

AN ABSTRACT OF THE THESIS OF

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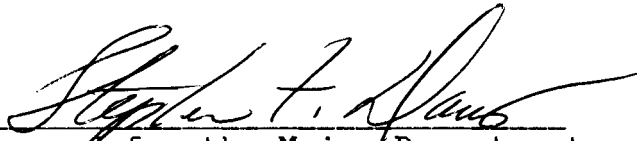
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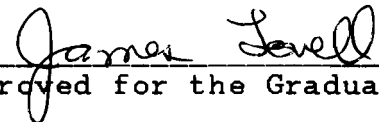
Effects of Female Therapist Title on Perceived
Credibility and Competence

Abstract approved: Cooper B. Holmes

A study was designed to assess subjects' perceptions of credibility and competence of different female therapist titles. The subjects were 278 college students (113 males, 165 females) who watched a 5 minute segment of an interview between a female therapist and female client. The subjects were randomly assigned to one of six title conditions: Dr., Mrs., Ms., Miss, First Name, or No Title. One of these titles was superimposed onto the videotape during the first and fifth minute of each taped segment. After viewing the videotape, subjects rated the therapist on 11 Likert-type scales which assessed their perceptions of the female therapist.

Analyses indicated that two of the titles were perceived as significantly different from the others. In addition, males' and females' perceptions significantly differed on five of the titles. In general, the "Ms." title was rated lower than the other titles and female subjects consistently rated the therapist higher than did the male subjects. However, the actual difference in ratings for both the title effects and gender effects are too small to warrant any clinical importance.


Approved for the Major Department


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EFFECTS OF FEMALE THERAPIST TITLE ON PERCEIVED
CREDIBILITY AND COMPETENCE

A thesis
Presented to
the Department of Psychology
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CHAPTER 1
INTRODUCTION

In a special edition of the American Psychologist (American Psychological Association [APA], 1986, February) and a special issue of the Journal of Consulting and Clinical Psychology (American Psychological Association [APA], 1986, February) psychotherapy research was assessed. The prominent stature of research in psychotherapy is evident by these scientific journals' attention to it. However, both neglected a notable area of relevant research in psychotherapy, namely atheoretical, or what have been increasingly referred to as "therapeugenic factors". Bloom, Weigel and Trautt (1977) refer to therapeugenic factors as those variables which are independent of specific therapeutic techniques and which do not fall under any certain theoretical orientation, yet are capable of increasing or decreasing the effectiveness of psychotherapy. Four types of therapeugenic factors can be categorized: factors in the client, the therapist, the client-therapist relationship, and/or the physical environment.

Research on therapeugenic factors has spanned a diverse assortment of variables which may be

significantly influential in the psychotherapeutic process. Investigators have examined therapist experience levels (e.g., Merluzzi, Banikiotes & Missbach, 1978; Scher, 1975), client expectancies (e.g., Hardin & Yanico, 1983; Subich, 1983), attractiveness (e.g., Kunin & Rodin, 1982; Schmidt & Strong, 1971), age (e.g., Helms & Simons, 1977), expertness (e.g., Strong & Dixon, 1971), client-therapist pairing (e.g., Graff, 1977; Howard, Orlinsky & Hill, 1970), perceived credibility (e.g., Bernstein & Figioli, 1983; Kee, Hallberg & Jones, 1980), client and therapist gender (e.g., Bernstein & LeComte, 1982), sex-role orientation (e.g., Feldstein, 1979), marital status (e.g., Simons & Helms, 1976), counselor dress (e.g., Littrell & Littrell, 1982) and even the effect of diplomas and awards on perceived therapist expertness (e.g., Heppner & Pew, 1977; Kunin & Rodin, 1982), to name only some of the areas. The results of these investigations have led researchers to conclude that often therapeugenic variables do in fact, affect the psychotherapeutic environment.

One area in which therapeugenic factors has received notable scientific attention has been therapist characteristics and their possible effect(s) on client behavior, and the therapeutic process in general. For

example, the role of physical attraction on interpersonal processes has been one of those therapeugenic factors investigated. Since Miller's (1970) investigation on the relationship of physical attractiveness on impression formation, numerous studies have found that attractiveness is a potent therapeugenic variable in the therapeutic milieu (Jackson & Minton, 1963; Dion, Berscheid, & Walster, 1972; Goldman and Lewis, 1977; Strong, 1968; Schmidt and Strong, 1971).

Schmidt and Strong (1971) and Patton (1969) used a counseling analogue to examine the effects of counselor attractiveness on counselor influence. According to Helms (1978), a counseling analogue is an experimental simulation of any aspect of the therapeutic process, involving a planned manipulation of some characteristic of the counselor and/or client involved in the process.

The investigators assigned subjects to one of four conditions: two investigator levels (influential or noninfluential) and two role levels (attractive or unattractive). Subjects talked to a "psychologist" (actually two male graduate students in counseling psychology) who portrayed either an "attractive" or "unattractive" role. In the "attractive" role, the graduate students greeted their subject warmly, smiled, responded warmly, and indicated sharing the same

experiences, feelings, and attitudes the subject expressed. The "unattractive" interviewer role had the graduate student ignore the subject when he entered the office, did not smile, gave only a few cold glances, portrayed disinterest, coldness, and indicated dissimilar experiences and attitudes and a lack of appreciation for those verbalizations revealed by the subject. After the interview the subjects completed a 30-item true-false interviewer reaction questionnaire, and described the interview using a 75-item adjective checklist. The results for attractive and unattractive roles differed significantly on 49 of the 75 adjective checklist items, and on 11 of the 30 interview reaction questionnaire items. Attractive interviewers were described as more friendly, good-natured, cheerful, considerate, happy, warm, and polite, while unattractive interviewers were described as cold, humorless, aloof, unhappy, depressed, and selfish. Surprisingly, in examining the changes in self-ratings of achievement motivation, it was shown that the subjects were equally influenced by both roles. Schmidt and Strong concluded:

The experimental and control group comparisons show that to influence subjects the interviewers in either role merely needed to deliver their opinions. This result seems

accounted for by noting that in both roles the interviewers were presented as experts (Ph.D psychologists). Disregarding whether the subjects liked the psychologist he was a credible, expert source of opinion (p. 350).

Strong and Dixon (1971) examined attractiveness and expertness on client's ratings of therapist's influence of various qualities and traits. The "expertness" variable was manipulated by the presence or absence of a nameplate with the title "Dr." on the desk. Their results indicated that no significant effects for either dependent measure influenced the clients.

Schmidt and Strong's contention that subjects were influenced by their interviewer's "expertness" has also been investigated as another therapeugenic variable. Expertness is also related to other therpeugenic factors, such as "credibility" and "status", which all have received research attention. Bochner and Insko (1966) found that subjects were more likely to agree with a more credible source (a Nobel Prize-winning physiologist) than a less credible one (director of the Fort Worth YMCA). Aronson, Turner, and Carlsmith (1963) found that undergraduate students changed their opinions significantly more with a highly credible source, than with a less credible source. Bergin (1962) found that

expertness made therapists appear more influential. Greenberg (1969), and Atkinson and Carskaddon (1975) found that expertness resulted in subject's being more attracted to therapists. For example, Greenberg (1969) investigated the effects of pre-session information given about a therapist on subjects' evaluations and perceptions of the therapist. In his counseling analogue study subjects were assigned to one of four groups: experienced-warm, experienced-cold, inexperienced-warm, or inexperienced-cold.

Results from the subjects' scores in the "warm" condition indicated that subjects were more attracted to the therapist, more receptive to his influence and more persuaded by his communications than were the subjects in the "cold" condition. The "experienced" subjects were found to be more attracted and receptive to the therapist than were the "inexperienced" groups, but were not more persuaded. In addition the warm-experienced group was more attracted, receptive, and persuaded by the therapist than the cold-inexperienced group. It was also found that the subjects who were given the description of a "warm" therapist were more attracted to him and receptive to the therapist, regardless of his experience. Thus, although the "trait" (warm-cold) and "role" (experienced-inexperienced) dimensions were

effective in influencing the clients, the trait information was ~~more~~ influential than was the role information. However, when Beutler, Johnson, Neville, Elkins and Jobe (1975) had psychiatric patients rate six therapists on credibility, they found that the patients' ratings had no significant relationship to the therapist's effectiveness in producing attitude change in the same psychiatric patients.

Atkinson and Carskaddon (1975) investigated the use of high vs. low levels of therapist prestige in an introduction, and the therapists' use of psychological jargon vs. layman's terminology on perceived counselor credibility. They randomly assigned three groups of subjects from a community college introductory psychology class, a county mental health clinic, and a drug abuse program in a federal correctional facility, into one of four groups: high prestige-high abstraction, high prestige-low abstraction, low prestige-high abstraction, and low prestige-low abstraction. The subjects were asked to watch a 15-minute videotape in which a simulated therapy session with a male client and male therapist was taking place. Two videotapes were made. The first ten minutes of the each of the videos were identical. In the last five minutes, the counselor began playing a more active role

in interpreting the client's statements. In one videotape ending, the therapist gave a highly abstract interpretation of the client's problems, and in the other videotape a concrete, easily understood interpretation was given to the client by the therapist.

To assess the effects of the high vs. low prestige introductions, the videotapes were shown with both a high prestige and low prestige introduction read before the tapes began. The high prestige statement was:

The therapist that you will observe working with a client is a highly regarded counseling psychologist. Since receiving his PhD 4 years ago, he has been in private practice and has been doing consultation. He recently published his fifth major article and is currently completing his first book (p. 181).

The low prestige introduction was:

The therapist that you will observe working with a client is a first-year graduate student training to be a counselor. He received his BA in psychology 4 years ago, and although he has never worked as a professional counselor before, he has taught school for 3 years (p. 181).

Other symbols of prestige (e.g., diplomas, awards) were

omitted from the area. After viewing the videotape, the subjects were asked to respond to a 7-point bipolar semantic differential questionnaire consisting of five topics. The concepts included the counselor's knowledge of psychology, his ability to help the client, his comprehension of the client's problem and the level at which the client would like to discuss his or her problem with the therapist. The results indicated that, similar to Hartley's findings (1969), clients perceived a counselor as more credible if he was introduced as a prestigious counselor and if he used abstract, psychological jargon. Subjects viewed prestigious counselors as more knowledgeable in psychology, and were more likely to indicate that they would like to discuss their problem with him. An interesting finding was observed in the different preferences for two of the groups for counselors. Mental health clients perceived a therapist with a prestigious introduction as preferable to one with a less prestigious introduction for the areas of "knowledge of psychology" and "comprehension of the client's problems". However, drug abuse inmates preferred low prestige counselors. Atkinson and Carskaddon (1975) suggested that the findings may be explainable in the following way:

...any therapist [in a mental health setting]

who can be called "Doctor" (MD, PhD, EdD, etc.) is greatly respected since he usually directs the activities of other mental health workers and often can prescribe drugs. The drug abuse inmates' preference for the problem may reflect their disillusionment with and distrust of persons who have titles and academic credentials and whose experiences are far different from the inmates with whom they work. Still, when rating a counselor as someone they would see to discuss a problem, they selected the high-prestige counselor, perhaps because he is perceived as having more power to help them obtain parole (p. 185).

Atkinson and Carskaddon found that introductory psychology students consistently reported less preference for any counselor than the other two sample groups. The authors suggest that this may be attributal to students' limited experiences with only high school counselors. Finally, the issue on how willing a person was to discuss his or her problems with either the high or low status counselor was insignificant for all groups. The authors propose that had there been more examples of prestige present (e.g., diplomas, licenses, journals), that subjects may have been more willing to

discuss their problems with counselors.

Expertness has also been found to improve clients' perceptions of counselors by countering undesirable counselor traits and qualities (Price & Iverson, 1969; Scheid, 1976; Patton, 1969, Strong & Dixon, 1971, Strong & Schmidt, 1970). For example, Spiegel (1976) examined expertness and similarity between a counselor and a client on the client's perceptions of a counselor's competence. Specifically, she hypothesized that for those problems expressed by clients in which expertness would be beneficial that clients would be more influenced by seemingly expert counselors; and for those problems in which similarity was preferred by the clients, counselors who expressed similar perceptions as the client's would subsequently be seen as more competent. She had subjects listen to an eight-minute taped segment of a therapy session between a college student and his male counselor. Subjects then read biographical information about the therapists which were designed to manipulate the similarity and expertness variables. The descriptions defined one of the following groups: high similarity, low similarity, high expertness, low expertness, low similarity-low expertness, high similarity-low expertness, low similarity-high expertness, and high similarity-high

expertness. The "high similarity" group read that the counselor was a 22 year old peer counselor, who was a senior in college. The low similarity condition description was of a 39 year old counselor, who was not a student. In the "expert" conditions, the "low expert" counselor was described as having minimal experience and training, and the "high expert" counselor was described as having considerable training and experience. The remaining conditions (e.g., low similarity-high expert) were a combination of the descriptions given above.

Spiegel incorporated findings of a previous study (1976) into her present study. She had found that clients prefer peer help when the client's problems concern friendship problems. For concerns with academic issues, it was shown that clients preferred counselors with professional status. These findings were incorporated into the present study in that subjects were told that the client had one of two problems: 1) either a problem with one of his friends or, 2) a client's difficulty related to an academic area. After watching the taped segment of the therapy session subjects rated their perception of the counselor's competence. The results of the client's ratings indicated that those counselors in the high expertness conditions were perceived as significantly more

competent by both males and females than were the counselors in the low expert conditions. The low similarity conditions (counseling aide and Ph.D. counselor) resulted in client's rating counselors as more competent than the high similarity counselors. Thus, Spiegel's hypothesis that there would be an interactive effect between expertness and similarity was not confirmed. Her results suggest that regardless of the type of problem, high counselor expertness is perceived by the subjects as leading to significantly greater counselor competence. She stated "this suggests that expert credentials create a perceptual set within which a counselor's actions are viewed, permitting considerable latitude within role behavior [of the therapist]" (p. 436).

A study by Heppner and Pew (1977) showed that tangible symbols of expertness (e.g., diplomas, awards) increased client's perceptions of counselor competence. They assigned undergraduate students to one of four groups: a male counselor with degrees and certificates, a male counselor without degrees and certificates, a female counselor with degrees and certificates, or a female counselor without degrees and certificates. The counselor would alter the environment appropriately for the treatment condition (awards, no awards) and would

then greet the subjects and take them to his office and tell them to look around and make themselves comfortable. The subject's chair faced the diplomas on the opposite wall. The only items that pertained to expertness were the degrees which consisted of three framed diplomas (B.A., M.A., Ph.D.), a "Counselor of the Year" award, and a certificate showing membership in a professional organization. The results indicated that the subjects who saw the diplomas and awards perceived the counselor as significantly more expert than those who did not have the awards present. The sex of the counselor did not alter this pattern of results.

Brooks (1974) investigated expertness in a more comprehensive manner. She investigated the effects of sex and status on self-disclosure. She had 80 undergraduate students (with no previous counseling experience) talk to a counselor. Each counselor was randomly assigned five male and five female subjects for both the low and high status condition. The status of the counselor was manipulated by three introductions. The high status condition described the counselor as one of the most experienced, popular, warm, skilled, competent and helpful counselors at the counseling center on campus. The low status counselor was described as currently in training, while counseling

part-time at the university counseling center, and he had only seen a few students as clients so far. This was the first status manipulation. The second involved the receptionist at the counseling center. She would inquire about who the client was seeing. In the high status conditions, upon hearing the name of the counselor, she would praise the counselor, but in the low status condition would comment indifferently about the counselor. The third status manipulation dealt with the decor of the office. In the high status condition, the office was filled with nice furnishings; in the low status condition the room, sparsely filled with furniture, was in the basement of the building. When subjects were brought into the office, they were given an information sheet which explained in writing the purpose of the pseudo-study and introduced the counselor (high or low status). The interview lasted 15 minutes. The subjects then filled out a questionnaire which examined the counseling climate, counseling comfort for the client, and the overall client satisfaction with the session.

The results from the questionnaire indicated that subjects significantly rated the high status counselors as having more status than those counselors in lower status conditions. However, these findings were not

main effects. The subject's sex interacted significantly with the interviewer status. Male subjects disclosed more to high status counselors, while female subjects disclosed more to low status interviewers. However, high status male interviewers elicited more disclosure from all subjects overall, while the status of the female interviewer resulted in no significant differences. This suggests that there may be at least some differential effects for status between males and females.

One of the specific manipulations used to create the expertness/status variable in counselors has been the therapist title used (e.g., Price & Iverson, 1969; Guttman & Haase, 1972; Brooks, 1974). Unfortunately, however, the therapist titles have usually been only one of the status/expertness manipulations used in a study. Usually there are additional manipulations as well. It is difficult, therefore to assess the effects of any of the single manipulations as to their relative value in influencing client's attitudes. For example, in Brook's study (1974), she used three manipulations of status and found that male therapists with high status obtained more disclosure from all their subjects. She also found that male clients responded more to high status therapists, and that female clients responded most to

low status clients. Yet, it is impossible to know from her results whether all three status manipulations (title, office furnishings and receptionist's reactions) had an equal impact, whether two variables were important and one not, or whether it was just one of the variables that was important.

A few studies have avoided examining numerous manipulations of the same variable. Simon (1973) investigated age, sex, and the title of the therapist on client's preferences for therapists. Two samples were studied. One sample included females attending college. The other sample consisted of adults taking an education class. Subjects were given an instruction sheet which asked them to pretend they had a personal problem that they wanted to discuss with a therapist. Next, the subjects were asked to think about two hypothetical situations and respond as they thought they would in a real-life therapy situation. In the first situation the subjects were told that there were six therapists, highly recommended to them and that the only differences between them were their titles. The titles given on the subject's instruction sheet were a behavioral consultant, an emotional counselor, a psychiatrist, a psychoanalyst, a psychologist, and a social worker. The subjects were asked to rate the order of preference of

whom they would seek to talk to. In the second situation subjects were asked to rate six therapists, all highly recommended to them, whose only differences were their ages and sexes. The choices given were 25, 40, and 55 year old males or females.

The results of the subjects' responses indicated that, in general, the "psychologist" and "psychiatrist" titles were the most preferred. The exception was reported by the younger college sample who most preferred the "emotional counselor", while the "psychiatrist" title was an unpopular choice. Also male therapists were preferred to female therapists, and 40 year olds were more preferred to the 25 and 55 year old therapists. Thus, there were differential preferences of therapist title, but the overwhelming choice was for "psychologists" and "psychiatrists".

Strong, Hendel, and Bratton (1971) examined student's perceptions of counselors, advisors, and psychiatrists. They assigned female student volunteers from an introductory psychology class to one of three "help-givers": counselors, advisors, or psychiatrists. The experimenter asked subjects to describe, by means of a questionnaire, their ideas of what they saw each of the help-givers like. The results indicated that 41 of the 100 adjective items were significantly different.

In general, psychiatrists were found to be more knowledgeable, dominant, cynical, orderly, inquisitive, intellectual, analytical, and decisive (to name only a few) than were either counselors or advisors. Advisors and counselors were viewed almost identically; they were seen as friendlier, and warmer than psychiatrists. As a rule, as client's problems began to get more severe and difficult they desired a psychiatrist; otherwise counselors were viewed as warmer, friendlier help-givers, especially helpful for problems with vocational and educational problems.

Gelso and Karl (1974) did not replicate the differences found in Strong et. al's study between counselors and psychiatrists. Instead, their results showed a remarkable similarity between perceptions of counselors and psychiatrists. Gelso and Karl's findings did, however show differences between counseling psychologists, college counselors, and high school counselors, a distinction that Strong et. al. did not investigate. Counseling psychologists were perceived as more knowledgeable, inquisitive, analytical, and casual than were college counselors.

A recent study by Holmes and Post (1986) with college students, and a study by Reed (1986) with psychiatric patients, investigated the effect of

therapist title on perceived competence. Both studies had subjects watch a five minute videotape of a client (graduate student) and therapist (Ph.D. clinical psychologist) interaction. Four copies of the tape were made and on each, one of four titles was superimposed at the bottom for the whole tape (either Dr., Mr., Timothy, or no title). Subjects then completed an 11-item scale on formality, ability to help, willingness to help, ability to maintain confidence, warmth, genuineness, ability to understand, concern for people, how comfortable he would make one feel, subject's willingness to follow a therapists advice, and subject's willingness to consult the therapist. The results indicated that that there was no significant effect for therapist title with either the college students or the psychiatric clients.

A few investigations have examined the effects of titles on perceptions of women. For example in a recent issue of Glamour magazine, Dight (1986), in a nonexperimental article, suggested that one of the ways in which a woman could make her name a business asset was to clear up "gender confusion", meaning to eliminate those circumstances in which it was difficult to to assess a person's sex by his or her name. She suggested that:

Names such as Pat or Chris, or initial names such as KC or BG, create problems for people who don't know you. Are you male or female? Don't keep people guessing. If your official business name doesn't clear up the gender problem, type Ms. in parenthesis in front of your name...Don't write Miss or Mrs.; it puts too much emphasis on your marital status (p.118).

In an article in Newsweek (April, 1971) it was suggested that the prefix "Ms." was being used as the single form of address for females. Yet, the article stated "At the moment, acceptance of Ms. is still limited mainly to the women's liberation movement..." (p. 61). However, it also went on to say that the "Ms." title has become common practice for business correspondances with women whose marital status is unknown.

There have been a few experimental investigations of female's titles, concerning people's reactions to them. Heilman (1975) examined high school and undergraduate male student's attitudes towards womens' titles by measuring their expectations of course offerings with various titled instructors. Students were told that a new course was being offered. They received a two-page course description and a 9-item

adjective rating scale assessing the enjoyableness and intellectual stimulation possibilities of the course. Two course offerings were shown to the subjects: a technical and nontechnical course description. The instructor's name and title was given after the course title. The instructor titles were Miss, Mrs., Ms., or Mr. J.R. Erwin, or only the initials were used (J.R. Erwin).

Results indicated that the title of the instructor did produce differential ratings, but only for the nontechnical course. Students rated the nontechnical course as less enjoyable and less intellectually stimulating when it was taught by a "Miss" or "Mrs." title than if taught by a "Ms., Mr., or no title" instructor. Heilman concluded:

In this instance, women called by traditional titles (either Miss or Mrs.) are at a major disadvantage, both in the potential popularity of the course they are teaching and in the expectations of intellectual challenge brought to the scene by students....In all cases, courses taught by Ms. instructors were found to be rated comparably to those taught by Mr. or No Title instructors (p.518).

In an extension of Heilman's (1975) findings,

Anderson, Finn, and Leider (1981) examined the relationship between leadership style and title. They employed a description of a small group discussion, in which the leader was introduced as either Mr., Ms., Miss, or Mrs. Jones. The behavior of the leader was described as either democratic or authoritarian. Both high school and undergraduate university students read and evaluated a leadership case study. One of the leaders titles (Mr., Mrs., Ms., Miss) was inserted in each of the case studies. The results indicated that the title manipulations produced no significant main effects, although the leaders who used an authoritarian style of leadership using the "Ms." evoked higher subordination ratings than other authoritarian leaders.

Conner et. al. (1986) investigated the response of the public to successful females identified by a title (Ms., Miss, Mrs., or no title). They had subjects (range 18-45+ years of age) at a shopping mall read two paragraphs (these are the no title manipulations):

Barbara Smith, age 27, who is an undergraduate at college, has been hoping to continue her education by going to graduate school for her degree. After high school she worked for a few years and has now finished three years of her college career. She had believed it to be

economically impossible to continue. However, since Barbara Smith has been a good student and had done a great deal of work in the community she has been awarded financial aid.

Carol Johnson, age 27, works for a computer corporation. She was hired five years previously as an administrative assistant and after three years was promoted to director of her unit. In the past month an investigation has been under way to determine the cause of lost funds in which a specific employee is under question. Though the investigation is only half over, Carol Johnson believes that the employee is guilty and the investigation is taking too long; therefore, she fires the employee (p. 546).

For the other three title manipulations the appropriate title (Miss, Ms., or Mrs.) was added to the name above. After reading each description the subjects evaluated the woman. The results indicated that title produced one significant effect concerning the honest-dishonest variable. The woman in the paragraph with the "Ms." title was rated significantly less honest than those in

the other conditions, for both paragraphs.

Dion (1978) examined the expectations of undergraduate students toward different titles of address used by women. He used a methodology similar to Conner et. al. He had subjects rate their impressions on a 29-item semantic differential and through factor analysis derived four factors: achievement motivation, social assertiveness, interpersonal warmth, and fortunate person.

The results found significant main effects for title of address on achievement motivation, social assertiveness, and interpersonal warmth. The "Ms." title was perceived as belonging to a more achievement oriented and socially assertive, yet less interpersonally warm person. Also in an additional measure in ratings of career goals, a negative bias was found toward the "Miss" title and positive bias was found for the "Mr." title.

The purpose of the present study is to examine the effect of female therapists' titles of address on student's perceptions of their competence. As noted earlier, all too often it is difficult to determine the effects of individual status manipulations because they are in combination with others. Holmes and Post's (1986) study and Reed's (1986) study were the only ones

found in the literature that examined a single status variable (title). However, their assessment of titles was confined only to male therapists. The present study sought to examine the possible effects of female therapists' titles alone. This seems important for several reasons. First of all, Atkinson and Carskaddon's (1975) findings suggested that "Dr." was perceived as more credible than other titles. They stated:

This finding, combined with research on the effects of interpersonal expectation on behavior change, suggests that counselors should attend to showmanship attributes that affect their credibility as a counselor as well as to counseling technique if they hope to bring about client behavior change" (p. 184).

Thus, it may be important to stress to female therapists the benefits of obtaining their Ph.D. in order to have the prestige that accompanies the title "Dr.". A second important issue, related to the first, is that there are an increasing number of master's level psychologists who are assuming therapist roles. If it is important to clients to have credible therapists, and since the master's psychologists do not have the address "Dr.",

they may need to find alternate ways to enhance their credibility. Finally, a comparable study to Holmes and Post's and Reed's for male therapists, has not been investigated for female therapists. With an increasing number of females entering the field, it is appropriate to investigate the effect of therapist title on perceived credibility and competence of female counselors.

CHAPTER 2

METHOD

Subjects

The subjects in this study were 278 students enrolled in the introductory psychology and developmental psychology courses in the Spring of 1988 at Emporia State University (113 males and 165 females). A total of 8 introductory, and 4 developmental psychology classes participated. Two subjects did not report their age. In these instances the mean age for their respective groups was assigned to them. The mean age for the total sample was 21.08 years (21.38 for males and 20.78 for females).

Apparatus

The questionnaire used in the present study was developed by Holmes and Post (1986). The rating scale consisted of eleven items assessing the therapist's credibility and competence. Each questionnaire item was scored on a 7-point Likert-type scale. The areas of credibility and competence assessed were: therapist formality, therapist's ability to help, therapist's willingness to help, trustworthiness, warmth, genuineness, understanding, concern, the client's degree of comfort with the therapist, the client's willingness

to accept advice from the therapist, and the client's likelihood of consulting this therapist. A copy of the questionnaire is in the Appendix.

A videotape shown to the subjects was produced in the Instructional Media Center at Emporia State University. Both the therapist and client were female psychiatric nurses from an inpatient psychiatric unit in a local county hospital. Both nurses had extensive training and experience in conducting individual and group therapy with psychiatric clients. These females were chosen because they were less likely to be known than other therapists in the community. The taped session was not planned or rehearsed. The interaction between the females in the tape showed spontaneous interactions between the therapist and client. Both the female therapist and the client were in their early thirties. A 5 minute portion from an original 20 minute session was selected by the thesis committee as showing maximum interaction between the therapist and client. Copies of the tape were made, and on each of the tapes, one of six labels was superimposed: Dr. Alecia Andrews and Client, Ms. Alecia Andrews and Client, Mrs. Alecia Andrews and Client, Miss Alecia Andrews and Client, Alecia Andrews and Client, and one tape with no label. The label appeared during the first, and fifth minute of the

showing of the tape, and clearly distinguished the therapist and client. The videotape was in color and was shown on a 19-inch television screen.

Procedure

The six title manipulations were randomly assigned to the introductory and developmental psychology classes by arbitrarily choosing from a hat one of the six title manipulations written on slips of paper. Group 1 was assigned the "Dr." tape; Group 2 the "Mrs." tape; Group 3 the "Ms." tape; Group 4 the "Miss" tape; Group 5 the "Alecia (First Name)" tape; Group 6 the "No Title" tape. Each class viewed only a single title manipulation. The demographics of the six groups by age, gender, and sample size is shown in Table 1 on the next page.

Table 1

Sex, Age, and Sample Size of the Six Experimental Title Conditions

Group	Sex	n	Mean Age
1 "Dr"	male	15	20.13
	female	27	20.30
	combined	42	20.22
2 "Mrs"	male	17	20.59
	female	15	20.53
	combined	32	20.56
3 "Ms."	male	23	22.82
	female	32	20.88
	combined	55	21.85
4 "Miss"	male	20	20.95
	female	30	19.90
	combined	50	20.43
5 First Name	male	22	21.09
	female	33	20.85
	combined	55	20.97
6 No Title	male	16	22.69
	female	28	22.21
	combined	44	22.45
Total		278	20.17

At the onset of the experiment, the following instructions were read to the class, and preceded the taped interview:

The film you are about to see is a segment of a therapy session between a therapist and a client. After watching the tape, I will ask you to fill out a questionnaire about the therapy session. The questionnaire is not a test. It will simply ask your opinion of the session.

The class was then shown the 5-minute therapy session. The television was positioned at the front of the room and the lights were turned off while the tape was shown. After the tape was presented, the lights were turned on, and the television was turned off. The class was then read the following instructions before being given the questionnaire:

This questionnaire is designed to determine your attitudes about the therapy session you just saw. There are eleven items on the questionnaire and each item is concerned with a different aspect of the therapy session. You are to answer each of the items by rating your response on a scale of 1 to 7. A score of "1" is a low response, and a score of "7"

is a high response. You are to circle the appropriate number (1-7) that best reflects your opinions on that item.

When the questionnaires were completed, the subjects were thanked for their assistance.

CHAPTER 3

RESULTS

The mean ratings for the 11 questionnaire items were analyzed in a 2 x 6 (subject gender x therapist title) analysis of variance for unweighted means. Results indicated that effects for therapist title were significant on two of the questions, and that significant effects for subject gender were achieved on five of the questions. There were no significant effects for any of the subject gender x therapist title interactions on any of the questions. The mean ratings and standard deviations for each of the questions are shown in Table 2 on the following page.

On item 1 (Formality), there was no significant effect for therapist title, $F(5, 266) = 1.694, p > .05$, for subject gender, $F(1, 266) = 1.694, p > .05$, or for the interaction, $F(5, 266) = 1.092, p > .05$.

On item 2 (Ability to Help), there was a significant gender effect in that female subjects rated the female therapist as being significantly more able to help someone than did male subjects, $F(1, 266) = 7.113, p < .008$. There were no significant effects for therapist title, $F(5, 266) = .901, p > .05$, or for the interaction, $F(5, 266) = .778, p > .05$.

Table 2

Mean Ratings and Standard Deviation for Each Item
by Subject Gender irrespective of Title

Item #	Male		Female	
	Mean Score	S.D.	Mean Score	S.D.
1 Formality	4.52	1.23	4.82	1.29
2 Ability to Help	4.29	1.30	4.70	1.25
3 Willingness to Help	5.26	1.27	5.48	1.17
4 Trustworthiness	4.98	1.46	5.54	1.13
5 Warmth	4.70	1.17	4.91	1.33
6 Genuiness	4.72	1.17	5.00	1.26
7 Understanding	4.80	1.26	5.15	1.26
8 Concern	4.95	1.18	5.13	1.14
9 Client's Comfortableness	4.11	1.52	4.36	1.46
10 Willingness to Change	4.18	1.34	4.61	1.27
11 Likelihood of Consulting Therapist	3.63	1.44	4.16	1.49

On item 3 (Willingness to Help), there was no significant effect for therapist title, $F(5, 266) = 1.057$, $p > .05$, for subject gender, $F(1, 266) = 2.149$, $p > .05$, or for the interaction, $F(5, 266) = p > .05$.

On item 4 (Trustworthiness), there was a significant gender effect, $F(1, 266) = 12.229$, $p < .001$. Female subjects rated the female therapist as significantly more trustworthy than did male subjects in all title conditions. There were no significant effects for title, $F(5, 266) = .976$, $p > .05$, or for the interaction, $F(5, 266) = .463$, $p > .05$.

On item 5 (Warmth), there was a significant effect for therapist title, $F(5, 266) = 2.745$, $p < .019$. Subsequent post-hoc analyses using the Newman-Keuls test indicated that the female therapists with the "Miss" and "Mrs." titles, and the "No Title" condition were rated as significantly warmer than the therapist with the "Ms" title. There were no significant effects for subject gender, $F(1, 266) = 1.681$, $p > .05$, or for the interaction, $F(5, 266) = .406$, $p > .05$.

On item 6 (Genuiness), there was no significant effect for therapist title, $F(5, 266) = 1.984$, $p > .05$, for subject gender, $F(1, 266) = 3.432$, $p > .05$, or for the interaction, $F(5, 266) = .913$, $p > .05$.

On item 7 (Understanding), there was a significant

gender effect, $F(1, 266) = 5.092, p < .023$, in that female subjects rated the therapist as significantly more understanding than did male subjects. There were no significant therapist title effects, $F(5, 266) = 1.228, p > .05$, nor a significant interaction, $F(5, 266) = .782, p > .05$.

On item 8 (Concern), there was no significant effect for therapist title, $F(5, 266) = 1.406, p > .05$, for subject gender, $F(1, 266) = 1.653, p > .05$, or for the interaction, $F(5, 266) = .265, p > .05$.

On item 9 (Client's Comfortableness), a significant therapist title effect was achieved, $F(5, 266) = 2.473, p < .032$. However, a subsequent post-hoc analysis using the Newman-Keuls test was unable to identify any of the therapist's titles as significantly differing from any of the others. There was no significant effect for subject gender, $F(1, 266) = 1.825, p > .05$, or for the interaction, $F(5, 266) = .866, p > .05$.

On item 10 (Subject's Willingness to Change), there was a significant gender effect, $F(1, 266) = 6.824, p < .009$. Female subjects indicated a significantly greater willingness to follow the therapists advice than did male subjects. There were no therapist title effects, $F(5, 266) = 1.896, p < .05$, or effects for the interaction, $F(5, 266) = .567, p > .05$.

On item 11 (Likelihood of Subject to Consult Therapist), there were significant effects for subject gender and therapist title. Female subjects indicated a significantly greater likelihood of consulting the therapist than did male subjects, $F(1, 266) = 8.176, p < .004$. For the title conditions, significant main effects were achieved, $F(5, 266) = 4.448, p < .001$. Subsequent post-hoc analyses using the Newman-Keuls test indicated significant differing ratings for several of the titles. The subjects in the "Miss" and "No Title" conditions rated a significantly greater likelihood of consulting the female therapist than did the subjects in the "Ms" title condition. In addition, the subjects in the "No Title" condition rated a significantly greater likelihood of consulting the therapist than did the subjects in the first and last name condition, "Alecia Andrews". There was no significant effect for the interaction, $F(5, 266) = 1.233, p > .05$.

CHAPTER 4

DISCUSSION

The findings from the present study suggest that differences exist between perceptions for certain therapist titles, and between perceptions of males and females for certain therapist titles. However, these data need to be reviewed cautiously. Although there were significant gender effects and significant title effects on a few variables, the mean ratings for these were in actuality quite similar. In no instance in which significance was achieved in either a gender effect or therapist title effect did the mean difference between various groups even differ by more than one point on the rating scale. Thus, although statistically the differences were significant, the clinical importance derived from these findings are interpretively unimportant.

With these cautions expressed, a few speculative remarks about the results can be made. In all of the significant differences in ratings by male and female subjects, females consistently rated the female therapist higher in the characteristics in question. More specifically, female subjects rated the female therapist as more able to help someone, more

trustworthy, more understanding, as well as indicating being more willing to follow the therapist's advice, and more willing to consult the therapist. These results, namely, higher ratings by females for female therapists is similar to Holmes and Post's (1986) findings. They found that males consistently rated the male therapist as higher on the variables investigated than females.

In the two significant therapist title differences the trend was predominately to rate the "Ms" label as lower than other therapist titles. In assessing therapist warmth (Question 5), subjects rated the female therapists with the "Miss", "Mrs." and "No Title" conditions as warmer than the female therapist with the "Ms" title. On the question concerning the client's likelihood of consulting the therapist if they had a problem (Question 11), subjects indicated being more likely to consult the female therapists with the "Miss" title and "No Title" conditions than the therapist with the "Ms" title. Also, subjects indicated a preference for consulting the female therapist with the "No Title" over the therapist who used her first and last name (Alecia Andrews). The reason for the slightly more negative rating for the "Ms" title is unclear. Heilman's (1975) findings suggested that instructors using the "Ms" title had an advantage over instructors

who used the "Miss" or "Mrs." titles. However, Dion (1978) whose subjects were undergraduates, found that although the "Ms." title was perceived as more achievement oriented and socially assertive, it was also viewed as less interpersonally warm.

In conclusion, the results seem to indicate that a female therapist's choice of title (Dr., Mrs., Ms, Miss, first name, or no title) should not significantly influence the client's perception of her for the traits assessed in the present study. With regard to the slight tendency for females to rate female therapists as higher, the differences appear too small to indicate any conclusive preference for a same-sexed therapist. However, since Holmes and Post (1986) also found a very small, but significant, trend for a same-sexed therapist, it is possible that future research might concentrate on determining whether there is a same-sexed gender preference for therapists. Future research efforts might also investigate the possible effects of the clients' problem type on the resultant preference for a therapist title. It is conceivable that clients may prefer different titles based on the presenting problem type.

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APPENDIX

Therapist Rating Scale

AGE: _____ SEX: _____

Respond to the following questions by circling the most appropriate response.

How formal do you see the therapist?

Very Formal
1 2 3 4 5 6 7

How capable would you rate the therapist's ability to help someone?

Very Capable
1 2 3 4 5 6 7

How willing would you rate the therapist's willingness to help someone?

Very Willing
1 2 3 4 5 6 7

How well could you trust the therapist to keep your discussions with her confidential?

Completely Trustworthy
1 2 3 4 5 6 7

How warm would you rate the therapist's personal warmth?

Very Warm
1 2 3 4 5 6 7

How genuine would you rate the therapist's genuineness, or sincerity?

Very Genuine
1 2 3 4 5 6 7

How would you rate the therapist's understanding of people and their problems?

Not at all understanding						Very Understanding
2	3	4	5	6	7	

How much concern for people do you feel the therapist has?

Not at all concerned						Very Concerned
2	3	4	5	6	7	

How comfortable would you feel with this therapist?

Not comfortable						Very Comfortable
2	3	4	5	6	7	

How willing would you be to follow this therapist's advice?

Not willing						Very Willing
2	3	4	5	6	7	

How likely would you be to consult this therapist if you had a problem?

Not likely						Very Likely
2	3	4	5	6	7	