969), a total of 32 items, 8 items for each component of the rapeutic conditions, were selected from those which indicated a high loading with each of the above four components. In the present study, the personal pronouns of the BRI items were replaced by "counselor" and "client," so that a counseling relationship could be described by the third-person observed. For example, Item 17 ("He nearly always knows exactly what I mean.") was restated: "The counselor nearly always knows exactly what the client means." The response format was a 9-point rating scale with 1 being the most negative and 9 being the most positive in the rating continuum.

# Measurement of Parental Acceptance-Rejection

Schaefer's (1965) Children's Reports of Parental Behavior Inventory (PBI) measures the child's perception of parental behaviors from a phenomenological point of view. The original PBI consists of 26 discrete components of parental behavior with 10 behavioral items each, and covers three orthogonal domains of children's reports on parental behavior: Acceptance vs. Rejection (A-R), Psychological Autonomy vs. Control, and Firm vs. Lax Control. For the purpose of the present study, however, only the items highly correlated to the Acceptance-Rejection factor were used. The Acceptance-Rejection fac-

tor indicates "sharing, expression of affection, support, positive evaluation, and equalitarian treatment at one pole, and a detached, hostile reaction at the other pole (Goldin, 1969, p. 223)." The item selections for the Acceptance-Rejection factor were from the following subscales with 8 items each: Acceptance, Rejection, Positive Involvement, Acceptance of Individuation, and Hostile Detachment. The summed score of the above subscale scores for each parent, with a possible range of 40-120, reflects the level of parental acceptance-rejection for a particular parent.

### Data Collection

Separate but virtually identical PBI mother and father scales were administered in a single testing session in a counter-balanced order. Approximately half of the total subjects received the PBI before the main experiment and the other half, after the experiment. The main experiment, obtaining the perception measure of the videotaped counseling interviews, was conducted with a segment of each class or classes making up a single sample group. Each group of sampled subjects was shown only one tape. The order of showing the tapes as well as the assignment of the subject group for each tape was randomized.

Immediately after the general instructions were given, a tape was shown. At the end of 21 minutes, the experimenter distributed the PBI to the subjects, and asked them to rate the counselor's responses.

#### Design

The following procedures were taken for the data analyses. (1) Based on the BRI score which reflects the subject's perceived level of the counselor-offered therapeutic conditions in the tape, the subjects, within each Tape LLL and HHH, were classified as the following groups: the High-Perceivers, having perceived high levels of therapeutic conditions in the tape (top 33 percent of the subjects in each tape); the Low-Perceivers, having perceived low level of conditions (bottom 33 percent); the Average-Perceivers (middle 33 percent). (2) The dependent variable, that is, the perceived level of parental acceptance-affection and rejection as measured by the PBI, were compared between the Low- vs. Average-Perceivers, and also between the High- vs. Average-Perceivers. Thus, the two categories of tapes (i.e., LLL and HHH) and three categories of the perception of the counselor responses in the tape (i.e., High-, Low-, and Average-Perceivers) generated a 2 x 3 factorial design. The data covered a total of 222 subjects, 111 for each tape, with 37 subjects in each cell.

#### RESULTS

Prior to the main analysis of the data, an analysis of variance (Myers, 1966) was performed on the PBI total score (see Table 1). As presented in Table 1, there was a significant Group effect (p<.01), indicating significant differences in the PBI scores among the three

TABLE 1
Analysis of Variance on the Scores of the Parental Behavior Inventory

Source	df	MS	F
Tape Group Tape x Group Error.	$\frac{2}{2}$	2070.65 16783.10 4011.37 3219.01	.64 5.21* 1.25

<sup>\*</sup>b < .01

TABLE 2 Mean Scores of Low-Perceivers, Average-Perceivers, and High-Perceivers on Parental Behavior Inventory

Subscales		Groups			
Subscales		Low	Average	High	
Father Acceptance	ent nent ividuation dividuation nt	33.76 33.03 36.49 35.77 30.62 30.31 35.19 34.50 37.27 36.59	33.95 36.45 38.92 38.08 29.59 33.19 34.99 36.58 38.74 39.62	35.69 37.91 38.64 39.55 33.12 34.24 36.28 38.24 39.35 40.59	

Note. — SD's pooled for the three groups: Father Acceptance = 8.73, Mother Acceptance = 7.93, Father Rejection = 7.70, Mother Rejection = 7.01, Father Positive Involvement = 7.66, Mother Positive Involvement = 7.22, Father Acceptance of Individuation = 7.96, Mother Acceptance of Individuation = 6.99, Father Hostile Detachment = 7.23, Mother Hostile Detachment = 6.58.

groups. However, the interaction effect of Tape x Group was not significant (p>.05). Thus, the data for Tapes LLL and HHH were pooled in the subsequent analyses of the data. Table 2 gives the pooled mean in each subscale of the PBI.

A multivariate analysis of variance (Morrison, 1967) was performed on the dependent set of the PBI subscale scores to compare the perceived level of parental acceptance-rejection among the three groups using the Average-Perceivers as a basal-line group. The results are presented in Table 3.

As indicated in Table 3, the multivariate F ratio, testing overall differences in the set of the PBI subscales between the High- and Average-Perceivers, was not significant (Multivariate F=1.71, df= 10/207, p>.05). In the univariate situation comparing each PBI

subscale, none of the subscales except the father Positive Involvement revealed a significant difference (p<.01) between the High- and Average-Perceivers, was not significant (Multivariate F=1.71, df= Perceivers, however, the data were in part consistent with the prediction: The multivariate F ratio, testing the difference in the set of the PBI subscales, equaled 2.31 and was significant (df=10/207,p<.025). In the univariate situation, all subscales relating to the mother indicated significant differences (p's<.01). Specifically, compared to the Average-Perceivers, the Low-Perceivers showed significantly lower mean scores in the mother subscales of Acceptance, Positive Involvement, and Acceptance of Individuation; and higher scores in the mother Rejection and Hostile Detachment (see Table 2). However, it was interesting to note that none of the subscales relating to the father showed significant differences between the two groups.

TABLE 3 Multivariate Analysis of Variance with Measures of Perception of Parental Behaviors as the Dependent Set

Subscales	High-Perceivers vs. Average-Perceivers <sup>a</sup>				
Subscales		MS	Univariate Fb	Þ	
Father Acceptance		112.44	1.47	.226	
Mother Acceptance		78.81	1.25	.264	
Father Rejection		2.98	.05	.823	
Mother Rejection		80.27	1.63	.203	
Father Positive Involvement		406.27	7.85*	.006	
Mother Positive Involvement		41.11	.79	.376	
Father Acceptance of Individuation		62.27	.98	.323	
Mother Acceptance of Individuation		102.22	2.09	.149	
Father Hostile Detachment		13.68	.26	.610	
	ment	35.01	.81	.370	

Low-Perceivers vs. Average-Perceivers<sup>o</sup>

<sup>\*</sup>Multivariate F = 1.74, df = 10/207, p < 0.75

 $<sup>^{</sup>b}df = 1/216$ °Multivariate F = 2.31, df = 10/207, p < .014

p < .01\*\*p < .005

#### DISCUSSION

The results fail to support the hypothesis as stated but do shed some additional light on the variable influencing the subject's perception of counselor-offered therapeutic conditions. The low-perceivers in the vicarious situation and as appraised from the adapted Barrett-Lennard Relationship Inventory are also low-perceivers in regard to the mother Acceptance, Positive Involvement, Acceptance of Individuation; and high-perceivers in regard to mother Rejection and Hostile Detachment. On the other hand, the high-perceivers seem to report almost the same level of parental acceptance-rejection as the averageperceivers. In fact, the high-perceivers showed slightly higher scores of parental Acceptance, Positive Involvement, and Acceptance of Individuation than the average-perceivers. Viewed in this way, the question of how much a subject "perceives" therapeutic conditions in a vicarious situation seems to be a function of the level of the mother acceptance-affection he perceives. In this regard, Baron's (1966) Social Reinforcement Standard (SRS) model seems to have some relevance to the findings of the present study. According to Baron, an individual's past history of social reinforcement serves as a "base line against which the adequacy or appropriateness of present social reinforcer inputs is judged (p. 528)." This suggests that an individual's characteristic past experience of reinforcement produces an internal norm or frame of reference in responding to the future social reinforcement. As applied to the findings of the present study, it may be said that a subject whose life-long reinforcement history is characterized by negative reinforcement, insufficient loving, or parental rejection may be unable or unwilling to perceive therapeutic conditions as others do. However, a question still remains: Why, then, did the low-perceivers report a lower level of acceptance-affection from their mothers but not from their fathers? One conjecture may be made along this line of argument. The subjects may have a covert interpretation of the meaning of the "counselor" as a person with a similar role to that of the mother (e.g., caring, soothing, with unconditional love and affection) rather than the father. Thus, when they were reacting to the counselor responses in the dimensions of therapeutic conditions, they may have reacted in a similar role dimension of the mother.

Finally, it should be noted that the subjects employed in this study were not the clients who actually received a counseling interview with the counselor in the tapes. That is, the high-, low-, and average-perceivers were classified on the basis of their rating of a counseling tape which they saw as third-person observers. Thus, the question remains whether similar findings could be obtained if clients who actually received a counseling interview were to rate the counselor responses.

RESUME: On a étudié, au moyen d'une situation simulée de counseling. les effets sur la perception des conditions thérapeutiques du niveau perçu d'acceptation ou de rejet des parents. On a avancé l'hypothèse que les suiets se percevant comme avant été peu acceptés par leurs parents, sont moins réceptifs aux conditions thérapeutiques qui leur sont offertes que la majorité des autres sujets. Les scores de 222 étudiants de niveau secondaire concernant leurs perceptions des conditions thérapeutiques offertes par le conseiller furent trichotomisés. On a utilisé une bande magnétoscopique pour observer les perceptions, que les sujets manifestaient à l'endroit des réponses des conseillers. On a ensuite comparé les trois groupes (supérieur, moyen, inférieur) sur la variable dépendante, soit le niveau percu d'acceptation ou de rejet des parents. On a observé aucune différence significative entre le groupe supérieur et le groupe moyen. Cependant, le groupe inférieur manifeste un niveau significativement moins élevé d'acceptation maternelle que le groupe moyen.

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