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EFFECTS OF BEHAVIOR REHEARSAL VERSUS BEHAVIOR REHEARSAL

COMBINED WITH FEEDBACK AND INSTRUCTIONS ON

COMPONENTS OF POSITIVE ASSERTIVE BEHAVIOR

BY

TIMOTHY PAUL FOLLICK

THESIS

SUBMITTED IN PARTIAL FULFILLMENT OF THE REQUIREMENTS
FOR THE DEGREE OF

PSYCHOLOGY

IN THE GRADUATE SCHOOL, EASTERN ILLINOIS UNIVERSITY CHARLESTON, ILLINOIS

1977 YEAR

I HEREBY RECOMMEND THIS THESIS BE ACCEPTED AS FULFILLING THIS PART OF THE GRADUATE DEGREE CITED ABOVE

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EFFECTS OF BEHAVIOR REHEARSAL VERSUS BEHAVIOR REHEARSAL COMBINED WITH FEEDBACK AND INSTRUCTIONS ON COMPONENTS OF POSITIVE ASSERTIVE BEHAVIOR

BY

TIMOTHY PAUL FOLLICK

B. S., University of Evansville, 1976

ABSTRACT OF A THESIS

Submitted in partial fulfillment of the requirements for the degree of Master of Arts in Psychology at the Graduate School of Eastern Illinois University

CHARLESTON, ILLINOIS
1977

Assertive training is a treatment technique which has been deveveloped for those individuals who are generally unable to stand up for their rights or express their feelings towards others. The truely assertive individual should be equally adept at the expression of positive feelings as negative ones.

In basic assertive training, behavior rehearsal or behavior rehearsal combined with instructions and feedback are frequently used to shape assertive responding. These two treatment components have been widely researched and judged to significantly contribute to the acquisiton of negative assertion. However, there has been little research done with respect to their effect upon positive assertive responding. This study evaluated behavior rehearsal versus behavior rehearsal combined with feedback and instructions with regard to their effect upon verbal and nonverbal components of positive assertive behavior.

The independent variables were behavior rehearsal alone and behavior rehearsal combined with feedback and instructions. The dependent variables were percent of eye contact, duration of reply, self reported SUDS level and overall assertiveness.

A combined single subject design was used with a treatment pattern of A'-B'-BC'-B''-A''-B'''-BC''. Six subjects role played interpersonal situations. The first

phase, baseline (A'), subjects role played without any intervention. The second phase, behavior rehearsal (B'), subjects practiced role playing interpersonal scenes. The third phase, behavior rehearsal combined with feedback and instructions (BC'), subjects role played interpersonal scenes and were also given performance feedback and instructions. Subsequent scenes of B'', A'', B''', and BC'' were all employed in the same manner. Subject performance was videotaped throughout these phases and rated according to the dependent variables.

Results indicated an overall increase for three of the four rated behaviors. Specific variables that caused the change was not clear. Implications for future research were discussed.

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I would like to express my sincerest appreciation to Dr. William M. Hillner for his guidance and many hours of invaluable assistance throughout this research project. I would also like to thank Cristie Matthei for her dependable and skillful help as my research assistant. Further, I wish to thank Drs. F. Hustmyer and C. Ladd for their assistance and consideration of this manuscript as members of my committee. This manuscript is dedicated to my wife Peg for it was her love, support, and encouragement which made this paper a reality.

T.P.F.

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CHAPTER I

REVIEW OF THE LITERATURE

Introduction

This study investigated the effects of behavior rehearsal versus behavior rehearsal combined with immediate feedback and instructions on the ability of subjects to express positive feelings. Chapter I will review the research on the two independent variables investigated in the study: behavior rehearsal and behavior rehearsal combined with feedback and instructions. Their effect on positive as well as negative assertion will be examined, and a brief overall review of the assertive training literature will also be given.

Overview of Assertive Training Literature

Wolpe defines assertive behavior as the proper expression of any emotion (positive or negative) other than anxiety towards another person. Assertive behavior is defined by Lange and Jakubowski as behavior which involves standing up for personal rights and expressing thoughts, feelings, and beliefs in direct, honest, and appropriate ways which do not violate another persons rights.

The present study will use the definition proposed by
Lange and Jakubowski. In addition a clear distinction is
made between negative and positive assertion. Negative
assertion is seen as the honest and straight forward expression
of feelings such as anger, resentment, annoyance, or requests
for new behavior. Postive assertion is seen as the honest
and straight forward expression of feelings such as affection,
praise, or appreciation, and including such behavior as
the ability to introduce oneself to a stranger without
discomfort, and a general ability to ask for what one wants
without undue guilt or anxiety.

Assertive training (Wolpe, 1958, 1969; Wolpe & Lazarus, 1966) has been developed as a treatment technique for those individuals judged to be lacking in assertive behavior. There are a number of techniques which can be employed in the process of assertive training. Among the techniques currently being used are advice, exhortation, specific therapeutic instructions, therapist modeling of appropriate responses, behavior rehearsal, role playing, and covert modeling (Hersen, Eisler, & Miller, 1973).

The effects of negative assertive training and its component techniques have been investigated in a number of research studies. Lazarus (1966) conducted what is felt to be the first formal investigation of assertive training. Three treatment groups were used, behavior rehearsal, direct advice, and client centered therapy. Each respective

technique was employed in four 30 min sessions. Improvement was judged with respect to improvement in the management of specific interpersonal problems. The behavior rehearsal technique was found to be almost twice as effective as either direct advice or client centered therapy. As employed in this study behavior rehearsal is defined as merely practice responding in a role play interpersonal situation. However, Lazarus's definition of behavior rehearsal for his initial study included instructions and therapist modeling.

Rathus (1972) conducted an assertive training group consisting of overt rehearsal in the form of role playing, use of homework assignments, and discussions on the usefulness of assertive responses in specific areas of interpersonal conflict. Compared to this group he used a placebo group consisting of discussion about fears and related problems, and a control group containing no treatment. Women in the assertive training group reported significantly greater gains in negative assertive behavior, reported significantly greater general fear reduction, and tended to report greater reduction of fear of social criticism and fear of social competence than women of the placebo group or control group.

Rathus (1973) investigated the instigation of negative asserrive behavior through videotape-mediated assertive models

and directed practice. Twenty eight college women received a negative assertive training procedure which included observation of videotape mediated assertive models and practicing of nine types of assertive responses over a seven week period. When compared to subjects receiving placebo treatment and women receiving no treatment, women in the assertive training group reported significantly more negative assertive behavior.

Galassi (1974) tested the efficacy of a more complete negative assertive training package. The training procedure consisted of videotape modeling, behavior rehearsal, video, peer, and trainer feedback, bibliotherapy, homework assignments, trainer exhortation, and peer group support. There were two experimental groups and two control groups varying in sype of assessment only. Pre and post measures were done through role played scenes. Significantly better performance was obtained by trained as opposed to control subjects on two self report measures and three of four behavioral indicaters. In a one year followup of the subjects in this study. Galassi (1975) found that experimental and control subjects were still significantly different on two self report measures (College Self-Expression Scale, and the Subjective Unit of Disturbance Scale), and two of the four behavioral measures (assertive content and scene length) of assertiveness.

Assertive training has been reported to be helpful with specific clinical problems: crying spells (Rimm, 1967),

depression (Lazarus & Serber, 1968, Bean, 1970), headaches (Dengrobe, 1968), homosexuality (Stevenson, 1959), marital discord (Fensterheim, 1972), phobias (Rimm, 1973), sex problems (Edwards, 1972; Laws & Serber, 1975), skin eruptions (Seitz, 1953), and even chronic retention of urine (Barnard, et al, 1966).

In summary a number of research studies indicate that negative assertive training, using various combinations of techniques, is helpful in improving negative assertive behavior. In addition it is indicated that assertive training can be helpful in specific clinical problems.

Research and interpretation of results in assertive training has been difficult due to inadequate assessment procedures. Many of the early clincal studies offer only global clinical judgements of improvement in assertiveness, usually using pre and post and sometimes follow-up assessment. (Edwards 1972; Geisenger, 1969; Goldstein et al., 1970; Patterson, 1972; Stevenson and Wolpe, 1960).

In recent years a number of paper and pencil assertiveness scales have been developed. Among these are the Wolpe and Lazarus Assertiveness Questionnaire (Wolpe & Lazarus, 1966), the Rathus Assertiveness Scale (Rathus, 1973), the Conflict Resolution Inventory (McFall and Lillisand, 1971), the Action Situation Inventory (Fiedman, 1971), and the College Self Expression Scale (Galassi et al., 1974). Each of these scales has strong and weak points, the College Self Expression Scale has been reported by Bodner (1975) as "a worthwhile procedure for evaluating assertion skills in a college population".

Another promising approach to assessing assertive behavior has been the development of standardized role playing situations. A number of studies have been conducted in attempts to establish the nonverbal and verbal components of both positive and negative assertive behavior (Serber, 1972; Eisler, Miller, Hersen, & Alford, 1974; Eisler, Hersen & Miller, 1973; McFall & Lillesand, 1971). Using this information researchers have developed roleplay situations in which subjects can be videotaped and judged on the nonverbal and verbal components of assertion (McFall & Marston, 1970; Rathus, 1972, 1973; Eisler, Miller & Hersen, 1973). According to Eisler, Hersen & Miller (1975) assertive responding requires a coordinated delivery of numerous verbal and nonverbal responses and roleplay techniques appear to be the best way of assessing the individual components, and degree of overall assertion. This method of assessment has been used in a number of recent studies including McFall & Twentyman (1973), Kazdin (1974), Hersen et al., (1974), Rimm, Snyder, Depue, & Haastad (1976), Kazdin (1975), and Eisler, Hersen, Miller & Blanchard (1975).

Research has not only indicated that assertive responding involves a coordinated delivery of verbal and nonverbal responses, it has also indicated that assertiveness is not a trait. For any given individual there does not appear to be a stabel predisposition to respond with the same quality of assertiveness in all situations. Addressing this question

Eisler et al. (1975) investigated the situational determinants of assertive behavior. Thirty-two assertive situations that varied in social and interpersonal context were administered to 60 hospitalized psychiatric patients via role playing. The intention was to examine systematically the effects of social context on interpersonal behavior in assertive situations. In the first social context the effects of responding assertively to a male was contrasted with assertive responding to a female. The second area of social context was varied depending on whether or not the subject was familiar with the interpersonal partner. In general, the results supported a stimulus specific theory of assertiveness. This indicating that an individual who is assertive in one interpersonal context may not be assertive in a different interpersonal environment. They further found that "some individuals may have no difficultly responding with negative assertions, but may be unable to respond when the situation requires positive expression". The authors went on to say that the results seemed to further indicate that it is not likely that therapists can train clients to be "more assertive" in a general sense. Instead they feal that clinicians should identify classes of interpersonal situations in which deficits can be identified. Training will then consist of increasing assertive responding to specific types of interactions with different individuals.

In summary, a number of techniques can be employed in

A total treatment package known as assertive training.

Numerous studies have been conducted which demonstrate the effectiveness of combined techniques in helping negative assertion problems, and that such changes can help in the treatment of specific clinical problems. Assessment has been a difficult problem in assertion research. Paper and pencil tests have helped, but only on a more global evaluation of assertiveness. Recent studies (Eisler et al., 1975; Hersen et al., 1973) have used role play techniques in which subjects act out interpersonal situations, these role played situations are videotaped and judged on content of verbal and nonverbal components of assertiveness. It has been shown that individuals who are assertive in one situation may not be in another, and individuals able to express negative feelings may not be able to express positive emotion.

Treatment Effects of Behavior Rehearsal

Initialy Lazarus (1955) suggested that the term behavior rehearsal be used to refer to the use of role playing techniques in behavior therapy. As used in this study behavior rehearsal is defined as simply the practicing of interpersonal responses in a role play situation. Over the years the behavior rehearsal treatment procedure, as frequently described, became complex, unsystematic, and unstandardardized. McFall and Marston (1970) in an experimental investigation of behavior rehearsal in negative assertive training made the first attempt to standardize

the behavior rehearsal treatment procedure. They defined behavior rehearsal, as does this study, as simply the practicing of interpersonal responses in a role play situation. Feedback as well as other variables are seen as seperate treatment procedures. In their study they attempted to evaluate if simple rehearsal, alone, was sufficient to produce significant and desired changes in the problem behavior, and what the therapeutic importance of feedback was. Two assertive training groups were used, one with rehearsal only and one with rehearsal and feedback combined. These were compared to two control groups, one containing a placebo insight therapy, and one containing no treatment. behavior rehearsal procedure was semiautomated and standardized. Nonassertive S's practiced making overt negative assertive responses to tape recorded stimulus situations which were selected to represent common interpersonal encounters requiring negative assertive behavior. The S's responses were tape recorded. To test the effects of feedback, some S's listened to replays of their responses; others merely reflected on how they might improve their responses in succeeding practice trials. Pre and Post assessment was done through the use of a role-playing test in which S;s were presented with tape recorded stimulus situations. Also used in assessment were self report measures and a physiological measure of pulse rate. In addition, a follow up measure was taken. Two weeks following the posttreatment assessment

session. S's were telephoned by an experimenter posing as a magazine salesman. They were given the "opportunity" to obtain their "choice of three nationally acclaimed magazines free for the rest of the school year" when they subscribed to two other magazines offered at "special college prices". The experimenter-salesman took a "hard sell" approach. only terminating the call after S agreed to buy, after 5 min had elapsed without a "sale", after he had exhausted all sales gimmicks without success. or after S hung up on him. The results of the study found that both the behavior rehearsal and behavior rehearsal combined with feedback groups generally showed significantly more change in negative assertion than the control groups. They also found that the automated feedback procedure failed to enhance the fundamental treatment effects to a significant degree. The telephone follow up assessed the extent to which gains achieved in the laboratory would transfer to "real life" behavior; the results suggest that such transfer did occur.

Similar results were found by McFall and Twentyman (1973). They compared six treatment conditions, (a) rehearsal, modeling, and coaching; (b) rehearsal and modeling (c) rehearsal and coaching (d) rehearsal only; (e) modeling and coaching; and (f) assessment control. The results indicated that the effects of rehearsal and coaching components were independent and additive. Both the McFall and Marston (1970) and the McFall and Twentyman (1973) studies seem to suggest

that behavior rehearsal alone will result in improvement in negative assertion.

A second group of researchers (Eisler et al., 1973; Eisler et al., 1973; Eisler et al., 1974; Hersen et al., 1973; Hersen et al., 1973; Rimm et al., 1976) has also been involved in isolating the specific techniques contributing to improvements in negative assertive responding. These researchers results conflict with those of the McFall studies with regard to behavior rehearsal. Eisler (1973) conducted a study of the effects of modeling on components of negative assertive behavior. There were three treatment conditions employed, modeling, practice control, and test-retest control. Subjects in the modeling condition observed videotaped models responding assertively in a role play situation. subjects in the practice role play scenes to rehearse while being offered no feedback on how to improve their responding. Pre and post assessment was done by having the subject role play a standard set of interpersonal situations that were designed by the authors, known as the behavioral assertiveness test. These responses were videotaped and rated on component behaviors that had been established previously (Eisler et al., 1973). Results indicated that patients who merely practiced their own behavioral repetoires, did not improve in negative assertion.

Hersen (1973) confirmed these previous findings in a study investigating the effects of practice, instructions,

and modeling on components of negative assertive behavior.

Using the same design and assessment as Eisler in the previous study mentioned, it was found that mere practice in the absence of additional techniques (modeling, instructions etc.) did not lead to behavioral change on either the verbal or nonverbal components of negative assertion.

Two later studies have also indicated similar results with regard to behavior rehearsal. Hersen (1974) in an experimental investigation of generalization in negative assertive training found that the practice control group in itself did not effect behavioral change. In an investigation of a total assertive training program versus rehearsal, Rimm (et al., 1976) also found that those receiving practice alone showed essentially no change in negative assertion.

The earlier McFall (1970, 1973) studies seem to be in contrast to what later studies indicate about behavior rehearsal. Eisler (1973), suggests a reason for the McFall and Marston results. Eisler contends that because the subjects received specific instructions to improve their responses by focusing on their responses of affect etc. prior to behavior rehearsal, that the treatment condition did not represent practice only. In regard to the McFall and Twentyman(1973) findings Rimm (1976) suggests:

The test situations used by McFall and Twentyman involved refusing unreasonable requests. While many people have considerable difficulty in such situations (and it is by no means a trivial problem), it may be that such difficulty reflects a learned

inhibition of behaviors already part of the subjects response repertoire. For example, it might indeed be difficult for a person to refuse to lend his car to a particular acquaintance who regularly takes advantage of him, but not because our pigeon is unfamiliar with the statement; "no. I need it myself" (or simply "no"). Rather it would seem, he knows what to say, but is for some reason apprehensive about the consequences, and therefore gives in. Mere practice might indeed facilitate assertiveness by extinguishing such inhibition or apprehension. In the present investigation. effective behavior in the test situation involved a good deal more than simple refusal, requiring, we assume, the acquisition of relatively novel verbal behavior. Thus, the disinhibiting effects of practice alone might not have been sufficient to enhance assertive responding; other components of the assertive treatment package were necessary. (p.319)

Assertive responding, both negative and positive, requires a coordinated delivery of numerous verbal and non-verbal responses. If improvement in simple target behaviors such as refusal are the goal, then it appears that behavior rehearsal alone can result in acquisition or increase in such behavior. However, when dealing with deficits in complex novel negative assertive responses that person must be taught a new way of responding as appropriate responses are simply unavailable in his current repertoire. Additional techniques must be used to achieve the acquisition of new responses.

Because positive assertive responding involves coordinated delivery of verbal and nonverbal responses similar to negative assertion, it is felt that behavior rehearsal should have similar effects upon its acquisition.

Currently there is no research data on behavior rehearsal and its effect upon positive assertion.

In summary, initial studies by McFall and Marston, and McFall and Twentyman found that rehearsal alone would bring about improvement in negative assertive responding. More recently, research has indicated that rehearsal brings about no change when more complex components of negative assertion are measured. This seems to indicate that behavior rehearsal is a valuable treatment component, but must be combined with other procedures to be maximally effective with respect to negative assertion. It is felt that behavior rehearsal should have similar results upon the acquisition of positive assertion, but this has yet to be evaluat

Treatment Effects of Feedback and Instructions

It has been shown that feedback and instructions and the way that they are presented have a significant effect upon the acquisition of a variety of behaviors (0°connel, 1974. Callison, 1974).

Feedback, as used in previous studies on assertion training, has been offered in two basic ways. Feedback only can be presented through the use of a tape recorder or videotape machine. The patients role played response is recorded and then palyed back to them. In the second method, feedback is combined with instructions, and is usually given

by the therapis after the role play scene has been completed.

McFall and Marston (1970) used the tape recorded responses to role play scenes as feedback. The results indicated that the audio feedback condition was helpful, but failed to enhance the treatment effects of rehearsal to a significant degree.

Hersen (et al., 1973) used the feedback combined with instructions method in an investigation of the effects of practice, instructions, and modeling on negative assertion. Five treatment groups were assessed (1) test-retest control (2)practice-control (3) instructions (4) modeling (5) modeling plus instructions. Each group, excluding test-retest. rehearsed five scenes from the Behavioral Assertiveness Test. six times over a three day period. Each treatment variable was added to its respective group. Pre and post assessment was also done through the use of the Behavioral Assertiveness Test, as well as the Wolpe-Lazarus assertiveness questionare. It was found that instructions alone brought about a positive change in various components of negative assertion. value of the instructions was also evidenced in the fact that modeling alone was equal to instructions alone, but in the combining both modeling and instructions the change was significantly higher.

In the only single case design research study found in the assertive training literature Eisler, Hersen, and Miller

(1974) assessed the effectiveness of shaping components of assertive behavior with instructions and feedback. Expressive deficiencies in various verbal and nonverbal components of negative assertion were identified by means of the Behavioral Assertiveness Test. Using a single-subject multiple baseline design, treatment involved taking a number of baseline measures, after each measure the S would role play a set of interpersonal situations that were unrelated to their real life problem. During each set of rehearsals the therapist would call attention to one of the previously established expressive deficiencies. During any one base line period only one behavior was called attention to, for example eye contact, and after each scene the patient was given feedback on how they did. If the feedback and instructions were effecting the various components, at every base line measure only those components that had been "treated" would show improvement. Results showed a direct improvement of each component after subject had been given instructions and feedback about that deficiency. Also pre and post rating of target behaviors as well as overall ratings of negative assertiveness showed significant improvement make in all previously deficient areas. Results of a nine month followup showed that treatment effects were still evident.

Research indicates that feedback and instructions can bring about a significant improvement in negative assertion if they focus on the various components that make up a

coordinated assertive response. When the instructions and feedback focus on more general behaviors such as overall assertiveness, the improvement appears to be much less significant.

It seems logical that feedback and instructions would have a similar effect upon positive assertion. Considering that expression of positive emotion and feelings may somehow be more "socialy acceptable", it is conceivable that a basic technique such as feedback and instructions could have a more dramatic and rapid effect upon positive assertion than negative. However, there has been no research to date investigating the effects of feedback and instructions upon positive assertion.

In summary, feedback and instructions combined with behavior rehearsal, as well as other techniques, has been found to bring about significant change in components of negative assertion. This treatment technique appears to be a valuable procedure for teaching individuals new ways of responding. It is felt that similar significant results could result with regard to positive assertion, but this has yet to be researched.

Summary

Using a number of techniques in various combinations, assertive training has been shown to be an effective method in helping to improve the expression of negative feelings.

Currently assessment of assertiveness is done through

the use of paper and pencil assertiveness tests and through rating of subjects who have been videotaped role playing various interpersonal situations. Studies indicate that assertiveness is situation specific and that ability to express negative feelings does not automatically indicate ability to express positive feelings. Research on the effects of behavior rehearsal seems to indicate that without the presence of additional techniques (modeling, instructions etc.) the expression of complex negative feelings will now improve. Research also indicate that feedback and instructions are effective in shaping various verbal and nonverbal components of negative assertion. It has therefore been established that feedback and instructions combined with behavior rehearsal is an effective way of helping individuals overcome response deficits, and learn new ways of responding in situations calling for negative assertion. Consequently it is felt that feedback and instructions combined with behavior rehearsal may have similar effects upon positive assertive behavior. However, neither behavior rehearsal alone or combined with feedback and instructions have been investigated as to their effects upon components of postive assertion.

Experiment

Rationale

Assertive training is a treatment technique which has been developed for those individuals who are generally

unable to stand up for their rights or express their feelings towards others. The truely assertive individual should be equally adept at the expression of positive feelings as negative ones.

In basic assertive training, behavior rehearsal or behavior rehearsal combined with instructions and feedback are frequently used to shape assertive responding. These two treatment components have been widely researched and judged to significantly contribute to the acquisition of negative assertion. However, there has been little research done with respect to their effect upon positive assertive responding. This study will evaluate behavior rehearsal versus behavior rehearsal combined with feedback and insturctions with regard to their effect upon verbal and nonverbal components of positive assertive behavior.

Significance of the Study

A number of therapeutic techniques have been experimentally validated for their use in improving negative assertive responding. Despite the large amount of data on assertive training, little has been done towards validating the most efficient and economical technique for improving positive assertion. McFall and Marston (1970) have suggested that the most effective way of establishing a therapeutic program is the constructive approach. Their suggestion is to start by isolating the most fundamental, or theoretically significant, treatment component, and assess its effects on behavior.

Then, building on this base, new treatment components are systematically added to determine whether they significantly enhance the fundamental treatment effects: only the effective components are retained.

Behavior rehearsal or behavior rehearsal combined with feedback and instructions are seen as possible fundamental treatment components in positive assertive training. It therefore must be understood that in this investigation these treatment components are not being represented as fully developed clinical techniques designed to bring about complete and lasting changes in asseritve behavior. Rather, after their basic effectiveness in changing positive assertive behavior has been determined, additional treatment components can be added and assessed for their impact on the effectiveness of the fundamental treatment components. The eventual result being a complete treatment package that has been experimentally validated.

Definition of Terms

For the purpose of this study, the terms listed below are defined as follows:

Negative Assertion. The honest and straightforward expression of feelings such as anger, resentment, or annoyance, especially when ones rights have been violated, without feelings of guilt or anxiety.

Negative Assertion (Operational Definition). A score of 95 or better as measured by the appropriate items on the

College Self Expression Scale.

Positive Assertion. The expression of feelings such as affection, praise, or appreciation, including such behaviors as introducing oneself to a stranger, or asking someone out for a date.

Positive Assertion (Operational Definition). A score of 28 or better as measured by appropriate items on the College Self Expression Scale, and adequate scores on each component of the Behavioral Assertiveness Test.

<u>Behavior Rehearsal</u>. Simply role playing or practicing specific interpersonal responses.

Feedback and Instructions. Upon the completion of a role played situation, feedback and instructions involve the presentation of specific information regarding quality of the response, including what deficiencies that exist and how to correct them.

Hypotheses

- H₁ Phase B' (Behavior Rehearsal Alone): Subjects will show little or no improvement in the four rating catagories (percent of eye contact, duration of reply, SUDS level, and overall positive assertiveness) when given behavior rehearsal alone.
- H₂ Phase BC' (Behavior Rehearsal Combined With Feedback):
 Subjects will show a marked improvement in all four rating catagories when given behavior rehearsal combined with feedback and instructions as compared

to behavior rehearsal alone.

- H₃ Phase B'' (Feedback Discontinued, Behavior Rehearsal Alone): Subjects will show no change in any of the 4 rating catagories when given behavior rehearsal alone as opposed to behavior rehearsal combined with feedback and instructions.
- H₄ Phase A'' (Second Baseline): Subjects rated behaviors will return to levels evidenced in previous baseline when all treatment is withdrawn.
- H₅ Phase B''' (Behavior Rehearsal Alone): Subjects will again show no change in any of the four rating catagories when given behavior rehearsal alone as opposed to behavior rehearsal combined with feedback and instructions.
- H₆ Phase BC'' (Behavior Rehearsal Combined With Feedback):
 Subjects will again show a marked imporvement in all
 four rating catagories when given behavior rehearsal
 combined with feedback and instructions as compared
 to behavior rehearsal alone.
- H₇ Subjects will show a marked increase in the subtest scores measuring positive assertion on the College Self Expression Scale as opposed to the scores evidenced in the pre test.
- H₈ Subjects will show no increase in the subtest scores measuring negative assertion on the College Self Expression Scale as opposed to the scores evidenced in the pre test.

CHAPTER II METHOD

<u>Introduction</u>

The independent variables employed in this study are behavior rehearsal, and behavior rehearsal combined with instructions and feedback. The dependent variables are duration of reply, percent of eye contact, self reported Systematic Units of Discomfort, and overall assertiveness as measured by the Behavioral Assertiveness Test. An additional dependent variable was positive assertion as measured by a combined score on the College Self Expression Scale.

Subjects

200 students enrolled in undergraduate psychology classes were presented with the opportunity to participate in research concerning how to improve ones effective communication skills. 54 students volunteered and were subsequently given the College Self Expression Scale. Subjects were selected for the study based on a score of 27 or less on the subtest of the CSES dealing with positive

assertion. Scores on the CSES were also used as a pre test for both negative and postive assertion.

There were 2 male and 4 female college students who met the criterion and served as subjects. All were Caucasian, and ranged in age from 19 to 23.

The experimenter who also acted as therapist was a white 23 year old male graduate student in clinical psychology. A female assistant was also used to roleplay the female parts in the interpersonal scenes. She was a 19 year old undergraduate student in psychology.

<u>Apparatus</u>

College Self Expression Scale

The CSES is a quickly administered 20-25 minute self report inventory which is designed to measure assertiveness in college students. In its present form the CSES contains 50 items to which the subject must respond with an answer of always, usually, sometimes, seldom, or rarely. The scale attempts to measure three aspects of assertiveness: positive, negative, and self denial in a variety of interpersonal contexts: family, strangers, buisness relations, authority figures, and like and oppositie sex peers.

The CSES was developed by Galassi et al., (1974) to serve as a standardized instrument to serve diagnostic purposes and measure change. Normative data was collected on upper division and first year graduate students, college students and elementary and secondary school student teachers.

The test retest reliability coefficients range from .89 to .90. Construct validity was obtained by correlating the CSES with the 24 scales of the Adjective Check List (Gough & Hielbrun, 1965). Positive correlations were obtained on those scales which the authors suggest as personality attributes of assertiveness (number checked, Heterosexuality, Exhibitionism, Defensiveness, Favorable, Self-Confidence, Achievement, Dominanace, Intraception, Autonomy and Change). Negative correlations were also obtained on scales which would describe an individual with a behavioral deficit in assertiveness.

According to Bodner (1975) the preliminary investigation of the CSES does establish it as a worthwhile procedure for evaluating assertion skills in a college population.

Behavioral Assertiveness Test

The BAT was designed (Eisler et al., 1973) to simulate real life situations. The test involves having a subject role play a specific interpersonal scene, this is videotaped and later judged for the various verbal and nonverbal components of assertion.

In its original design Eisler et al., (1973) used the BAT to measure negative assertion. It was developed under the assumption that assertiveness is a complex construct involving many component behaviors. In their original design subjects responses to experimenter prompts were vidio taped and subsequently rated on nine behavioral components of

Subjects were then divided into high and low assertiveness. assertive groups on the basis of judgements of over all negative asseritveness. It was found that 5 of the 9 behavioral components of negative assertiveness seperated highly assertive subjects from low assertive subjects. Using these components Eisler et al. (1975) attempted to extend the previous findings by adding additional situations that typically elicit positive asseritve responses. Using the BAT containing 32 interpersonal situations, 16 positive and 16 negative, they judged each subject on 5 measures of speech content, compliance, request for new behavior, praise, appreciation, and spontaneous positive behavior, and seven measures of nonverbal behavior, duration of eye contact, smiles, duration of reply, latency of response, loudness of speech, appropriate affect, and ratio of speech disturbances. Subjects were then seperated into high and low assertive groups on the basis of a global measure of assertiveness. Results showed significant differences between groups on everything except speech duration and latency of response. For the five measures of speech content, number of speech disturbances, and frequency of smiles, interjudge agreement was over 95% across all situations and contexts. For the remaining continuous measures correlation coefficients were all greater than .94.

Other Equipment

Videotaping was done with the use of a Sony Cassette

Video tape machine.

Procedure

A combined single case experimental design, described by Hersen and Barlow (1976), was used. All 6 subjects went through the same procedure. The pattern of treatment in the single case design was A'-B'-BC'-B''-A''-B'''-BC''.

A was the base line phase, B was the treatment condition containing only behavior rehearsal, and BC was the treatment condition containing instructions and immediate feedback combined with behavior rehearsal. There were two treatment sessions employed, the first containing phases A',B',BC', and B'' and the second session contained phases A'',B''',BC''.

Time between the first and second session was from 2 to 5 days.

At the beginning of the first session the subject was given and asked to sign a form which explained purposes, intentions, possible benefits, and possible negative consequences of the treatment procedures employed. (see appendix A) Following this the subject was given a set of instructions as follows:

During the next 2 treatment sessions you will be asked to role play various types of situations which require the expression of positive feelings. The idea is for you to respond just as if you were in that situation at home, at school, or in a store. We will describe various situations that you might find yourself in with a girlfriend, your boss, or some other person such as a waitress. When each situation is described to you, try and imagine that you really are there. In order

to make these situations seem more real to life. Miss Matthei will play the part of your girlfriend or another woman who may be in the scene. I will play the part of your boss or another man who may be in the scene. For example, after I have described a situation. Miss Matthei will say something to you. After she speaks, I want you to say what you would say if she had said this to you in the situation that was described. Following some of the scenes we will ask you to give us what we call a SUDS level. simply a report of how uncomfortable or anxious you are on a scale from 0 to 100. O is completely relaxed. no discomfort at all. 100 is extremely uncomfortable. Periodically throughout the sessions we will be videotaping some of the scenes, during this time just relax and you will soon forget all about the camera.

After this statement the experimenter narrated a sample role play scene. "You have just arrived home after a long and hot bike ride on a very hot day. Your girlfriend is sitting by your door with a big pitcher of ice cold lemonade." Your girlfriend says: "I knew you would be hot I thought you'd enjoy something cold to drink." After the subjects response the experimenter then said, "Be sure and express yourself as fully as possible, try to express your true feelings whatever they might be."

When the subject seemed to understand the instructions and gave an appropriate response to the practice scene, the treatment phases were begun.

A set of 20 interpersonal scenes were used across all treatment sessions with each subject. The scenes covered a wide area of positive interpersonal situations. Although modeled after scenes used by Eisler et al., (1975), these scenes were developed for this study by the author.

(see appendix B)

Baseline Phases (A)

- (A) From the 20 scenes that were each on individual 3 by 5 file cards the subject picked 5. Each scene was role played only once, and all were videotaped.
- (A'') From the 20 scenes the subject picked 8. Each scene was role played only once, and all were video-taped.

Behavior Rehearsal Phases (B',B'',B''')

From the 20 scenes the subject picked 5. Each scene was role played twice. The first attempt at each scene was videotaped, the second was not. Throughout the baseline and behavior rehearsal phases the experimenter and assistant responded in a neutral, matter-of-fact manner to prevent performance feedback.

Behavior Rehearsal Combined With Feedback and Instructions Phases (BC)

- (BC') From the 20 scenes the subject picked 3. The first attempt at each scene was videotaped, the second was not.
- (BC¹) From the 20 scenes the subject picked 5. The first attempt at each scene was videotaped, the second was not.

After each scene in this phase the experimenter would give praise or reinforcement for any improvement. Following this and contingent upon a deficit in the area the following instructions were given:

Duration: "You need to respond longer", "You also need to relate what specific things you like in that situation".

Eye contact: "You need to look more directly at the person you speaking to".

"I" language and feeling: "Try starting your sentences with "I" and indicate how you feel".

Systematic Units of Discomfort

For every scene that was videotaped a SUDS level was requested from the subject. The SUDS rating consisted of reporting discomfort or anxiety on a scale from 0 to 100, with 0 being very comfortable, and 100 very uncomfortable.

Post Test

At the end of the treatment sequence the subject was again given the College Self Expression Scale as a post test measure of both positive and negative assertion.

Results

Designated assessment scenes were videotaped and later played for two judges. Behaviors recorded and the scoring procedures which were adapted in part from Eisler et al., (1975) are as follows: (a) Duration of eye contact: Length of time that a subject looked at his interpersonal partner from the begining to termination of response (in sec) was recorded for each scene, and then converted to a percent of eye contact. (b) Duration of reply: Length of time (in sec) that the subject spoke to his partner was recorded for each scene. Speech pauses of greater than 3 sec terminated timing

until the subject began speaking again. (c) Overall assertiveness: Taking into consideration nonverbal behavior
such as eye contact and affect, and verbal behavior such
as speech disturbances, smiles, response latency, and
content, an overall rating of assertiveness was given.
A 7 point scale was used for this rating, with 1 indicating
"very unassertive" and a 7 indicating "very assertive".

Judging of components was done by one judge, a 19 year old undergraduate major in psychology, on all behavioral measures across all assessment scenes while the second judge, the experimenter, rated all behavioral measures for 6 scenes picked randomly for each session. This procedure was done to conserve as much time as possible yet still achieve an adequate interjudge reliability check. Interjudge agreement was computed by dividing the total number of agreements by the total number of judgements (agreements plus disagreements) for each context.

Training of the judges consisted of familiarizing them with the definition of positive assertion used in this study, as well as the components to be measured. They were given a 2 hour practice session using unrelated videotaped scenes to achieve adequate interjudge reliability before actual judging.

Positive assertion was also measured by a combined score of items 7,10,14,18,20,22,25,31,33,36,37,44,49 on the College Self Expression Scale.

CHAPTER III RESULTS

Reliability

Judging of behaviors (eye contact, duration of reply, and overall positive assertiveness) was done by one judge on all behavioral measures across all assessment acenes while the second rated all behavioral measures for 6 scenes picked randomly for each session. Interjudge agreement was computed by dividing the total number of agreements by the total number of judgements (agreements plus disagreements) for each context. The mean percent of agreements between observers were all above the criterion of 80% and were as follows: percent of eye contact 83%, duration of reply 93%, and overall positive assertiveness 95%.

Treatment Phases

Phase A' (Baseline)

With the exception of eye contact for subject 1, and overall assertion for subject 3, all subjects evidenced consistently low scores on the four rated behaviors. (percent of eye contact, duration of reply, SUDS level, and overall

positive assertiveness)

Phase B' (Behavior Rehearsal Alone)

Hypothesis: Subjects will show little or no improvement in the four rated behaviors when given behavior rehearsal alone.

The hypothesis was supported by all subjects for three behaviors, eye contact, duration of reply, and overall assertiveness. For the fourth behavior, SUDS, the hypothesis was supported by three of the six subjects. (see figures 1-6)

When subject performance was combined, the resulting means supported the hypothesis for all four variables.

(see figure 7)

Phase BC! (Behavior Rehearsal Combined With Feedback)

Hypothesis: Subjects will show marked improvement in all four rated behaviors when given behavior rehearsal combined with feedback and instructions as compared to behavior rehearsal alone.

Subject 6 confirmed the hypothesis for all four behaviors, subjects 3,4, and 5 confirmed the hypothesis for three of the four behaviors, subject 2 confirmed two of the behaviors, and subject 1 did not confirm the hypothesis for any of the four rated behaviors.

Mean subject performance confirmed the hypothesis for all four rated behaviors except SUDS level which remained constant.

Phase B'' (Behavior Rehearsal Alone)

Hypothesis: Subjects will show no change in any of the four rated behaviors when given behavior rehearsal alone as opposed to behavior rehearsal combined with feedback and instructions.

Subjects 1 and 4 confirmed the hypothesis for all four behaviors, subjects 2.3, and 6 confirmed the hypothesis for three of the four behaviors, and subject 5 confirmed the hypothesis for two of the four rated behaviors.

When subject performance was combined, the resulting means supported the hypothesis for all behaviors.

Phase A'' (Second Baseline)

Hypothesis: Subjects rated behaviors will return to levels evidenced in previous baseline when all treatment is withdrawn.

Subjects 1 and 4 confirmed the hypothesis for all of the four rated behaviors, subject 6 confirmed the hypothesis for three of the four behaviors, 3 supported it for two of the four behaviors, subject 2 for one, and subject 5 supported the hypothesis for none of the four behaviors.

When subject performance was combined the resulting means did not support the hypothesis for any of the four behaviors.

Phase B''' (Behavior Rehearsal Alone)

Hypothesis: Subjects will again show no change in any of the four rated behaviors when given behavior

rehearsal alone as opposed to behavior rehearsal combined with feedback and instructions.

Subjects 1,4, and 6 confirmed the hypothesis for all four rated behaviors, subjects 2 and 5 confirmed the hypothesis for three of the four behaviors, and subject 3 confirmed the hypothesis for only one of the four rated behaviors.

When subject performance was combined the resulting means confirmed the hypothesis for all of the four rated behaviors except eye contact which evidenced a slight decrease.

Phase BC' (Behavior Rehearsal Combined With Feedback)

Hypothesis: Subjects will again show a marked improvement in all four rated behaviors when given behavior rehearsal combined with feedback and instructions as compared to behavior rehearsal alone.

Subjects 2,5, and 6 confirmed the hypothesis for three of the four behaviors, and subjects 1,3, and 4 confirmed the hypothesis for two of the four rated behaviors.

When subject performance was combined the resulting means confirmed the hypothesis for eye contact and overall positive assertion, but did not for SUDS level and duration of reply.

Pre and Post Test (College Self Expression Scale)

Positive Assertion

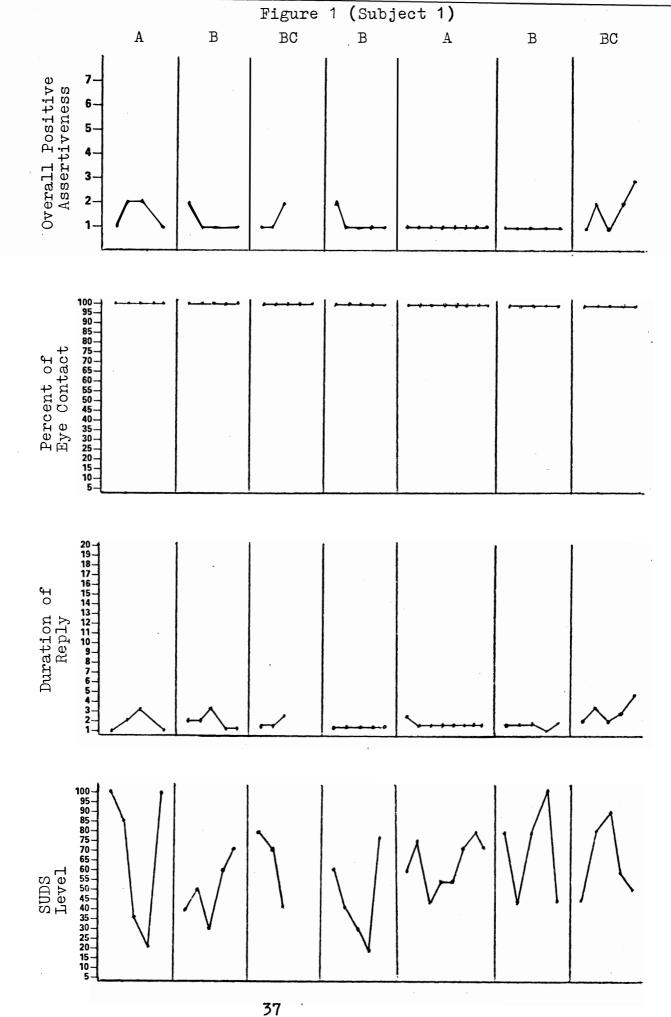
Hypothesis: Subjects will show a significant increase in the subtest scores measuring positive assertion as opposed to the scores evidenced in the pre test.

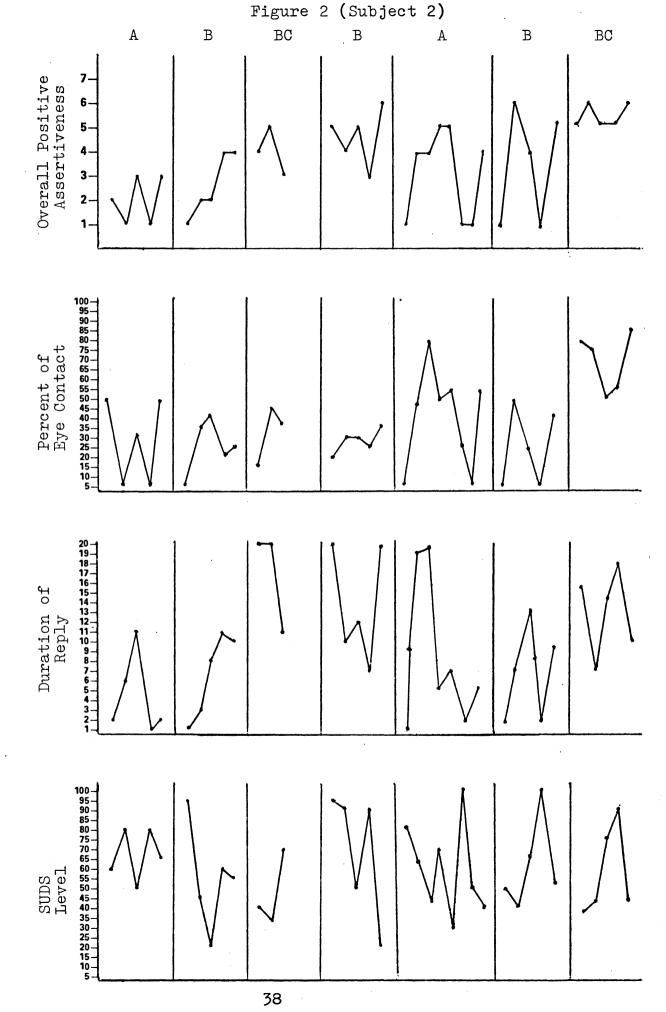
Results of the t test analysis of pre and post test scores show no significant difference in scores.

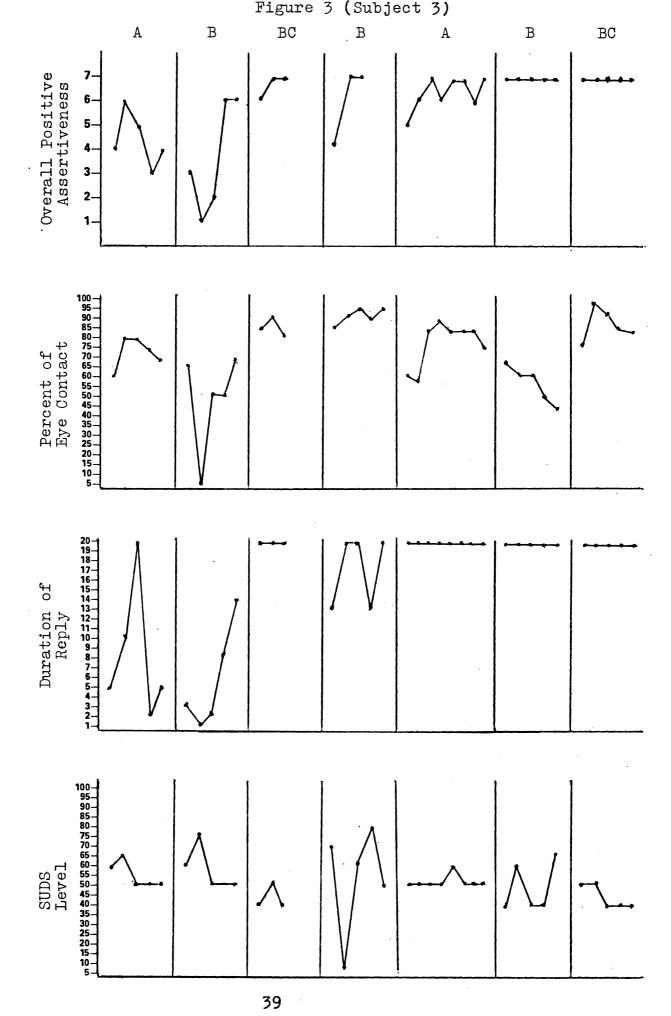
Negative Assertion

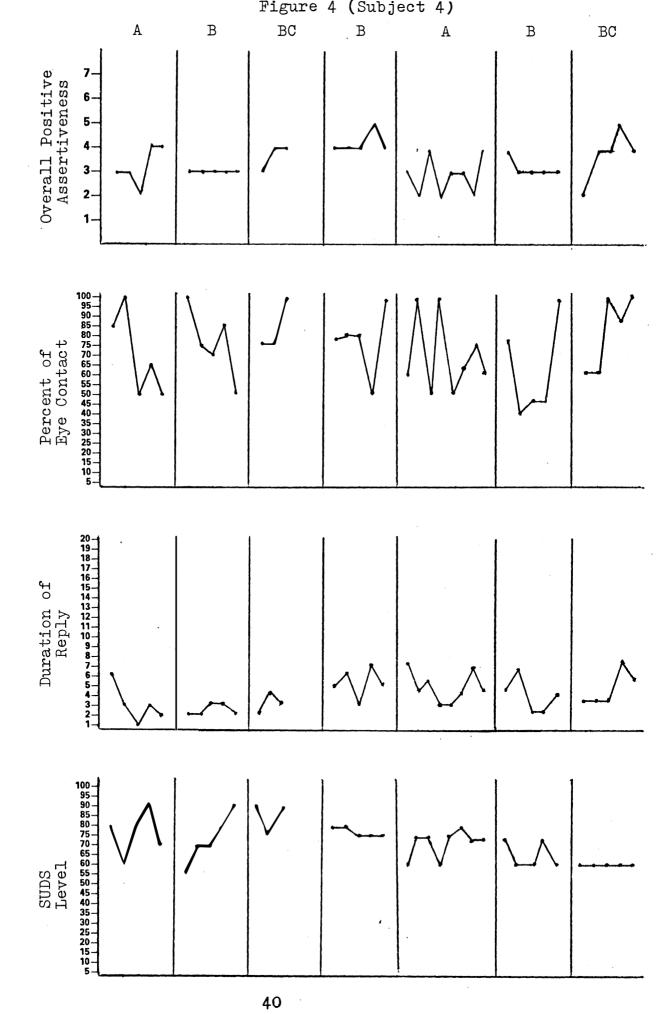
Hypothesis: Subjects will show a significant increase in the subtest scores measuring negative assertion as opposed to the scores evidenced in the pre test.

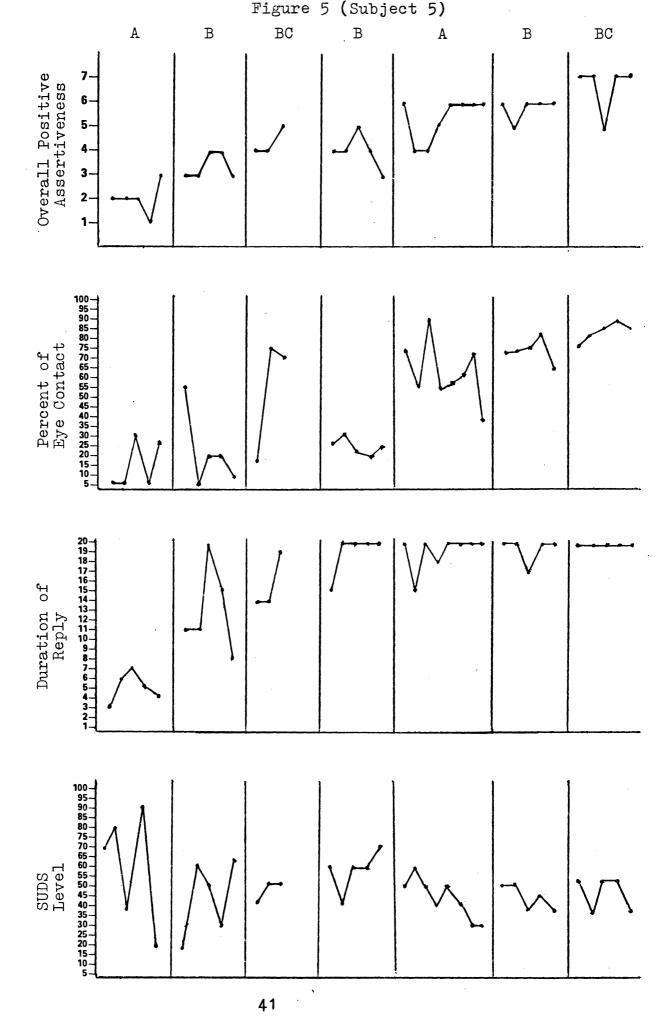
Results of the t test analysis of pre and post test scores show no significant difference in scores.

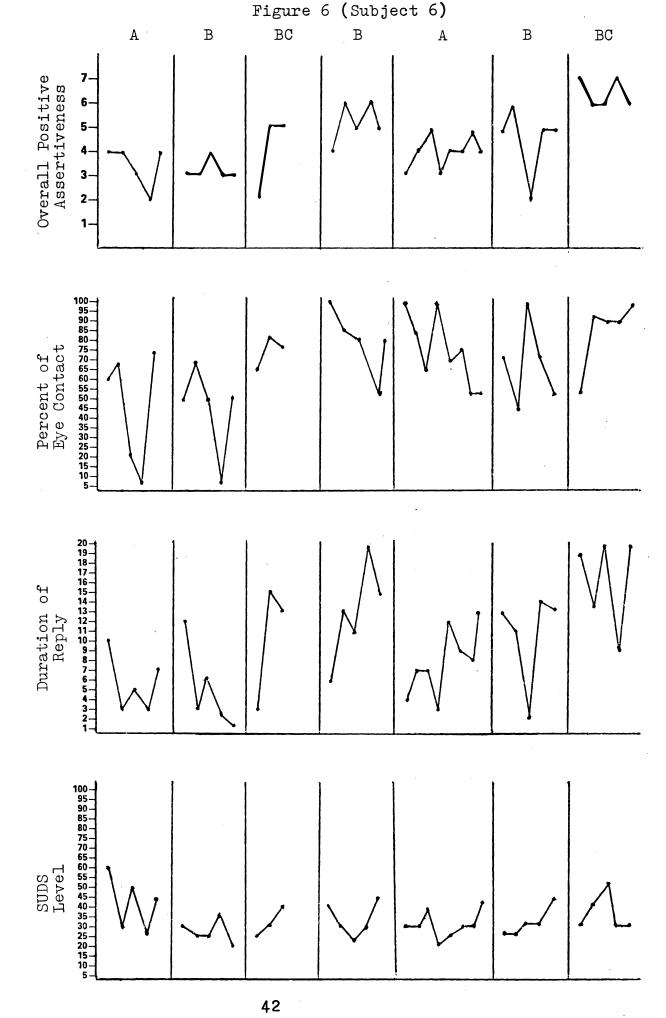












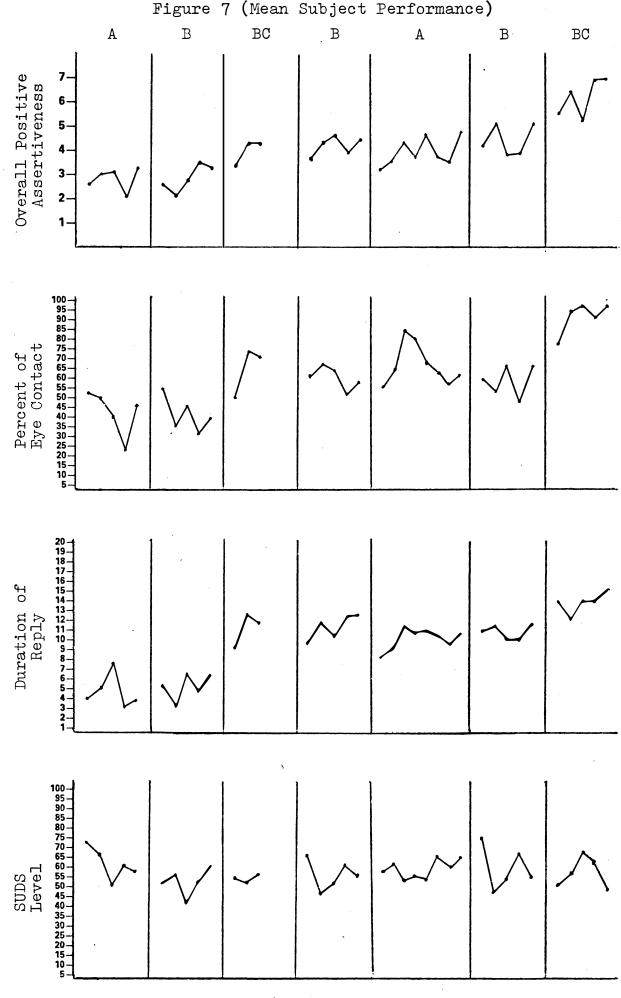


Table 1
College Self Expression Scale

| | Pre Test | Post Test | df | t | р |
|----------------------------------|----------|-----------|------|----------------|----|
| Negative Assertion Subtest | 60 | 70.33 | 10 ′ | 9112 | ns |
| Positive Assertion Subtest | 24 | 27.66 | 10 | -1 .343 | ns |

CHAPTER IV

This study hypothesized that behavior rehearsal in the absence of feedback would result in no improvement of four rated behaviors (percent of eye contact, duration of reply, SUDS level, and overall positive assertion). The results appear to support this hypothesis for three out of the four rated behaviors.

Behavior rehearsal alone does not appear to result in an increase in positive assertive behavior. For the three variables percent of eye contact, duration of reply, and overall positive assertiveness, none of the six subjects showed any marked increase during the B' phase (first phase of behavior rehearsal only). During the second and third behavior rehearsal phases (B'' and B'''), there was a similar lack of marked improvement in these three behaviors.

However, for the fourth rated behavior, SUDS level, subjects evidenced a continuous trend of decreasing SUDS level from that reported in the baseline phase. Possible indications are that subjects were experiencing an extinction

effect to the anxiety produced by the experimental situation rather than feeling a reduction in anxiety as a result of behavior rehearsal and or feedback and insructions. Similar findings have occured in past research, (Rachman, 1968; Wolpe & Lazarus, 1966) anxious subjects have experienced a decrease in anxiety when gradually or repeatedly exposed to anxiety provoking stimuli.

This study also hypothesized that behavior rehaeasal combined with feedback and instructions would result in a marked improvement in four rated behaviors of positive assertion. Results indicate that there was no clear cut improvement in the (BC',BC'') behavior rehearsal combined with feedback and instruction phases. What did occur was an overall marked improvement in three of the four rated behaviors (eye contact, duration of reply, and overall assertion). However, because of the lack of clear cut improvement in the BC phases the specific treatment component responsible for the change cannot be determined.

One indication from the results is that there seems to be a definite relationship between the individual positive assertive behaviors and how easily they are effected by feedback. With the exception of subject 1 who already evidenced 100% eye contact from the beginning of the experiment, a number of subjects demonstrated a good deal of improvement in eye contact during BC phases. Duration, however, showed a much slower change in the presence of feedback and instructions.

The difference between these two behaviors sensitivity to feedback appears to make good sense, eye contact is a less complex behavior and therefore requiring less effort to bring about an improvement. In contrast to this duration of reply is a complex verbal behavior requiring considerable more effort to improve.

Additional variability of performance can be seen within individual subjects. Subject 1 evidenced extremely low ratings in duration and overall assertion throughout the entire experimental manipulation. In contrast to this she evidenced 100% eye contact throughout the entire sequence. Results such as this give clear cut support to the Eisler et al., (1973) findings that assertive responding involves a complex combination of verbal and nonverbal components. It also supports Serber's (1972) contention that rather than attempting to teach someone to be "more assertive" therapists should assess the individuals verbal and nonverbal deficiencies and attempt to help the person improve these specific behavioral skill deficits.

Variability was also noted in subject 3. He evidenced a much higher level of positive assertion, across all variables, from the very beginning of the treatment phases. Although he had room for improvement, his deficits were much less critical in nature than the deficits evidenced by the other subjects, and yet this individual reported enough difficulty with positive assertion on the College

Self Expression Scale to indicate a need for positive assertive training. The resulting indication is that subject 3 had a discrepancy between his perceived positive assertiveness and his actual ability, or there are other variables involved in his lack of assertion that the experimental measures did not pick up. Similar results have been found by Curran, Wallander, and Fischetti (Note 1) in an investigation of heterosexual social anxiety and heterosexual skill. In their study Curran et al., found that with some subjects there was a marked discrepancy between perceived competancy and actual performance ability. If such results are true, then scores from paper and pencil scales such as the College Self Expression Scale will need to be interpreted with even more caution than has been indicated in the past.

Although not objectively measured, there were certain subjects in this study who seemed to demonstrate a particular preference for, and higher degree of competence when responding to either opposite or same sex interpersonal partners. Future research should consider the possibility that subjects may have entirely different behavioral deficits when responding to same sex as opposed to opposte sex partners. It is possible that this variable could have caused some of the inconsistent results in the BC phases.

In conclusion, the results of this study show a marked increase in three of the four rated behaviors over the

course of the entire experimental phases. Because of the lack of clear cut improvement in specific phases that demonstrate a causal relationship between the specific treatment and the observed behavior, the specific treatment component responsible for the change cannot be determined.

The results of this study demonstrated that the components of positive assertion (eye contact, duration of reply, and overall positive assertiveness) can be improved in simulated interpersonal situations. By training others to respond to interpersonal situations with these behaviors, we may enhance a persons skill in sharing positive feelings with others. Thus, the above study may suggest further means of enhancing interpersonal relationships.

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APPENDIX A

The purpose of this research project, and your participation in it, is to contribute to the body of knowledge concerning effective ways to teach assertive behavior and effective communication.

Although the treatment procedures used in this research study may bring about an improvement in positive communication skills, they are in no way represented as fully developed treatment techniques. It is possible that the effcts of the treatment process could bring about no change in personal communication skills, and, although not likely, could result in ones loosing proficiency in positive communication.

The treatment procedures employed will involve the use of role palying and therapeutic instruction. No other procedures or hidden variables will be used.

Any personal information being conveyed at any time during this study as well as any videotaped material will be kept in strict confidence. This material will only be seen by the principal investigater, Timothy P. Follick, judges, and colleagues who have a specific purpose in seeing the material.

The attendant discomforts and risks reasonably to be expected by participation in this project have been explained to me and I understand them as they were stated in the written description of this project.

I have been given the right to ask and have answered any inquiry concerning the foregoing. Questions, if any, have been answered to my satisfaction.

| 1 | freely and voluntarily and |
|---|---|
| | (Name) |
| W | rithout undue inducement release Timothy P. Follick, Eastern |
| | Illinois University, and any other individuals connected with |
| | his research project from legal obligation. I have read and |
| | inderstand the foregoing. |

Witness Date Signature of Subject

APPENDIX B

ROLE PLAY SCENES

The following scenes are for a male subject. When a female subject was used the same topics were employed with the appropriate sexual references reversed.

- I. Narration: You have a friend to whom you have been very close for a long time. During this friendship you have grown quite close and have shared a lot of personal problems with each other. You enjoy being with your friend very much and think he has a lot of good qualities. Your friend has been going through some rough times and is feeling quite depressed and inferior. You are both sitting alone in a lounge and he says: "Sometimes I feel like I'm not worth two cents"
- II. Narration: There is a girl with whom you have worked with most of the summer in your summer job. You have really liked this girl, and been strongly attracted to her. You finally alk her out for a date, and you are now out on it. She has just told you that she has had affectionate feelings towards you all along, but was afraid to tell you. You are sitting alone and she says: "Its kind of hard for me to tell you these things but I am glad that I did."
- III. Narration: There is a girl at school that you have become really close friends with in the past year. She has always been a good person to talk to when you had problems, and you helped each other when you had classes together. You have developed strong feelings of closeness and affection

- for this girl as a friend. You realize that graduation is approaching rapidly. You are sitting in the cafeteria alone just chatting and she says: "You know, we have done a lot of stuff together."
- IV. Narration: You have been fixed up with a girl for a date on friday night, she has come in from out of town for the weekend. As it winds up you it off really well and spent the entire weekend together. You have developed some strong feelings of affection and closeness during this short time. It is Sunday night and it is about time for her to leave. You are sitting alone and she says: "This was sure a short weekend, really seemed like it went fast."
 - V. Narration: You have a brother who is about 4 years younger than you. You have had an argument that you now regret.

 You are really close to your brother and feel that he is a very special person, and you want to keep a strong relationship with him. You would like to tell him what he means to you, and why you feel close to him. You are sitting alone together in your room and he says: "We sure have had a lot of fights in our days."
- VI. Narration: You are in love with a girl so you both moved in together. You have been living together for about 6 months now and you have grown very accustomed to living with her. Your feelings about the relationship are now such that you view it in terms of being stable, content, and very supportive. You haven't as yet really told her about you new feelings, and now decide that you would like to. You are sitting alone

- one evening and she says: "I am feeling very relaxed right now".
- VII. Narration: You are out on your first date with a girl. It was the best date that you have been out on in many months.

 You had a lot of fun, and really felt like you both had a lot in common. You are standing by her door saying good night and she says: "I really had a good time tonight".
- VIII. Narration: There is a girl whom you have been good friends with for a long time. You have often shared personal problems together, and have grown quite close. You really enjoy being around this girl, and feel that she has a lot going for her. She has been going through some rough times lately and is feeling really inferior and inadequate. You are sitting alone and she says: "I really feel down today, I feel like such a nothing."
 - IX. Narration: You have been dating a girl for about 2 years. You have been very satisfied with the relationship. You both have a lot in common, you enjoy being with her. Neither of you have brought up the subject of marriage, but you have now decided that you wourl kike to get married. So now you want to tell her of you desire, and how you feel about it. You are alone and she says: "I am feelings really relaxed right now."
 - X. Narration: There is a girl who grew up with. You have known her since you were little and you both shared a lot of experiences together. You have always felt close to her,

but now that you have been away to school and come back you feel very affectionate towards her, and you would like to tell her just how much she means to you. You are alone together sitting on a park bench and she says: "This place brings back a lot of memories for me."

- XI. Narration: There is a guy with whom you have been close friends with for a number of years. You got into an argument with each other and have not spoken for a week. This has make you upset because you friendship is important to you. You have made up with each other, and you realize that you have never really told him how much the friendship really means to you, and how much you value him as a person. You are both alone in your room and he says: "I don't like it when we get into hassels like that."
- XII. Narration: You have a sister who is about 3 years older than you. There are many fond memories that you have of the years when you grew up together. You have always been close to her, and had strong feelings of affection for her, but you have never expressed it to her. You feel that you have not been keeping in touch enough with her, and you would like to tell her how you feel. You are sitting alone and she says: "We haven't seen much of each other lately."
- XIII. Narration: There is a professor in your major field that you have had for a number of classes as well as him being you advisor. He has talked with you and helped with your problems countless times. Over the years you have established

- feelings of strong affection and appreciation towards him for all that he has done, and in the close friendly manner that he has done it. You think of hem as a very special person to you and you would like to tell him how you feel. You are in his office and he says: "So whats new?"
- XIV. Narration: You have been dating the same girl for about three months. You like her, but up until now that all its really been. Now you have been seperated for one week due to spring break. During that time you missed her very much, and realized how much you really do care about her. She has returned from break, and you are sitting alone together and she says: "This vacation seemed awfully long."
 - XV. Narration: Your next door neighber had a friend come to stay with her for the summer. You hit it off with this girl right away, and you wound up dating for the whole summer. You grew close to her in this short period of time, but you never really told her how you feel. It is getting very close to the time when she is to leave. You are sitting alone and she says: "I am sure gald that I came to stay here for the summer."
- XVI. Narration: There is a girl that you dated for about 5 months.

 In that time you grew very fond of her. When she was home on vacation she was in an accident and had to stay in the hospital for about 2 months. After the first month you decide to go visit her and tell her how you feel about her.

 You are both alone in her hospital room and she says:

 "I really am glad you came to see me."

- XVII. Narration: There is a group of male and female friends that you have been hanging around with a lot. There is a girl for whom you have always seemed to have stronger feelings for. You finally decide that you have held back long enough from expressing your feelings of affection for her. You are sitting alone together and she says: "I was thinking the other day, we have been friends for quite a long time now".
- XVIII. Narration: There is a guy with whom you have been close friends a long time. You have shared a lot of things in those years, and have grown about as close as two friends can be. A time is approaching when you will be moving away from each other, and you realize that you have never told him how much you care about him, and how close you feel to him as a friend. You are sitting alone eating dinner together and he says: "I really think I am going to miss this old place".
 - XIX. Narration: You had previously been engaged to be married to a girl. Through some disagreements you broke off the engagement, but you feelings never changed for her. Now you are dating again and you want to tell her what she means to you. You are alone and she says: "I am glad that we are dating again."
 - XX. Narration: There is a girl who you are out on your third date with. You have a lot of fun when you are out with this person, and are growing quite fond of her. You would like to keep on seeing her, and would like to tell her how you feel.

 You are sitting alone outside and she says: "What a neat night this has been."