A Comparison of Modeling and Instructions on Nonverbal Empathy Behavior in a Simulated Counseling Interview

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Robin D. Seipp

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A COMPARISON OF MODELING AND INSTRUCTIONS ON NONVERBAL EMPATHY BEHAVIOR IN A SIMULATED COUNSELING INTERVIEW

BY

ROBIN D. SEIPP

THESIS

Submitted in partial fulfillment of the requirements for the Master of Arts degree in Psychology in the Graduate Studies Program of the College of Arts and Sciences University of Central Florida Orlando, Florida

Fall Term 1985
ABSTRACT

The relative contribution of modeling and instructions as methods for training counselors in nonverbal empathy was assessed in a 2 X 3 factorial design employing two instruction conditions (Instructions and No Instructions) and three modeling conditions (High Nonverbal Empathy Model, Low Nonverbal Empathy Model, and No Model). Six groups of subjects were presented with the six different combinations of the above conditions and were then asked to conduct a 15-minute interview with a "client." It was predicted that those viewing the High Nonverbal Empathy Model would exhibit higher nonverbal empathy responses in the interview. It was also predicted that instructions would have no effect. The results indicated that these hypotheses were accurate in that there was a significantly higher amount of nonverbal empathy produced subsequent to subjects viewing the High Nonverbal Empathy Model as opposed to the Low Nonverbal Empathy Model or No Model. Instructions had no effect. This lends support to the importance of modeling as a means of teaching nonverbal empathy to counseling students.
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CHAPTER 1
INTRODUCTION

Empathy, a major core condition in the facilitative process of psychotherapy, has chiefly been measured by verbal methods. More recently, however, the trend has been to investigate empathy as expressed through nonverbal channels. The focus of current research has been the relationship between nonverbal behavior and perceived empathy. Sobleman (1973) and Bayes (1972), for example, both investigated perceived empathy with regard to certain nonverbal behaviors. Bayes found that the degree of empathy manifested in the counselor's nonverbal behavior significantly affected the people with whom they interacted. La Cross (1975) found that "affiliative" nonverbal behaviors such as smiles, head nods, eye contact, and body lean were perceived as being warm and attractive by trained raters. Hackney (1974) studied the effects of four levels of nonverbal facial gestures on client verbal behavior and found that these gestures played a significant role in the total communication process between individuals. For example, he found that the client was more likely to produce higher levels of self-expression when presented with head nods and/or smiles than with a blank face. D'Augelli (1974)
studied the importance of helper nonverbal behavior on clients in actual helping interactions. He found that such nonverbal behavior as smiling, nodding, leaning forward, looking down, staring away and fiddling, when employed by a counselor, were shown to significantly affect the perceptions of the client as being warm and understanding or discontented.

Recent evidence suggests that nonverbal behaviors may have considerable importance in determining the nature of the communication process. Mehrabian and Ferris (1967) have found that the nonverbal-expressive channel of communication accounted for one and one-half times as much variance in communication of a message than the verbal channel. By combining three degrees of attitude (positive, negative, or neutral) in facial expression (eye contact, smiling, etc.) with degrees of attitude, communicated vocally, they found that the facial component received approximately one and one-half times the weight received by the vocal component.

By having subjects rate videotaped modeled counselor-client interviews on a revised five-point empathy scale developed by Truax and Carkhuff (1967), Hasse and Tepper (1972) found that the nonverbal components in the model accounted for slightly more
than twice as much variance in the judged level of empathy than the verbal message. These findings are in agreement with those of Mehrabian and Ferris (1967). Hasse and Tepper draw the conclusion that more attention should be focused on nonverbal training of counselors and that focusing totally on verbal aspects could shortchange the trainees. To limit focus on these nonverbal channels, they believe, would reduce the richness of the counseling process.

In addition to emphasizing the content of a program when training counselors, consideration should also be given to the method or technique of training counselors as Perry (1975) suggests. Perry has studied the use of modeling and instructions as techniques for training counselors in the expression of verbal empathy. Modeling has been established as an effective and rapid method for teaching new skills (Bandura, 1969). Specific to empathy training, Dalton (1973) found that a modeled learning experience was superior to reading material in facilitating a subject's ability to respond empathically.

Perry's (1973) study employed six different treatment conditions, including empathy, modeled on audio tapes and/or verbal instructions administered to six different treatment groups. The subjects, then,
conducted their own interviews. Results supported Perry's hypothesis that subjects exposed to the High Empathy Model would exhibit more empathy in their own interviews than would those hearing the Low Empathy Model or hearing No Model. However, Perry's second hypothesis, that "hearing only" instructions on empathy would increase empathic responses, was not supported. It was concluded that modeling was a more effective teaching mechanism than verbal instructions.

In a study by Smith-Hanen (1977), it was found that a counselor's nonverbal behaviors of arm and leg position influenced perceptions of whether a counselor was empathic or not. She referred to Perry's study and suggested that further experimentation be done on modeling for nonverbal behavior acquisition.

The evidence cited above suggests that nonverbal communication of empathy can be more effective than verbal communication of empathy in the counseling relationship. Additional evidence presented by Perry noted that modeling is an effective means of teaching new skills in verbal empathy. It is the purpose of this study to assess the contribution of modeling as a means of teaching nonverbal empathy. Using modeling and instructional conditions, it is hypothesized that models videotaped exhibiting High Nonverbal Empathy
will elicit more nonverbal empathy in the subject's own subsequent interviews than will models exhibiting Low Nonverbal Empathy or a No Model condition. It is also hypothesized that verbal instructions will have no effect on the subsequent amount of nonverbal empathy in the subject's own interviews.
CHAPTER II

METHOD

Subjects

Thirty-six naive female subjects (with no previous educational training in nonverbal empathy) participated in this study. The subjects were volunteers from an introductory class in psychology and received academic credit for their participation. The mean age of the subjects was 20 with a range in age from 18 to 44 years.

Experimental Design and Treatment Conditions

A 2 X 3 factorial design was employed using two instruction conditions (Instructions, No Instructions) and three modeling conditions (High Nonverbal Empathy, Low Nonverbal Empathy, No Model) generating six experimental cells with Cell 1 being High Nonverbal Empathy Model - Instructions, Cell 2 being Low Nonverbal Empathy Model - Instructions, Cell 3 being No Model - Instructions, Cell 4 being High Nonverbal Empathy Model - No Instructions, Cell 5 being Low Nonverbal Empathy Model - No Instructions and Cell 6
being No Model - No Instructions. The 36 subjects were equally and randomly assigned to the six different treatment conditions.

Two audio-visual tapes were made. Each was filmed from the same angle -- directly behind the client's head so that the counselor's body was in full view. The counselor was described as a female psychologist in private practice. Each tape was 10 minutes in length. One tape purposely included the nonverbal behaviors of hand gestures, forward body lean (found to significantly affect ratings of a counselor as being warm by D'Augelli, 1974), head nodding (found to significantly affect ratings of a counselor as being warm by LaCross, 1975), and smiling and eye contact (found to be significant indicators of a counselor being empathic to clients by Truax and Carkhuff, 1967). These behaviors were manifested throughout the tape and constituted the High Nonverbal Empathy condition. The Low Nonverbal Empathy tape was constructed to minimize these behaviors. Both tapes contained the same vocalizations by the client and the counselor. A panel of three raters rated the films to verify that they varied in degree of nonverbal empathy expressed. There was also a No Model condition in which the subjects did not view any tape.
The Instruction condition, in addition to explaining the importance of nonverbal empathy, pointed out the studies referred to above which have found certain nonverbal behaviors to be effective. See Appendix A for the exact instructions that were given. One-half of the subjects received no instructions, constituting the No Instruction condition. If instruction and modeling were presented to the same subject, instructions were presented first in half of the situations whereas the videotape was presented first in the other half.

Before any of the treatment conditions were administered, subjects were read the following introductory statement: "Thank you for agreeing to participate in this project. Your participation is part of a study by a graduate student in Clinical Psychology being conducted in order to complete requirements for her Master's Degree thesis. This study will involve asking you to conduct a five-minute interview with someone playing the role of a client asking for counseling. You will be asked to play the role of the counselor. A videotape will be made of this counseling interview and will be destroyed immediately following recording of data necessary for the study and no longer than 30 days following your
participation." The subjects then were asked to sign a consent form to participate in the study. See Appendix B for the actual consent form. If the subjects were in either the No Model or No Instructions condition, they proceeded directly to the interviewing situation. The subjects who saw a modeling tape were told, "Prior to conducting your interview, you will see a videotape and may also receive some additional information." The subjects who received only the Instruction condition were told, "Prior to conducting your interview, you will receive additional information."

After administering the treatment conditions, the subjects stayed in the same room and were told the following: "Now I would like you to conduct an interview with someone who is playing the role of a client coming to a Mental Health Center for counseling. I would like you to act as the counselor and try to be as helpful as you can. Respond to the person in whatever way seems best to you. I will make a videotape of the interaction and stop you after five minutes." The experimenter then left the room and filming began when the actor entered the room with the subject. The female actor was trained to play the role of someone seeking help for depression. She rehearsed a minimum of five times with the examiner and was
trained to respond naturally while presenting a consistent problem to all subjects. Following the completion of the subject's interview the examiner came back to the room, briefly explained the purpose of the study and presented a Release of Data form for the subject to read and sign. See Appendix C for Release of Data form.

Establishing Validity of Experimental Tapes

Three raters were recruited and trained on the criteria for rating whether the nonverbal behaviors of hand gestures, forward body lean, head nodding, facial expression, and eye contact were present in the experimental tapes. See Appendix D for criteria for rating of the nonverbal behaviors. Using these criteria, the three raters observed the experimental tapes and kept a count of the number of 15-second intervals in which the subjects exhibited the desired nonverbal behavior. By using a matched t-test, it was found that the two experimental tapes did differ in amount of nonverbal empathy produced. The mean for the High Empathy tape was 14.67 and for the Low Empathy tape the mean was 3.94 ($t(4) = 5.38, p = .005$), indicating that the two tapes were very significantly different. Refer to Table 1 for a presentation of the
interrater scores for nonverbal empathy behaviors on the High Empathy versus the Low Empathy experimental tapes. This table also includes the mean ratings.
<table>
<thead>
<tr>
<th></th>
<th>High Empathy Tape</th>
<th>Low Empathy Tape</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Rater 1  Rater 2  Rater 3  M</td>
<td>Rater 1  Rater 2  Rater 3  M</td>
</tr>
<tr>
<td>Hand Gestures</td>
<td>8     7     6     7.0</td>
<td>0    0     0     0</td>
</tr>
<tr>
<td>Forward Body Lean</td>
<td>20    20    19    19.7</td>
<td>2    0     3     1.7</td>
</tr>
<tr>
<td>Head Nodding</td>
<td>18    19    20    19.0</td>
<td>7    8     8     7.7</td>
</tr>
<tr>
<td>Facial Expression</td>
<td>15    16    15    15.3</td>
<td>9    8     7     8.0</td>
</tr>
<tr>
<td>Eye Contact</td>
<td>11    14    12    12.3</td>
<td>3    3     1     2.3</td>
</tr>
</tbody>
</table>
Since there is no valid scale for measuring nonverbal empathy, two trained raters observed the videotaped interactions produced by the subjects at different times. These raters were also trained using the criteria for rating of the nonverbal behaviors. Refer to Appendix D for these Criteria. While viewing the tapes, these raters also used a 15-second interval rating scale and kept a count of the number of intervals in which the subject exhibited the nonverbal behaviors of hand gestures, forward body lean, head nodding, smiling, and eye contact. There were 20 intervals in all.

Interrater reliability was established according to a percent-agreement by the two raters, using the experimental tapes. Results indicated a reliability coefficient of .70 on the High Nonverbal Empathy Model tape and .73 on the Low Nonverbal Empathy tape, indicating reliability.
CHAPTER III

RESULTS

A Multivariate Analysis of Variance procedure and
Univariate Analysis of Variance procedure were used to
analyze the data (Brecht and Woodward, 1983). The
Multivariate Analysis of Variance used an optimal
weight formula for the five dependent variables of head
nodding, forward body lean, facial expression, hand
gestures, and eye contact. The results indicated that
the main effect of Instructions was not significant,
$R(5,26)=1.05, p=.41$. The main effect for Modeling,
however, was significant, $R(10,52)=2.43, p=.02$.
Furthermore, the results revealed that there was a
significant difference between the High Nonverbal
Empathy Model and the Low Nonverbal Empathy Model
conditions, $R(5,26)=3.99, p=.0008$; and between the High
Nonverbal Empathy Model and the No Model conditions,
$R(5,26)=4.62, p=.0004$. However, no significant
difference was found between the Low Nonverbal Empathy
Model and the No Model conditions, $R(5,26)=.16, p=.97$.
Finally, there was no significant interaction effect
between the Instructions and Modeling conditions
$R(10,52)=.83, p=.60$. 
Following are the results of the Univariate Analysis of Variance procedures used to test for differences between the High Nonverbal Empathy Model and the Low Nonverbal Empathy Model conditions and between the High Nonverbal Empathy Model and the No Model conditions for each of the five dependent variables separately.

**Head Nodding**

Between the High Nonverbal Empathy Model versus the Low Model conditions, Head Nodding was significant, $F(1,30)=8.34, p=.0007$. For the High Model versus the No Model conditions, Head Nodding was also significant, $F(1,30)=9.15, p=.0005$.

**Body Lean**

Between the High Model and the Low Model conditions, Body Lean was significant, $F(1,30)=6.23, p=.01$. For the High Model versus No Model conditions, Body Lean was also significant, $F(1,30)=6.08, p=.02$.

**Facial Expression**

Between the High Model and Low Model conditions, Facial Expression was not significant, $F(1,30)=3.65, p=.06$. However, for the High Model versus No Model condition, Facial Expression was significant $F(1,30)=7.45, p=.01$. 
Hand Gestures

Between the High Model and the Low Model conditions and between the High Model and No Model conditions, Hand Gestures was not significant, $F(1, 30) = 3.05$, $p = .09$ and $F(1, 30) = 2.70$, $p = .11$, respectively.

Eye Contact

Between the High Model and Low Model conditions and between the High Model and No Model conditions, Eye Contact was not significant, $F(1, 30) = .04$, $p = .82$ and $F(1, 30) = .06$, $p = .79$, respectively.

Refer to Table 2 for a presentation of the unweighted total mean scores for each of the Instruction and Model conditions.
### TABLE 2

**UNWEIGHTED TOTAL MEANS FOR INSTRUCTIONS AND MODELING CONDITIONS**

<table>
<thead>
<tr>
<th></th>
<th>High Model</th>
<th>Low Model</th>
<th>No Model</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Instructions</strong></td>
<td>9.92</td>
<td>6.15</td>
<td>5.17</td>
<td>21.24</td>
</tr>
<tr>
<td><strong>No Instructions</strong></td>
<td>9.13</td>
<td>5.92</td>
<td>6.65</td>
<td>21.70</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>19.05</td>
<td>12.07</td>
<td>11.82</td>
<td>75.42</td>
</tr>
</tbody>
</table>

Refer to Table 3 for a presentation of the unweighted mean scores for each dependent variable separately.

### TABLE 3

**SEPARATE UNWEIGHTED MEAN SCORES FOR THE HIGH, LOW, AND NO MODEL CONDITIONS**

<table>
<thead>
<tr>
<th></th>
<th>High Model</th>
<th>Low Model</th>
<th>No Model</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Head Nodding</strong></td>
<td>9.63</td>
<td>4.38</td>
<td>4.13</td>
<td>21.75</td>
</tr>
<tr>
<td><strong>Forward Body Lean</strong></td>
<td>8.92</td>
<td>2.04</td>
<td>2.13</td>
<td>15.69</td>
</tr>
<tr>
<td><strong>Facial Expression</strong></td>
<td>5.13</td>
<td>2.79</td>
<td>1.79</td>
<td>11.64</td>
</tr>
<tr>
<td><strong>Hand Gestures</strong></td>
<td>5.63</td>
<td>2.79</td>
<td>2.96</td>
<td>13.65</td>
</tr>
<tr>
<td><strong>Eye Contact</strong></td>
<td>18.83</td>
<td>18.17</td>
<td>18.29</td>
<td>66.03</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>47.64</td>
<td>30.17</td>
<td>29.30</td>
<td>107.11</td>
</tr>
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</table>
CHAPTER IV
DISCUSSION

It was predicted that subjects viewing a High Nonverbal Empathy Model would, in a subsequent brief interview experience, (a) offer higher nonverbal empathy than subjects viewing a Low Nonverbal Empathy Model and (b) offer higher nonverbal empathy than subjects viewing No Model. The results strongly supported both hypotheses. These findings suggest that a counselor's ability to communicate attentiveness, warmth, and understanding via nonverbal channels can be enhanced through observational learning-training experiences. It was also predicted that verbal instructions, alone, would have no effect on amount of subsequent nonverbal behavior manifested in a simulated brief interview. This prediction was also supported as there was no main effect for instructions and empathy modeling. These results clearly suggest that verbal instructions may not be a particularly helpful way to teach a counselor to be nonverbally empathic whereas modeling is a more effective method of teaching these desired skills.

In comparing the High Model versus the Low Model conditions, results indicated that only particular
nonverbal behaviors accounted for the higher nonverbal empathy behaviors modeled by subjects exposed to the High Model condition. In order of significance the behaviors were Head Nodding and Forward Body Lean. On the other hand, Facial Expression (although it approached significance), Hand Gestures and Eye Contact did not discriminate between subjects in the High Model versus the Low Model groups.

Between the High Model and No model conditions, results indicated that the nonverbal behaviors of Head Nodding, Facial Expression, and Forward Body Lean (in order of significance) were modeled significantly more frequently by subjects in the High Model group. The nonverbal behaviors of Hand Gestures and Eye Contact, again, were not modeled at a significantly different level between these two conditions.

The results of this study indicate that nonverbal empathy can be effectively taught via observational learning or modeling procedures. This is in agreement with the findings of Bandura (1969) who established the power of the modeling process in effecting behavior change across a wide array of situations. These results have implications for trainers of counselors in that they emphasize the importance of video and/or live modeling in the teaching of important counseling
skills. Trainers frequently limit teaching methods to the traditional classroom-lecture type (instructions). It appears advisable for trainers to utilize a wider array of teaching methodologies. Indeed, Yalom (1975) maintains that "student therapists derive enormous benefit from watching an experienced group therapist at work," indicating the importance of observation of a model therapist as critical to adequately train students in group therapy techniques.

One possible interpretation of why modeling is such an effective teaching tool is that seeing and hearing an actual model counselor might give a student a more concrete conceptualization of how counseling is done and, thus, they can more easily picture themselves in the place of the model counselor. Bandura's perceived self-efficacy theory (1977) similarly suggests that a subject-observer may develop a more positive expectation that he/she can master a situation (i.e., conduct a brief personal interview) following an opportunity to observe exactly what is expected and particularly in a high empathy condition where there are many cues regarding positive interviewer behavior.

One possible explanation of why Eye Contact was not significant could be that the tapes of the subjects were not filmed in such a way that raters could
adequately score whether the subjects looked at or away from the interviewee. It is possible that it was easier to spot whether the subject exhibited the other behaviors than whether they maintained eye contact because they were more visible. Another explanation of why Eye Contact was maintained across all conditions could be related to smallness of the experimental room, closeness of interviewer and interviewee and the lack of a visible window. These are variables which might, normally, distract and cause eye contact to be broken. A reason why Hand Gestures was not significant could be that Hand Gestures occurred due to other reasons apart from showing nonverbal empathy. For example, perhaps the subjects moved their hands out of nervousness.

The results of this study support Perry's (1973) results that empathy responses could be modeled through audio tapes. These results also strongly supported Perry's finding that subjects exposed to high empathy models exhibit more empathy responses in written questionnaires than do subjects exposed to low empathy or no models. These results also support her findings that "hearing only" instructions on empathy did not increase empathic responses significantly. However, when the subjects in Perry's study conducted their own
interviews following presentation of treatment conditions, neither the modeling or instruction effect was significant although the modeling effect approached significance. Thus, the subjects in her study effectively learned from the modeled verbal empathy responses but did not actually model them in practice. This could possibly have happened because audio tapes are less easily modeled than are video tapes. In the present study, subjects were able to see models and emulate their actions rather than merely hearing verbal responses, being asked to participate in an interview, and being verbally empathic. Thus, it would seem that the visual component is very important in the modeling situation. However, another explanation of why modeling was not significant in this phase of Perry's study could be that she used subjects with prior counseling experience rather than "naive" subjects as in the present study. The varying expertise of the subjects in Perry's study could account for the differences in empathy produced.

The present study has demonstrated that a therapeutic behavior, such as nonverbal empathy, can be quickly influenced by observation of a model. However, there is room for further experimentation in this area. It would be interesting, for example, to vary the
amounts of time between when the model is viewed and when the subject is asked to conduct his or her own interview with a "client" since actual training of counselors is usually done quite a bit of time before they are in actual helping situations. It would also be interesting to study the use of modeling in an extended training program.

It would be advisable to replicate the current study and have the three raters who rated the training tapes alternate between rating Tape 1 and Tape 2 first. In this study, even though the raters were blind to the hypothesis, they always rated Tape 1 first. This is a flaw and could account for a practice effect in the rating.

In light of this and previous experiments, further experimentation of teaching methods of nonverbal empathy would seem feasible.
APPENDIX A
INSTRUCTIONS

Nonverbal behavior by a counselor may be more important than what she actually says to a client in determining whether the client perceives the counselor as being warm and understanding. Nonverbal behavior such as nodding one's head, leaning forward toward the client and using one's hands to express oneself have been found by several researchers to be more important in communication to a client that a counselor understands her than what was actually said.

Maintaining eye contact and using facial expression to show understanding to a client have also been found to be effective. In short, by using such "body language" a counselor can be more helpful to a client than if she did not use this effective counseling technique.
APPENDIX B

CONSENT TO PARTICIPATE FORM

Age:
Sex:
Educational Level:

I agree to participate in this study with the knowledge that my name will not be used in any way and that all information will be kept confidential. I understand that the videotape will be viewed by two trained raters and erased immediately after data is recorded (a period not to exceed thirty (30) days). I understand fully what is expected of me and that I am not being "tricked" in any way. I understand that I may terminate my participation in this study at any time.

Signature______________ Date______ Witness______
APPENDIX C

RELEASE OF DATA FORM

The purposes of this research have been satisfactorily explained to me and I give my informed consent for my data to be used in this research. I understand that the videotape will be viewed by two trained raters and will be erased within a period not to exceed thirty (30) days.

Date____________________
Signature________________
Witness__________________
APPENDIX D

CRITERIA FOR RATING OF THE NONVERBAL EMPATHY BEHAVIORS

A count of one will be recorded for each 15 second interval in which each of the following behaviors are exhibited:

Hand gestures -- any movement of the hands or arms while the counselor is speaking so as to emphasize meaning to the client.

Forward body lean -- any inclination of the body above the waist toward the client.

Head nodding -- any affirmative head nodding which shows understanding or agreement with the client.

Facial expression -- this is a subjective variable and is measured in relation to what the client is saying. It is an expression of the face which indicates listening and understanding of the client. Examples are smiling when the client is feeling good; squinting when the client is in pain; or frowning when the client is expressing sadness (i.e., it is important to realize that many
variables such as frowning may be exhibited in a negative way such as to show disappointment of the client and would, thus, not be recorded). In general, if the subject manifests a blank face or an expression inappropriate to the content of the client's speech, a frequency count is not made.

Eye contact -- looking at the client's face which indicates listening. Examples of inconsistent behavior are looking down or around the room.
REFERENCES


