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An Examination of Gender-Related Themes and Affective States in the Social Group Work Treatment Setting

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AN EXAMINATION OF GENDER-RELATED

THEMES AND AFFECTIVE STATES IN THE

SOCIAL GROUP WORK TREATMENT SETTING

by

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A Dissertation Submitted to the Faculty of the

School of Social Work of Loyola University of Chicago

in Partial Fulfillment of the Requirements for the Degree of

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PREFACE

The motivation for this research was a result of this social worker's group work experience with her clients. For ten years, she conducted various groups for parents, adolescents, and women. Gradually she noticed that the women would focus their concerns and clinical work on their families, friends, relationships, and concern for each other's well-being. She did not notice this as readily with her male clients. Interestingly, this behavior was consistent with feminist theory regarding identity development. Thus, she sought to empiricize this phenomena and search for any relationship between this theory and women's behaviors, thoughts, and feelings within the social group work treatment setting. This research is a result of that endeavor.

DEDICATION

The writer dedicates her research to the memory of her father, Seymour Gagerman. It is he who served as the role model and infused the value of "giving to others" as one of life's primary gifts. She wishes to recount an experience as a young child which was probably one of the precipitating factors in her choosing a career as a social worker.

The writer was born on the west side of Chicago and spent her childhood on the south side. Her father worked ten, and many times twelve hours/day, six days a week to support his family of six. After driving a cab for several years, he and four of his brothers pooled their resources and bought a currency exchange at 63rd and Halsted. The writer began working at this store on Saturdays and after school when she was twelve years old.

One Saturday, after a very long day, she and her father were driving home. They passed an empty lot that obviously had been transformed into a playground. Approximately fifteen boys were throwing a hard baseball to each other, but using paper bags as mitts. Seymour turned the car around, drove back to the shopping area at 63rd and Halsted, went into a sporting goods store, and came out with

fifteen mitts. They drove back to the lot where he handed
out the baseball gloves, to the utter surprise and delight
of the boys.

Back in the car, she asked her father, "Dad, why did
you do that?" He replied, "As long as you have more than
other people, you give them what you can. Remember that,
and it will always make you happy."

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CHAPTER I

INTRODUCTION

Statement of the Study Issue

The purpose of this research study was to compare,
contrast, and investigate the themes and affective states
discussed in two types of treatment groups: 1) women's
groups and 2) mens' groups. The samples included client
populations which social workers characteristically see in
agency settings. It was hypothesized that the themes and
affects would be differentially related to the groups.
Special attention was directed to whether or not these
themes and affective states reflected issues of gender
identity development.

Traditional psychodynamic theory states that one of
the main tasks involved in identity development is for the
person to eventually separate and individuate from his
primary caretakers. Once this has been achieved, he can
begin to form his own sense of self and become a mature
adult.

Since the mid-1970s, feminist psychotherapists have
stated that this theory is applicable to men, but not to
women. They have reported that women's identity development
is centered around caring and being responsible for family

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and friends, maintaining attachments, staying emotionally connected, and achieving interpersonal relatedness with others./ Feminist sociologists have noted that the study of society has been generally limited to examining social interactions from a male perspective, and that a theory of feeling and emotion (characteristically female) has been lacking.

Research studies examining the content and interactions in group treatment comparing all-men's, all-women's, and mixed-gender groups have been relatively few in number and have generally used students as subjects. The evidence from this work reports that in all-women's groups, women expressed concerns about the significant people in their lives, encouraged and supported each other, and worked towards interpersonal relationships in the group. Men in all-men's groups tended to remain psychologically differentiated and separated from each other, were highly competitive, and individually achievement - oriented. In mixed-group settings, women tended to defer their needs towards men, spoke significantly less, and competed with each other for male attention and approval.

It is interesting to note that the themes and content of each of these groups reflected the issues of specific gender identity development, i.e., women seeking attachments and connections, men remaining separated and individuated. In the mixed-gender group, men and women tended to display

behavior reflective of traditional sex-role socialization. This study, therefore, was geared toward examining which themes and affective states arose in which groups, and whether or not they corresponded with gender identity development, from both the psychodynamic viewpoint and the symbolic interactionist perspective.

It was the intention of this research to examine how and why women and men may speak in "different voices" in the group work setting, rather than to render judgment as to the relative worth of one set of themes and affective states over the other. Finally, this study intended to begin applying the theory of gender identity development to group therapy and to consider its implications for further social work research and practice.

Rationale and Contribution to Social Work

Gender issues in social group work are highly significant for the following reasons:

1. The changing roles that men and women are now experiencing in our society affect their relationships on both the personal and professional levels. Within the last twenty years, women have entered the marketplace and gained access to occupational statuses once held sacred for men only. They are having to face the pressured lifestyle of juggling a career and home responsiblities. With security in paychecks, women are not as financially dependent on men as in the past. With these changes, they are acquiring

economic and political power which (subtly or not) influences the dynamics of their marriages and relationships, even giving women the choice of remaining single.

Men are now having to (and are also wanting to) be part of the child-rearing process, which significantly alters the evolution of family dynamics and interactions. The problems that arise regarding adjustment to these new roles are brought to the attention of social workers daily. How men and women participate in family decision making, handle opportunities for intimacy, use their power, and assume roles in the family are often transfered to the group situation. This makes it extremely important for social workers and group members to explore parallels between the family and the group so that members may obtain satisfactory resolutions of gender issues in both the group and the home (Garvin and Reed, 1983).

2. The types of problems social workers see their clients confronting are, in many cases, gender related. Women have difficulties around child-care, low income, being victims of abuse and violence, and obtaining adequate obstetric/gynecological care. Men generally seek out social workers for help with their vocational training, violence-related behavior, criminal activity and convictions, and specific health-related problems i.e kidney, heart, lungs, etc. (Garvin and Reed, 1983). Working with these presenting

problems in groups has been documented abundantly (although not empirically) to have favorable results.

3. Clinicians and researchers from both social work and psychology (Dies and MacKenzie, 1983) state that there has been little progress made in "forging an alliance between researchers and practioners in social group work" and there is a call from the profession to have social workers "themselves construct instruments and complete measurements for...evolving group themes" (Anderson, 1986, p. 111). Researchers following strict lines of inquiry in social group work clearly state that "systematic, sustained and rigorous research still represents the key to comprehending and resolving the many theoretical, methodological, and practice problems that inhere in social group work" (Rose and Feldman, 1986, p. 5).

A less orthodox but equally acceptable view holds that empiricism in clinical practice needs to move beyond the constraints of a "narrow perspective that tends to bring with it an assumption, that the most powerful variables in practice are to be found in the direct interaction between the practitioner and the client (Briar, p. 4, 1990). Instead, further work is needed to "develop better research methods for empirical practice - not exotic ones that fascinate methodologists, but valid and reliable tools and techniques that can be more readily and easily utilized by practitioners in developmental research" (Briar, p. 6,

1990).

4.   Schlachet (1986) and Bednar and Kaul (1986) note that the clinical disciplines have not, as yet, been able to provide an adequate theoretical understanding and conceptualization of how and why group therapy can be effective for meeting the various needs of people. Researchers have only begun to address issues relating to group treatment and gender and are calling for further research (Halas, 1973; Aries, 1976; Eskilson and Wiley, 1976; Carlock and Martin, 1977; Piliavin and Martin, 1977; Ridgeway and Jacobson, 1977; Walker, 1981; Martin and Shanahan, 1983; Bernardez and Stein, 1983; Stein, 1983; and Huston, 1986).

5.   The study of group therapy is relevant to working with contemporary social problems. One of the functions group therapy serves is similar to that of the "extended family," which historically provided support, help, friendship, healing, and a sense of "togetherness" for a person working through the vicissitudes of life's traumas and exhilarations. Our highly transient society and the increasing divorce rate, resulting in families becoming split, apart have created a lifesytle in which extended family members are not available as they were before the post World War II era. Thus, finding a consistent support system or dependable selfobjects to help one through difficult situations is necesary for sound mental health

functioning. Group therapy can provide such an environment for "meaningful relation" (Krill, 1978, p. 100).

6. Absence of empirical work in this subject prevails, especially with non-student samples in psychotherapy-oriented groups. Previous research gives little consideration to such client variables as 1) presenting problem, 2) socio-economic class, 3) race/ culture, 4) religion, 5) occupational status, 6) willing members or court-ordered members, 7) marital status, and 8) parental status. Hypothesis-testing in this subject area is relatively non-existent, as is consideration for the setting (agency-based or private practice) and specific characteristics and/or variables of the group leader.

7. One might ask why this research attempts to work with both "micro" (analytic) and "macro" (sociological) theory. This study is based on the assumption that how people traverse their paths through life, how they are able to interact with others, how they interpret their sense of selves and acquire meaningfulness, is dependent upon the tenets of both philosophies. Parsons (1952, p. 20 - 21) writes that "it is possible to establish direct relations between psychoanalysis and sociology, (and that) it is the (mutual) interaction of personalities (which) creates the common culture - that is, a shared system of symbols, the meanings of which are understood on both sides with an approximation to agreement." How the culture of a group

evolves, and therefore the meaning this culture has for each participant, intrapsychically and interpersonally, can in some part be studied by examining the themes that arise between the members. As Blumer (1969, p. 47) notes, "symbolic interactionism is a down-to-earth approach to the scientific study of human group life and human conduct."

Finally, Homans (1950, p. 453) states that "there is still only one sufficient reason for studying the group: sheer beauty and the delight in bringing out the formal relationships that lie within the apparent condition of everyday behavior."

Thus, if social group workers wish to practice effectively, we need to engage in the empirical process. By building theory, we can begin to understand and appreciate what it is we do and how it works. This study identifies themes and affective states among two men's and two women's groups in agency-based settings. It seeks to examine empirically what men and women talk about, what they feel, and what they talk about feeling in each of their groups. It then discusses whether or not these findings reflect gender-identity development theory and begins to address gender-specific theory for treating problems considered gender-related.

Therefore, the purpose of this research was to begin seeking some answers regarding the efficacy of gender and group work treatment. As Huston (1986, p. 290) states,

"Feminists must move from presenting theory alone to validating their theoretical positions. Then the insights and improvements that feminism may have to offer the field of group psychotherapy will result in true benefit for women as group members."

CHAPTER II

LITERATURE REVIEW

Identity Development

Psychodynamic Literature

Traditional psychodynamic theory states that one of the main tasks involved in identity development is for the person to eventually separate and individuate emotionally and physically from his primary caretakers. Once this has been achieved, he can begin to form his own sense of self and become a mature adult (Erikson, 1950; Mahler et. al., 1975; and Mahler, 1986).

Within the last 15 years, a body of knowledge has emerged which holds that this theory is applicable for men, but not for women. Feminist literature and research suggests that women's morality is organized around notions of care and responsibility for others. They also note that women's identities and senses of self evolve within a context of their relationships with others, with whom they are interconnected and attached, and whom they care for, throughout their life cycles (Chodorow, 1974; Miller, 1976; Gilligan, 1982; Lyons, 1983; Surrey, 1985; Belenky et.al. 1986; Oakley, 1987; Siegel, 1988; and Berzoff, 1989). One of the main analytic arguments for this difference is a

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result of what intrapsychically occurs for children during
the pre-oedipal and oedipal periods of child development.
Boys gradually come to realize they must establish an
identity separate from and different than their mother's
(generally the primary caretaker) in order to develop a
masculine identity or sense of self. For boys, taking on
the masculine role can become problematic, since the young
boy needs to detach from the nurturing relationship to which
he has become accustomed, and then seek out a male role, an
example of which, in traditional relationships, is
considerably less available on a daily basis. Selfhood,
therefore, arises out of internalizing components of the
masculine identity. These components reflect a subtle and
gradual process of emotionally distancing, detaching,
individuating, and becoming divided from his primary
affective relationship (Chodorow, 1977; Philipson, 1985).

Girls, however, remain attached with and related to
their primary caregiver, and it is through this
identification with the mother that girls come to understand
what the feminine self entails. The female role and the
activities that define that role are immediately available
to a girl on a daily basis. Thus, gender identification is
continuous throughout her infancy and early childhood.
Femininity, therefore, arises out of the gradual process of
remaining connected with her primary affective relationship.
(Chodorow, 1974; Rosaldo, 1974; Gilligan, 1982; Philipson,

1985; and Wood, 1986).

As adults, men are rewarded for being autonomous and independent, which are usually equated with the notions of strength, power, and prestige (Siegel, 1988). These types of traits, in fact, attract relationships for men, either personally or professionally. Women, however, are threatened with the loss of their affiliations for exhibiting these qualities by people who will not "tolerate a self-directed woman" (Miller, 1976, p. 95). Women are told they are being selfish when they display or express concern, thoughtfulness and care for themselves (Eichenbaum and Orbach, 1983).

Instead, women's lives continue to reflect attunement to and responsibility for the needs of others. This role in the life cycle is seen as a weakness in character development instead of a sign of human strength. Dependency is seen as immature and even pathological (Siegel, 1988). Miller notes that men "are forced to turn off those naturally responsive parts of themselves. It is not that boys are not attuned to others and that they cannot sense others needs. It is that they are systematically encouraged to dampen their responses...To do so is feminine. It is not being a man" (Miller, p. 72).

Empathy, or "the capacity to think and feel oneself into the innner life of another person" (Kohut, 1984, p. 82) becomes a central element for women to accrue for

maintenance of their relationships. Empathic understanding is seen as a major focus of a woman's development of the experience of the self (Surrey, 1985).

> Self-esteem, then, becomes related to the degree of emotional sharing, openness and a shared sense of understanding and regard. This sense may be nearly impossible to achieve totally, especially in a culture which stresses separation as an ideal, and in which validation of the need for relationship may become distorted and hidden. For women, guilt and shame often become tied to the experience of failure in mutual empathy. That is, women suffer if they feel they have not participated in relationships in this way...(Surrey, 1985, p. 6).

Gilligan succinctly captures the essence of how this issue has affected traditional psychoanalytic thinking regarding women's psychological development.

> The quality of embeddedness in social interaction and personal relationships that characterizes women's lives in contrast to men's, however, becomes not only a descriptive difference but also a developmental liability when the milestones of childhood and adolescent development in the psychological literature are markers of increasing separation. Women's failure to separate then becomes by definition a failure to develop (Gilligan, 1982, p. 9).

Recent developments in psychodynamic theory have now validated an early human striving for interpersonal connectedness and the basic human need for staying attached to and being attuned with others throughout one's life (Kohut, 1971, 1984; and Stern, 1986). Self-psychology posits that the self-selfobject matrix is a necessary component for people to remain embedded in a lifelong network of human relations and that "a move from dependence (symbiosis) to independence (autonomy) in the psychological

sphere is no more possible, let alone desirable, than a corresponding move from a life dependent on oxygen to a life independent of it in the biological sphere" (Kohut, 1984, p. 47).

Therefore, it is interdependence, rather than autonomy, that is considered to be a major developmental achievement of a mature adult (Gardiner, 1987). Daniel Stern's voluminous research and documentation regarding the "Interpersonal World of the Infant" (1986) also confirms this current theory of human psychological development. He goes further by attempting to revolutionize our way of examining and treating human affective problems. Stern states that we need to disengage ourselves from relying on human issues being related to any one particular stage, e.g., trust, dependence, autonomy, orality, etc. Instead, he believes that the intrapsychic issues people are confronted with are "issues for life, not phases of life" (Stern, p. 245). He postulates instead that there are four specific "domains of the senses of the self" in which the task of human development is to gradually learn how to interconnect and remain related to others throughout life.

Anthropological and Symbolic Interaction Literature

The group therapy environment is an appropriate avenue to investigate identity development utilizing symbolic interaction theory. One's role and identity in relation to other group members emerges via the interactions with

others. "The self is essentially a social structure, and it arises in social experience" (Mead, 1934, p. 140).

In her theoretical overview, Rosaldo (1974) cites numerous cross-cultural studies that reflect a similar notion of attachment and relatedness in regard to women's roles, which ultimately contribute to and shape one's identity. From the Tuareg in Central Africa, a camel-herding tribe, to many parts of the Arab world, to areas of Indonesia and New Guinea, women's lives are subject to the needs of their children and "are marked by neither privacy nor distance...(such as those of the men)... They are embedded in, and subject to, the demands of immediate interactions. Women, more than men, must respond to the personal needs of those around them..." (Rosaldo, pp. 27-28). Thus, throughout our world, it is women who have primary reponsibility for the nurturing and caretaking of children during most of their lives, which requires women to be responsible for and remain connected to others.

In addition, the 1986 British Sociological Association Conference addressed the issue of an individual's progression through life, including its impact on men and women, by comparing the traditional notion of life stages (psychological) with a life-course (anthropolgical-sociological) perspective. This life - course understanding emphasizes the continual inter-relationships of a woman and her family, the cycle of events that contribute to each

transition, and the resources available during each cycle (Allat and Keil, 1987).

Chodorow (1974) and Oakley (1987) describe how this development and awareness of a women's relations to the world are affected by her biological life cycle. Simply put, women menstruate, become pregnant, give birth, lactate, and go through menopause - all of which relate to reproduction, and therefore, caring for others. Men have nothing similar which biologically permeates their life cycle and contributes to their identity development. Thus, "the determinism of biology and its cultural management is more pronounced for women than for men" (Allat and Keil, p. 3).

Symbolic interactionists believe that gender identity emerges out of social interaction with the significant people in a person's life. How people acquire a sense of meaning for themselves arises through a process of interaction with other people. Being female, therefore, is a social definition that is learned via the responses of others to a girl's behavior and how she projects her sense of self. This self eventually is capable of viewing her actions from both her own point of view and that of others (Blumer, 1969; Goffman, 1977; Deegan and Hill, 1987; and Cahill, 1987). "The self is essentially a social structure, and it arises in social experience" (Mead, 1934, p. 140). This social experience for a young girl contains messages

around her being fragile, weak, gentle, emotional, and dependent.

Once this gender identity emerges, the girl becomes an active agent in her own gender development. This identity will need to be confirmed in various interactional situations if it is to remain stable. The girl must eventually learn to express her gender and behave in ways that will be interpreted as "normal" for a woman. By behaving in this manner, the woman will elicit gender - identity - confirming responses from those with whom she interacts (Cahill, 1987).

A woman is addressed and identified by others with reference to those to whom she is attached. She is, therefore, identified as a daughter, a wife, a sister, and a mother. These nurturing roles and the behavior she is expected to exhibit are a result of her interacting with her father, her husband, her brother, and her sons and daughters who transmit their expectations of her role through her interactions with them (Goffman, 1977).

Therefore, our society has socialized its members to transmit the values, norms, and expectations of womanhood around issues of caring for, nurturing, and being responsible for others' welfare. The definitions of being a woman and her place in the home, family, the marketplace, and everyday life are interpreted accordingly (Deegan and Hill, 1987). As Goffman (1977) notes, "Sex (gender) is at

the base of a fundamental code in accordance with which
social interaction and social structures are built," which
therefore lead to different experiences and interpretations
of the world and ultimately to different personalities
(Tresemer, 1975, p. 310).

For a young boy, interactions with people create a
sense of self that reflects what our society deems
"masculine." These traits include being powerful, in
control, aggressive, strong, competitive, independent, and
commanding. The boy identifies with his masculine self by
engaging in activities which provide for the expression of
these traits.

For the most part, these activites can be seen daily in
the area of professional sports, where many sports figures
command million dollar per year salaries and have become
the present day American heros. By behaving in competitive
play, boys elicit gender identity confirming reponses, not
only from those with whom they interact, but from men on the
Wheaties and Cheerios cereal box covers and beer commercials
which support professional sports.

Consequently, our society has socialized its members to
transmit the values, norms, and expectations of manhood
around issues of strength, independence, competition, and
power. These traits are certainly seen in what our society
deems "the successful man."

Thus, one can argue that there is sufficient evidence

and rationale to support the notion that women psychologically and socially define their "selves" in terms of their relationships and the people with whom they maintain connections. This is considerably different from the male experience. It is therefore important to examine the underpinnings of these phenomena and to consider them worthwhile subjects to study in the social group work treatment setting.

Group Treatment Literature

General Information

An examination of the literature regarding group treatment reflects a different evolution between men's and women's groups, due in part to the feminist movement. Initially, men and women were grouped together with little consideration for gender-related issues (Mowrer, 1964; and Lieberman, Yalom, and Miles, 1973). Mowrer reported approximately 265 "self-help" groups in America in 1961, which included such organizations as Alcoholics Anonymous; Recovery, Inc.; etc. Groups whose names were preceded by such words as "encounter," "psychodrama," "sensitivity training" and "T-groups" were all popular and had their specific purposes (Yalom, 1970).

Beginning in the 1960s (and through the 1970s) a general mistrust of the traditional male-oriented psychodynamic model of therapy emerged (Miller, 1971; Chesler, 1971; Chesler, 1972; Barrett, et.al., 1974; and

Mintz, 1974).

The traditional perspective gave way to models reflecting consciousness-raising (Brodsky, 1973; Eastmen, 1973; Follingstad, et. al. 1977; Gerson, 1974; Gornick, 1971; Kincaid, 1973; Kirkpatrick, 1975; Kirsh, 1974; Mander and Rush, 1974; Kravetz, 1976; and Bond and Lieberman, 1980) and self-help groups (Glaser, 1976; Kaplan, et. al., 1976; Silverman, 1970; Silverman and Cooperband, 1975).

The goals of these groups reflected the contemporary feminist movement of politicizing and empowering women. The core issues were for women to learn to appreciate their own contributions to society; to provide an atmosphere of safety, trust, and empathic regard highlighting development of interpersonal relationships; and to gain a positive sense of self.

The emphasis here was on promoting the notion that "the personal is the political" by examining shared experiences in issues that were specifically related to women, i.e., motherhood, widowhood, relationships with men, job discrimination, overt sexism in the workplace and in society's institutions, single-parenthood, sex-role socialization, etc. These models viewed therapy not from a pathological stance, but rather from an appreciation of the secondary status women held in society and the social, emotional, political, and economic ramifications of that status.

The literature on women's groups during the 1980s shows a gradual shift from interpersonal issues to therapy groups organized around specific problem areas (Johnson, 1987). These topics include sexual dysfunction (Vanderdoes and Vanderpool, 1978; Murphy, et. al. 1980; and Cotten-Huston and Wheeler, 1987) generalized depression (Hedrick, 1978; Gordon, 1982; LaPointe and Rimm, 1980; and Haussman and Halseth, 1983), chronically profound and disturbed women (Alyn and Becker, 1984), female offenders (Wilfrey, 1986), anger (Hotelling and Reese, 1983; and Gettle, 1986), divorce (Coche and Goldman, 1979), partners of Vietnam veterans (Harris and Fisher, 1985), eating disorders (Kearney-Cooke, 1985; Katzman, et.al., 1986; O'Neill and White, 1987; and Hotelling, 1987), chemical dependency (Farid-Basem, et. al., 1986), low-income mothers (Burmagin and Smith, 1985), premenstrual syndrome (Reed, 1987), being part of a minority culture (Nayman, 1983; Comas-Dias, 1984; Olarte and Masnik, 1985; and Trotman and Gallagher, 1987) and incest survivors (Bonney, et. al., 1986; Cole and Barney, 1987; and Sprei, 1987).

In contrast, mens-only groups have been lacking in both number and substance during this same time period. It is true that Alcoholics Anonymous, beginning in the 1930s, could be recognized as probably one of the first self-help groups with a national following whose members were, for the most part, men. However, in perusing the literature,

there is an obvious dearth of men utilizing group therapy as an option for emotional/psychological assistance. Stein (1983) believes this is a result of the aggression and competition with which men present in small group communication and because fewer men (than women) seek psychotherapy. He notes that the interactive traits dominant in this modality for men include domination, interruption, condescension, aggression, and lack of empathy and respect for each other. Finally, he states that there is little information regarding men's groups in the mental health field which creates a sense of unfamiliarity regarding this approach for treatment.

Like women's groups now, however, men also tend to meet in groups along significant themes in their lives. These include sexual dysfunction (Zilbergeld, 1975; Christensen and Levine, 1978; Lobitz and Baker, 1979; and Reynolds, 1981), alcoholism (Tomsovic, 1976), bisexuality and marriage (Wolf, 1987), depression (Fetsch and Sprinkel, 1982), being partners of assault victims (Cohen, 1988), roles and identity issues (Croteau and Burda, 1983), Vietnam war experiences (Scurfield, et. al., 1984), offenders and/or parolees (Golderberg and Cowden, 1977) and men who are abusive and batter (Koval, et. al., 1982; Bernard and Bernard, 1984; Edelson, et. al., 1985; Saunders, 1986; Rosenbaum, 1986; Jennings, 1987; and Edelson and Syers, 1990).

Mixed-gender groups

An early piece of significant field research was Kanter's (1977) work regarding the effects of group life on "token" saleswomen in work situations with their peer salesmen. She found that women had difficulty being accepted as peers, had to work twice as hard in order to prove their competence, and were given mixed messages as to whether or not their aggressive behavior was appropriate "for a woman". Women were objects of sexual attraction and innuendos and were reminded of their status as "outsiders." This work provided an interesting validation from an organizational perspective of the research being done in social work and psychology regarding men's and women's small group interactions.

This literature reported that in mixed groups, women talked less of home and family (Aries, 1976) and were competing for male attention and approval, (Carlock and Martin, 1977; Aries, 1976) and therefore did not develop the closeness for each other seen in all - women's groups (Walker, 1981). Women were reluctant to assume leadership over males or to see themselves as leaders (Megargee, 1969; Eskilson and Wiley, 1976), and thus assumed the role of the observer (Carlock and Martin, 1977). Also, women talked less than men and were influenced by, dominated by, and interrupted considerably more often by men (Ridgeway and Jacobson, 1977; Aries, 1976; Spender, 1980; Walker, 1981;

Martin and Shanahan, 1983). When women did interrupt men,
they were considered to be rude or "bitchy," whereas men
were not (Spender, 1980). Finally, Carlock and Martin
(1977) observed that women became somewhat more
task-oriented in mixed-groups rather than in all-female
groups, which can be considered either positively or
negatively, depending upon the type of group they are in,
i.e., task-oriented or insight-focused.

All-Women's groups

Halas (1973) and Gordon (1982) reported that similar
themes were identified regardless of the presenting
problems of the women. These included feelings of
isolation, alienation, worthlessness, loneliness,
frustration regarding their sanctioned roles, helplessness,
low self-esteem, and pressures of caring for elderly
parents. Women reported the need to share feelings and get
support; experienced depression, anxiety, and anger with
respect to dependency on husbands; and feared being
considered failures as mothers. It is interesting to note
that many of these themes are along the lines of female
identity, i.e., caring for others, relationships, and
interpersonal attachments.

Further research in all-women's groups compared with
women in mixed groups showed that women in women-only groups
provided emotionally for the needs of others and engaged in
socioemotional behaviors (Eskilson and Wiley, 1976; Piliavin

and Martin, 1978). Members showed little competitiveness and were more accepting of their own aggressive feelings (Carlock and Martin, 1977; Walker, 1981). When compared with mixed-gender or all-male groups, women displayed more cooperation; were more trusting, caring, and intimate; concentrated on relationship and affiliation issues (Walker, 1981); and shared feelings about friendships, families, home environments, and relationships with each other (Aries, 1976).

All-Men's Groups

Research has shown that men avoided emotional closeness (Aries, 1976), displayed behavior that exhibited more independence and autonomy from each other than was seen in mixed or all-female groups (Piliavin and Martin, 1977), and were highly competitive with each other (Aries, 1976; Bernardez and Stein, 1979, and Walker, 1981). Men concentrated significantly more on recognizing and asserting their leadership capabilities than was seen in all-women's groups (Eskilson and Wiley, 1976; Aries, 1976) and would engage in more task-oriented behavior than was observed in women's groups (Piliavin and Martin, 1978). A contradiction (perhaps due to the "higher consciousness" of the leaders in this area) of the above findings is found in two reports of groups with men who abused/battered their wives (Currie, 1983; and Buckley, et. al., 1983). The group leaders here noted that the men did relate information regarding

families, marriages, and jobs and expressed feelings of being hurt, guilty, weak, angry, frustrated, and dependent on their spouses. These men also felt a loss of control and self-respect; were confused; encouraged each other to openly discuss their lives; examined their own contradictions regarding appropriate sex-role behaviors; and reported a sense of loss when the groups ended.

Reported Gains

Aries (1976) reported that men gained from being in mixed groups, because they showed a significant decrease in competitive behavior and were able to discuss their feelings and display more interpersonal interaction, and because a higher percentage reported they looked forward to the mixed-gender group over the all-male group. However, a greater percentage of women reported looking forward to and enjoying the all-female group in comparison to those women who attended the mixed-gender group.

In contrast to Aries, Carlock and Martin (1977) stated that even though females reported a greater amount of "objective" personal growth in an all - women's group over that of women in a mixed group, members in the all - female group found the total experience less "exciting" than did women in the mixed group. Yet, women in the mixed group chose an all-female group if given a choice in the future.

Previous Research on Specific Topic

Research done by Megargee (1969), Aries (1976),
Eskilson and Wiley (1976), Ridgeway and Jacobson (1977),
Carlock and Martin (1977) and Piliavan and Martin (1978)
used students from undergraduate social sciences classes,
varying in number from 25 to over 300. Orientation in the
group setting was task-focused, except for Carlock and
Martin (1977), who held marathon weekend sessions to
examine male and female relationships. All studies used
audio or video tapes for obtaining the data, except that of
Carlock and Martin (1977), which used self-reporting
instruments. Control of the above - listed variables was
not particularly noted nor highlighted as significant to the
research, although the samples used were university
students, with two studies specifying an all-white
membership (Eskilison and Wiley, 1976; Piliavin and Martin,
1978).

Of the reported studies discussed in this paper that
were conducted with adults (30-60 years of age), only one
attempted to make comparisons between male and female groups
(Bernardez and Stein, 1979). These therapists compared
three all-women's groups with three all-men's groups, whose
clients were 30 - 48 years old, presented for depression,
were referred by their therapists or other persons who had
knowledge of the groups, and were interested in working on
interpersonal relationships. These groups met once per week

over a nine-month period and were either audio or

videotaped. Nothing is reported, however, regarding

instrumentation, nor do the authors state exactly what they

were attempting to examine, other than reporting their own

impressions and thoughts on the differences between men and

women in group processes. They recommended "further

examination" of these differences, including themes and

content in the groups.

Of the six studies which controlled for the presenting

problem of their adult clients, four groups had clients

presenting with depression of the non-psychotic type

(Bernardez and Stein, 1979; Gordon, 1982; LaPoint and Rimm,

1980; and Comas-Diaz, 1984). These groups had subjects who

were varied in marital status, except Comas-Diaz (1984), and

focused on therapy, rather than task production.

The two remaining discussions of groupwork with

adults, Currie (1983) and Buckley, et. al., (1983), reported

on their work with males presenting for abusive and violent

behavior towards their spouses or significant others. These

groups met weekly and were described as task- oriented

towards reducing their clients' violent behavior. However,

after careful analysis, it is obvious these groups were

therapeutically designed to allow the participants to

discuss their feelings and gain insight into the origins of

their behavior, along with decreasing their violent conduct.

The journal articles regarding these two groups were not

research-oriented; rather they were written by the social workers to discuss the process and efficacy of men's groups with this population.

Finally, Comas-Diaz (1984) studied the content themes with Puerto Rican women in group treatment. She was able to control not only for presenting problem, but also for race/cultural background, religion, marital status, parenting status, agency setting, and employment status. She audiotaped the five weekly 1 1/2 - hour sessions, which were scored by two independent raters. Eight women presented for treatment of depression at one community mental health center. They had a mean age of 36 years, were unmarried, had children, were Catholic, were originally from Puerto Rico and presently living in the United States, were unemployed, and received some form of governmental aid.

Summation of Research for this Specific Topic

Many of the findings regarding all-women's, all-men's and mixed-gender groups reflect the "status-characteristics /expectation states": evaluations that are based on gender enter group contexts as a result of generalized expectations and values learned in the external society regarding appropriate sex-socialized roles. It is not <u>because</u> of sex-role socialization that women and men behave and interact the way they do in these settings, but rather it is the context, or <u>situation and status</u>, in which they are placed that stimulates certain behaviors and expectations

associated with male and female social norms (Martin and Shanahan, 1983; Meeker and Weetzel-O'Neill, 1977). This reflects symbolic interactionism.

However, empirically validated research is too sparse, and it is too difficult to draw solid conclusions (Huston, 1986), particularly because the samples used were students (Megargee, 1969; Eskilson and Wiley, 1976; Piliavin and Martin, 1978; Aries, 1976) which limits the generalizability of the findings.

There is also disagreement among authors who have written overviews of the literature comparing women's and men's groups (Schubert, 1981; Martin and Shanahan, 1983; and Huston, 1986). Questions arise regarding whether or not all-women's groups have as yet been shown to be more beneficial clinically for women than mixed-gender groups. Huston (1986) raises concern about the scientific methodolgy in some of the above-mentioned research. She concludes that the quantitative research in this area is limited and flawed by lack of consistency between groups and criticizes the instruments used for possible threats to validity. Finally, few researchers have considered such variables as presenting problem, agency setting, client age, religion, culture/ ethnicity, socioeconomic status, employment, parental status, and marital status, which can have various effects on their methodology and findings.

What the authors do agree about is the need for

empirically based research to begin filling the gaps in our knowledge, especially with respect to groups patterned along such therapeutic models as psychodynamic, insight, or personal-growth orientation. Previous research in groupwork and gender has focused almost exclusively on groups which have been geared toward task orientation and/or combined with using a behavioral/cognitive model of groupwork. The research in this endeavor is geared toward examining content in psychodynamically therapy-oriented groups whose secondary focus in on behavioral change.

CHAPTER III

METHODOLOGY

Design

The primary purpose of this research is to begin
examining empirically how gender influences what clients
talk about and what clients feel in the social group work
treatment setting. This research follows an exploratory -
descriptive design. It is exploratory, in that the
researcher has not found any previous empirical work
specifically asking the questions that are addressed in
this study. It is descriptive, in that a small amount of
empirical work does exist regarding gender and group
process, along with many therapists "reporting" from their
perspectives what their group members have talked about or
how gender has influenced group interaction.

As an exploratory work, this study does not have a
stated hypothesis, yet is sensitive to emerging hypotheses
(Kahn, 1960, p. 58) regarding gender and group process.
Thus, the research is looking for a correlation between men
and what the literature reported regarding their identity
development and previous group process, and a correlation
between women and what the literature reported regarding
their identity development and previous group process. The

sample is one of convenience, and the study aims to develop strategies and derive hypotheses for further systematic research.

As in descriptive designs, this work begins to describe relationships between variables. Control of variables is not involved, although, in the spirit of experimental design, there is an attempt made to control for as many variables as possible. Statistical analyses include tests of significance while emphasizing reliability and validity issues of the instrument.

More specifically, within a descriptive design Finestone and Kahn (in Polansky, 1975) discuss explanatory surveys, whose design characteristics include the following four conditions: preconceptualization of variables, interest in causal relationships between and among variables, nonmanipulability of the causal variable, and existence of measurement techniques. "The basic logic includes the selection of a relevant population, a sampling strategy, a strategy for measuring variables, and strategies for data reduction and analysis" (Polansky, p. 51). This research conforms to these guidelines.

The secondary purpose of this research is to evaluate programs within agency settings. Agency - informed research guides practice and provides clinical analysis and implications for program development and client benefit. Kazdin (1986) raises methodological and design issues

regarding psychotherapy research conducted in clinical
trials. He notes that sacrifices and compromises with
respect to experimentation are often made to meet practical,
ethical, and administrative demands in the clinical setting.
These include 1) obtaining a sufficient number of clients
with the same or similar presenting problem and
demographics, 2) requiring control groups that withhold
treatment, 3) engaging therapists willing to participate in
the research and 4) generalizability of the findings to
other settings and caseloads.

This research assumes that one of the reasons our
field is lacking in clinical group research is because it is
nearly impossible to control for these numerous client
variables and, at the same time, attempt to think of
research "with a 'capital R' - i.e., random,
representative, and/or robust samples; rigorous
methodological controls; refined statistical operations;
and resplendent computer technology" (Dies, p.8).

In a monograph regarding group research and group
psychotherapy, Dies quotes Oetting's (1976) opinion that
all research, especially with groups, need not be along
these lines of strict inquiry:

> Scientific inquiry is aimed at the advance of
> scientific knowledge. There is little need for such
> research to be immediately useful or practical, but
> there must be great concern for making sure that any
> contribution that is made is stated as accurately as
> possible and that the exact relationship between
> independent and dependent variables is known.
> Evaluative research has a different purpose. It is

aimed at collecting data that will help in making
decisions about programs (Dies, p. 8).

Dies points out that Oetting sees evaluative research as
beneficial and more practical to treatment goals. Although
this method may not eliminate all crucial alternative
explanations of results, it will certainly reduce the number
of alternative interpretations of practical importance and
permit generalization to <u>similar</u> target groups.

Emerging Hypotheses

1. Men in the men's groups will report higher
frequencies than women in the women's groups in the
categories defined as "male themes, male feelings felt, and
male feelings discussed."

2. Women in the women's groups will report higher
frequencies than men in the men's groups in categories
defined as "female themes, female feelings felt, and female
feelings discussed."

Definition of Terms

1. Member - A client participating in social group
work treatment via an agency setting seeking services for
his/her presenting problem. "The fact (is) that in speaking
of member, one implicitly speaks of others, who are also
members" (Falck, 1988, p.30). Included in this, one also
infers that 1) the member's actions are socially derived and
contributory within the group setting and 2) the identity of
each member is enveloped with those of others through social

involvement (Falck, 1988).

 2. Worker - A master's - level trained
psychotherapist (M.S.W., M.A., or M.S.) who works for this
same agency and is recognized by the above-defined members
as the person(s) who attends to 1) the individual group
member's needs and behaviors, 2) the group as a whole, its
needs and processes, and 3) the environment in which the
group functions (Toseland and Rivas, 1984, p. 4). The
components of social work as membership activity within the
groups are task - relatedness, the use of knowledge about
social workers and clients, rationality, the conscious use
of self, and methodology regarding group practice principles
and process (Falck, 1988, p, 123).

 3. Treatment Group - Clients assembling together on a
weekly basis for purposes of meeting their socioemotional
needs via the leadership and guidance of (a) worker(s)
within a defined agency setting. Its purpose includes
changing the behavior of the client and/or teaching coping
skills and problem solving methods. Communication patterns
are open, the procedures are flexible depending upon the
member's needs, the clients present with similar life
problems, proceedings are confidential, self-disclosure is
expected, and evaluation is based on the members meeting
their treatment goals (Toseland and Rivas, 1984).

 The following nine categories comprise the focus of
attention in this study. The themes and feelings are drawn

from the above - stated literature and theory regarding gender identity development and what group workers have reported "seeing and hearing" in their own psychotherapy groups.

Items with an (*) are those taken from the "Group Therapy Session Report" (GTSR) (Howard and Orlinsky in Liebenthal, 1980). These items were not specifically gender - focused in the GTSR, however they were used extensively in that particular research. A discussion of the GTSR will follow under "Instrumentation."

4. Male Themes - items found on page two of the instrument corresponding to hypothesized themes characteristically defined as "male" or "masculine."

    a.   Having control over or dominating a situation
    b.   Not needing anyone to tell me what to do
    c.   Being able to persuade or infuence others
    d.   Having significant power over others
    e.   Being competitive with people (*)
    f.   Being confident about handling things myself

5. Female Themes - items found on page two of the instrument corresponding to hypothesized themes characteristically defined as "female" or "feminine."

    a.   Concern for other people's needs
    b.   Problems or feelings about being close to others(*)
    c.   My home or things around the house
    d.   My relationships with family members or friends
    e.   Feeling responsible for others' care or welfare
    f.   Having concerns about depending too much on others

6. Neutral Themes - items found on page two of the instrument corresponding to hypothesized themes characteristically belonging to both genders.

a. Romantic or sexual involvements (*)
b. Things that happened in my childhood or adolescence (*)
c. My boss or supervisors at work (*)
d. My plans or goals for the future
e. My social activities, interests, or hobbies (*)
f. Life experiences during my adult years

7. Male Feelings Felt - items found on page three of the instrument corresponding to hypothesized feelings characteristically defined as "male" or "masculine" which members report _feeling_ during the group session.

a. Aggressive
b. Capable
c. Competitive
d. Dominant
e. Independent
f. Powerful
g. Self-Confident
h. Strong

8. Female Feelings Felt - items found on page three of the instrument corresponding to hypothesized feelings characteristically defined as "female" or "feminine" which members report _feeling_ during the group session.

a. Dependent
b. Emotional
c. Helpless
d. Ineffective
e. Inferior
f. Lonely
g. Rejected (*)
h. Weak

9. Neutral Feelings Felt - items found on page three of the instrument corresponding to hypothesized feelings characteristically belonging to both genders which members report _feeling_ during the group session.

a. Angry (*)
b. Anxious (*)

c.   Bored   (*)
d.   Depressed   (*)
e.   Good
f.   Guilty   (*)
g.   Relieved   (*)
h.   Sad   (*)

10.   Male Feelings Discussed - items found on page four of the instrument corresponding to hypothesized feelings characteristically defined as "male" or "masculine" which members report <u>talking about</u> during the group session. These eight items are the same as above in "male feelings felt."

11.   Female Feelings Discussed - items found on page four of the instrument corresponding to hypothesized feelings characteristically defined as "female" or "feminine" which the members report <u>talking about</u> during the group session.   These eight items are the same as above in "female feelings felt."

12.   Neutral Feelings Discussed - items found on page four of the instrument corresponding to hypothesized feelings characteristically belonging to both genders which members report <u>talking about</u> during the group session. These eight items are the same as above in "neutral feelings felt."

<u>Questions</u>

1.   How frequently and to what degree are the identified male, female, and neutral themes discussed in three sessions in the men's groups and the women's groups?

2. How frequently and to what degree are the identified male, female, and neutral identified affective states felt in three sessions in the men's groups and the women's groups?

3. How frequently and to what degree are the identified male, female, and neutral affective states discussed in three sessions in the men's groups and the women's groups?

4. Are the gender themes and affective states responses similar or different for the men and women in the treatment groups?

5. To what does one attribute these similarities and/or differences?

6. Is gender - identity development theory reflected in these specific social group work treatment settings?

Instrumentation

Previous use in group research

Anderson notes that instrumentation in social group work can assist the field in combining research and practice and serve as feedback for the social worker and group members regarding group process. (Anderson, 1986, p. 115). The self-reporting instrument by group participants has been used frequently for these purposes. Dies documents over 75 investigations regarding group research which have used self-reporting measures during the 1970s (Dies, 1983, p. 29). Anderson notes the value of this type of

instrumentation:

  1) encourages member involvement in the group
  process, 2) fosters open reaction to personal
  feedback, 3) clarifies member's goals and
  facilitates contracting for new behavior, 4)
  increases the objectivity of measuring member
  change, 5) provides for comparison of individual
  members, especially in treatment or therapy
  groups..., 8) gives members a sense that their
  worker is committed to effective work or treatment,
  9) improves communication between members and
  workers..., and 12) provides members some cognitive
  frameworks for understanding their group experience
  and transferring learning to their life situations
  outside of the group (Anderson, p. 115, 1986).

Therefore, instrumentation in this study is designed as a
self-reporting measure, given to each group member on three
separate occasions, after participating in a group therapy
session. This research adapted the Group Therapy Session
Report Questionnaire (GTSR) (Liebenthal, 1980). It is a
self-reporting instrument including a checklist of topics
discussed, asking group members to note their responses to
questions after a group session. The GTSR was initially
adapted from the Therapy Session Report Questionnaire (TSR)
which has been used extensively in research by its authors,
David E. Orlinsky, Ph.D, University of Chicago, Department

of Psychology and Kenneth I. Howard, Ph.D., Northwestern University, Department of Psychology (Orlinsky and Howard, 1975). Part of the GTSR was also used by Albert M. Eng, Ph.D., M.S.W., for research in group therapy with women recovering from mastectomies (1985).

Development for this research study

For purposes of this research, the name of the instrument is the <u>SOCIAL GROUP WORK REPORT (SGWR)</u> (see Table 1, following page and Appendix). The Likert scale format followed sections of the GTSR used by Eng and Liebenthal. The second page is designed to answer question one of this study. Eighteen themes, or topics people talk about in group therapy, are examined. Items 1, 6, 9, 10, 14, and 18 are typically female themes according to feminist theory and previous group work with women as reported above in the literature review. Items 3, 5, 7, 12, 15, and 16 are typically male themes according to gender theory and previous group work with men as reported in the literature review. Items 2, 4, 8, 11, 13, and 17 are items typically not gender focused. Items 2, 4, 6, 8, 13, and 15, are drawn from the GTSR in Liebenthal's work.

Page three is designed to answer research question two, and page four is designed to answer research question three of this research. These affective states, or feelings, are male and female gender-focused, again, according to gender theory and/or what the literature has

TABLE 1

SOCIAL GROUP WORK REPORT

These papers contain a series of questions about the group session which you have just completed. The questions have been organized in sets of three so that they are easier to read, and make the description of your experiences in the group simple and quick.

Please answer all the questions. This should take no longer than 15 mintues. Thank you for your help and cooperation.

Name(s) of Social Worker_____

Social Security Number or Code Word_____

Date of Session_____

On a scale between 1 and 5, circle the number that best answers your opinion for each question, with # 1 being "not at all" and # 5 being "a lot".

QUESTION # A.

WHAT <u>TOPICS</u> OR <u>SITUATIONS YOU HAVE BEEN IN</u>, DID YOU DISCUSS IN THIS GROUP SESSION?

		NOT AT ALL...............A LOT				
1.	Concern for other peoples' needs	1	2	3	4	5
2.	Romantic or sexual involvements	1	2	3	4	5
3.	Having control over or dominating a situation	1	2	3	4	5
4.	Things that happened in my childhood or adolescence	1	2	3	4	5
5.	Not needing anyone to tell me what to do	1	2	3	4	5
6.	Problems or feelings about being close to others	1	2	3	4	5
7.	Being able to persuade or influence others	1	2	3	4	5
8.	My boss or supervisors at work	1	2	3	4	5
9.	My home or things around the house	1	2	3	4	5
10.	My relationships with family members or friends	1	2	3	4	5
11.	My plans or goals for the future	1	2	3	4	5
12.	Having significant power over others	1	2	3	4	5
13.	My social activities, interests, or hobbies	1	2	3	4	5
14.	Feeling responsible for other's care or welfare	1	2	3	4	5
15.	Being competitive with people	1	2	3	4	5
16.	Being confident about handling things myself	1	2	3	4	5
17.	Life experiences during my adult years	1	2	3	4	5
18.	Having concerns about depending too much on others	1	2	3	4	5

These responses are in alphabetical order. Please give an answer to each of them.

QUESTION # B: DURING THIS SESSION I <u>FELT</u>:

		NOT AT ALL.........................A LOT				
1.	Aggressive	1	2	3	4	5
2.	Angry	1	2	3	4	5
3.	Anxious	1	2	3	4	5
4.	Bored	1	2	3	4	5
5.	Capable	1	2	3	4	5
6.	Competitive	1	2	3	4	5
7.	Dependent	1	2	3	4	5
8.	Depressed	1	2	3	4	5
9.	Dominant	1	2	3	4	5
10.	Emotional	1	2	3	4	5
11.	Good	1	2	3	4	5
12.	Guilty	1	2	3	4	5
13.	Helpless	1	2	3	4	5
14.	Independent	1	2	3	4	5
15.	Ineffective	1	2	3	4	5
16.	Inferior	1	2	3	4	5
17.	Lonely	1	2	3	4	5
18.	Powerful	1	2	3	4	5
19.	Rejected	1	2	3	4	5
20.	Relieved	1	2	3	4	5
21.	Sad	1	2	3	4	5
22.	Self-Confident	1	2	3	4	5
23.	Strong	1	2	3	4	5
24.	Weak	1	2	3	4	5

These reponses are also in alphabetical order. Please
answer each of them. Note how this question is <u>different</u>
than the one you just completed.

QUESTION # C: DURING THIS SESSION I <u>TALKED ABOUT</u> FEELING::

                        NOT AT ALL.........................A LOT

1.	Aggressive	1	2	3	4	5
2.	Angry	1	2	3	4	5
3.	Anxious	1	2	3	4	5
4.	Bored	1	2	3	4	5
5.	Capable	1	2	3	4	5
6.	Competitive	1	2	3	4	5
7.	Dependent	1	2	3	4	5
8.	Depressed	1	2	3	4	5
9.	Dominant	1	2	3	4	5
10.	Emotional	1	2	3	4	5
11.	Good	1	2	3	4	5
12.	Guilty	1	2	3	4	5
13.	Helpless	1	2	3	4	5
14.	Independent	1	2	3	4	5
15.	Ineffective	1	2	3	4	5
16.	Inferior	1	2	3	4	5
17.	Lonely	1	2	3	4	5
18.	Powerful	1	2	3	4	5
19.	Rejected	1	2	3	4	5
20.	Relieved	1	2	3	4	5
21.	Sad	1	2	3	4	5
22.	Self-Confident	1	2	3	4	5
23.	Strong	1	2	3	4	5
24.	Weak	1	2	3	4	5

D. HOW DO YOU FEEL, IN GENERAL, ABOUT THE GROUP SESSION WHICH YOU HAVE JUST COMPLETED? (Circle the one answer which best applies.)

THIS SESSION WAS:

Terrible   Poor   Okay   Very Good   Excellent

E.   HOW MUCH DID YOU TALK IN THE GROUP THIS SESSION?

Not at all   Not a lot   Some   Pretty Much   Very much

F.   WHAT SUBJECTS OR TOPICS DID YOU PERSONALLY INITIATE IN
       THIS SESSION?

G.   WHAT SUBJECTS OR TOPICS DID THE WORKER INITIATE IN
   THIS SESSION?

Thank you very much for your help. Please make sure you have answered all the questions.

reported as being generally male and female identified.
The male items are "aggressive, capable, competitive,
dominant, independent, powerful, self-confident, and
strong." The female items are "dependent, emotional,
helpless, ineffective, inferior, lonely, rejected, and
weak." The neutral items are drawn from the GTSR, with the
exception of "good." These affects are generally seen in
clients presenting for treatment regardless of gender.
Besides "good," they include "angry, anxious, bored,
depressed, guilty, relieved, and sad."

The final page of the instrument is added in order to
address significant information arising in the clinical
situation which could considerably influence the responses
to the instrument's questions, thus raising issues of
validity and/or reliability. For example, if a crisis
occurred for the group or a group member during the
previous week and was discussed in the session being
reported on, it would have an impact on the responses of the
members. If a member reported not "talking at all," yet
responded by circling a "2, 3, 4, or 5" on any item in
question 3, including that entire particular instrument in
the data analysis would be a significant threat to validity
and reliability. Also, if the group members consistently
reported that the worker initiated many of the topics of the
sessions, i.e., if the topics of the sessions were decided
upon by the worker, one would question the value of the

members' responses to the first question in this research, and of course, influence the responses to the remaining questions.

Finally, one needs to consider that the data was collected via a self-reporting measure from each group member, i.e., an individual being treated as a single unit. The total group experience itself was not being examined and therefore this instrument could have been applied to either individual and/or family therapy also.

Pre-testing procedures

The instrument was pre-tested on two groups of women in agency settings, one group of men via a private practice setting, and with two married couples. The first group of women (N=5) presented with issues around being single mothers. Their group met for ten weeks, with the instrument being admnistered after the second and eighth sessions. This pre-testing was conducted during July and August, 1989. The second group of women had members who presented with being victims of domestic violence (N=7). Their group met for twelve weeks, with the instrument being administered after the second, third, and sixth sessions, during September and October, 1989. Both groups were led by a female M.S.W. social worker.

The men in group therapy via private practice were victims of childhood abuse (N=6). The group met for sixteen weeks, with the pre-testing being conducted after the

third, sixth, and eleventh sessions during August and September, 1989. The co-leaders included a female M.S.W. social worker and a male working towards his M.A. in counseling psychology.

The researcher met with each of the above workers for approximately an hour to an hour and a half, explaining the procedures for administering the instrument. With the first women's group, the researcher conducted the administration, having received permission previously from the group members and worker to do so. The remaining administrations were conducted by the workers only.

The pre-testing proved extremely valuable. On the whole, the instrument was understood and the group members had relatively few problems in responding to the questions. Minor changes for the final instrument were made with respect to the "line spacing" of the items and the phrasing of the questions for purposes of clarity.

A final pre-testing procedure was conducted two to three weeks before the actual research was to begin. Questions were raised specifically by two social work researchers regarding whether or not the sample obtained for the actual research was "too gender -laden," i.e., families presenting with issues of family abuse and incest. They noted that the instrument did not address the specific problems for which the clients were in treatment and questioned the "truthfulness" of the male reponses, given

their own research knowledge and experiences with men who are perpetrators of domestic abuse and/or incest.

In order to address this issue, the researcher admininstered the instrument to two married couples, each in the privacy of their own homes. They were "graduates" of Agency 1's program (identified below), and as part of their treatment had been through the group therapy component. They were informed that their feedback was needed on a questionnaire being given to clients who were presently in Agency 1's group program. The researcher asked them to remember a particular group session they had been in and respond to the instrument accordingly.

After completing the questionnaire, the four adults were asked if they had any problems understanding or responding to the questions. All four replied "no." They were then questioned regarding the precise issue, i.e., whether they felt they could "deceive" or "manipulate" their answers because the items on the instrument did not specifically address abuse or incest. Both men reported that the instrument was easy to answer because it was non-judgmental, i.e., there were no items refering to abuse or incest. One of the men believed that if there were any items addressing abuse or incest, it "could cause blocking to finish the questionnaire and color the answers." The other man reported that "some people may give favorable answers and deny" because they have been used to doing that

most of their lives.

The four also noted that the last page provided for their own answers regarding the topics discussed in the session, which would address the abuse and incest issues. One wife reported that it was "a very safe" questionnaire that allowed her the freedom to "just think about the question and not worry about what someone might think about me."

Reliability

Reliability refers to how consistent an instrument is in terms of the items being measured, i.e., "whether the individual items of a measure are consistent with each other; whether scores are stable over time; and whether different forms of the same instrument are equal to each other" (Corcoran and Fischer, p. 14, 1987). Basically, it examines how well whatever is being measured is measured and asks how close we can come to finding the same results if we administer the measure numerous times (Polansky, 1975). Reliability is concerned with the dependability, consistency, stability, accuracy, and predictabilty of the instrument (Kerlinger, 1986).

Reliablity concerns internal consistency, i.e., how well the items in the instrument are all examining a similar aspect in the research, or how well the items correlate with or are associated with each other (Corcoran and Fischer, 1987). An analysis for this procedure is Cronbach's

coefficent alpha (Corcoran and Fischer, 1987) which is a statistic reflecting the amount of association between variables. It examines whether or not items in an instrument are tapping a similar domain. The instrument was constructed by grouping sixty-six items in nine categories, assuming six categories tapped a particular domain reflecting gender theory. Also, no restrictions regarding sampling and level of data are reported for Cronbach's alpha. Thus, this statistic was deemed appropriate.

Carmines and Zeller (1979) note that Cronbach's alpha (see Table 2, following page and Appendix) is a popular measure of internal consistency, regarding reliabilty of the instrument. It can estimate the reliability of each variable and use these estimates "to determine what the correlation between the two variables would be if they were made perfectly reliable" (Carmines and Zeller, 1979, p.48). Therefore, this study attempts to explore the degree to which the identified items in each category can be classified accordingly, i.e., to what degree one can expect to find all six items under male themes highly correlated with each other. It is suggested (Corcoran and Fischer, 1987; Carmines and Zeller, 1979) that a satisfactory level of .80 be used, however one cannot specify a single level for all situations.

Among the total sample, the findings suggest that two

TABLE 2

CRONBACH'S COEFFICIENT ALPHA

ITEM	TOTAL SAMPLE	MEN'S GROUPS	WOMEN'S GROUPS
Male Themes	.77	.47	.75
Female Themes	.74	.75	.74
Neutral Themes	.81	.77	.81
Male Feelings Felt	.75	.62	.79
Female Feelings Felt	.78	.48	.76
Neutral Feelings Felt	.88	.38	.91
Male Feelings Discussed	.39	.60	.20
Female Feelings Discussed	.66	.22	.69
Neutral Feelings Discussed	.75	.51	.62

of the categories can be considered reliable, since they achieved an alpha greater than .80. Since five of the categories achieved an alpha between .74 and .79, one can assume these scores to be approaching reliability. Thus, one can consider the instrument to be exhibiting a reasonable degree of reliability for the entire sample.

As for the men, no scores were reliable, i.e. over .80, and only two categories had alpha scores approaching reliability, (.77 and .75). The remaining seven categories had alpha scores between .62 and .22. For the women, two

categories had alpha scores of .92 and .81 which is
considered highly reliable, and four scores between .75 and
.79, approaching reliability.

One can therefore say that for the total sample and
the women's groups, the instrument produces an acceptable
degree of reliability, if one considers an alpha of .74 or
above as reliable. For the men only, the Cronbach's Alpha
suggests that, over time, the findings would not be as
consistent in most of the categories, thus raising
questions regarding its reliability for this particular
male population.

Validity

Validity concerns how accurately an instrument is
assessing what it was designed to assess regarding the
content of the items, the criteria on which the instrument
is designed, and how well the instrument is constructed.
Validity raises questions regarding alternative
explanations for the relationship between the variables;
generalizability of findings across settings, times, and
persons; and whether or not the instrument is truly
examining what it set out to measure. Finally, validity
addresses issues regarding how clear the questions and/or
instructions were on the instrument, and whether or not the
researcher developed and administered the instrument in a
well-planned, logical sequence (Kerlinger, 1986; Polansky,
1975).

Content validity is basically judgmental, yet it has played a major role in developing and assessing various tests used in psychology (Carmines and Zeller, 1979). Essentially, it examines whether or not the items in the instrument are logically a representative sample of the content area one is investigating. Thus, in this research, one would be concerned as to whether or not the sixty-six items being measured reflect the hypothesized traditional notions of male and female themes, affect, and behavior.

In order to assure a maximum degree of logical content validity, several steps need to be taken. 1) The researcher must be able to specify the full domain of content that is relevant to the distinctive measurement situation. 2) A representative sample of words or ideas from this collection must be developed, since it would be nearly impossible to include all of them in a single test. 3) Once these words and/or ideas have been selected, they need to be put in a form that is testable (Carmines and Zeller, 1979, p. 20).

Another type of content validity is face validity, which asks whether or not the items appear "on the surface" to tap the content area being studied. Again, it is a subjective and judgmental method, deemed accurate by the particular specialists in the area being studied and utilized widely in clinical research (Corcoran and Fischer, 1987).

From examining the contents of the SGWR, it appears that the items represent issues relating to traditional notions of gender themes, behavior, and affect and have been judged so by many experienced clinical social workers. These include the researcher, the researcher's advisor, the director of the primary agency where the research was conducted, several colleagues, and finally, the literature review discussing gender theory and group work.

Logically, the instrument was developed via a series of steps which followed the above criteria. The researcher: 1) examined the literature for a previous instrument (GTSR) 2) examined the literature regarding gender theory and group process 3) applied this information to the construction of the instrument with a sampling of the words and ideas from traditional masculine and feminine behaviors, feelings, and themes, 4) pre-tested the instrument with both women's and men's groups and with individuals who were previous clients of the agency setting, and 5) discussed the instrument's construction with several faculty members at Loyola University's School of Social Work.

Regardless of how thorough a researcher attempts to be in the designing of the instrument process,

> "it is difficult to think of any abstract
> theoretical concept...for which there is an agreed
> upon domain of content relevant to the phenomenon
> (being studied). Theoretical concepts in the social
> sciences have simply not been described with the
> required exactness...Rather, one formulates a set of
> items that is intended to reflect the content of a
> given theoretical concept. Without a random

sampling of content, however, it is impossible to insure the representativeness of the particular items (Carmines and Zeller, 1979, p. 21-22).

Construct validity asks whether or not the instrument is accurately tapping into a particular theoretical construct. Are the 66 items precisely delineated into the male, female, and neutral categories? Does the hypothesized male item "being competitive with people" correlate with "feeling competitive" and/ or "talking about feeling competitive"? Is the hypothesized female theme of "having concerns about depending too much on others" highly related to "feeling dependent" and/or "talking about feeling dependent"?

The logic of construct validation implies that the relationship among multiple indicators designed to represent a given theoretical concept and theoretically relevant external variables should be similar in terms of direction, strength, and consistency (Carmines and Zeller, p. 26). Construct validity "links psychometric notions and practices to theoretical notions" and is "preoccupied with theory, theoretical constructs, and scientiic empirical inquiry involving the testing of hypothesized relations (Kerlinger, 1986, p. 420). Unlike content validity, however, a procedure exists which can help social scientists begin to objectify instrument validity. In this research, Pearson's Correlation Matrix provides us with an opportunity to measure the strength of association of the nine categories

(i.e., the theoretical constructs) with each other.

The Pearson's _r_ is a commonly cited measure for examining construct validity (Siegel, 1988; Corcoran and Fischer, 1987; Norusis, 1986; Reid and Smith, 1981; and Leonard, 1976) and is sometimes referred to as a "product moment correlation" (Kerlinger, p. 63, 1986; Polansky, p. 82, 1975). It measures the strength of a linear relationship between variables on an interval or ratio scale. Siegel (1988) states that one should assume a randomly drawn sample with the Pearson's _r_, and others (Norusis, 1986; Reid and Smith; Leonard, 1976) assume data measured on an interval or ratio scale, a linear relationship, and at least two variables being compared.

One might normally question the use of the Pearsons _r_ with this study's particular sample of convenience and use of ordinal level data. For purposes of examining the data and evaluating the correlations among the sub-scales, it was believed that the Pearson's _r_ would contribute considerably for this research. It is the best available statistic for determining the strength of the relationships among the nine cited categories, regardless of whether or not it adhered to the strict standards of measurement and sampling. As previously discussed in the first section of this chapter and below in Chapter V - Data Analysis, holding to these traditionally rigid standards can ultimately limit one's ability to discover important patterns or

relationships. Therefore, one can justifiably argue the appropriateness of the Pearson's r for helping determine some idea regarding construct validity here in this study.

Total Sample

Discussion regarding the results of the Pearson's r will focus on the men's groups and women's groups only. The reader is referred to Tables 3 and 4 in the Appendix to examine the results of this analysis for the entire sample.

In summation, however, it is interesting to note that six of the eight high and very high scores were with categories correlating female and neutral feelings with each other. Finally, at the .05 level of significance, there is a 95% chance that twenty-nine out of thirty-six correlations would probably appear again with this same sample.

Men's Groups

The men's groups reported four high correlations between the categories, two with "Male Themes" (see Tables 5 and 6, following pages and Appendix) and two with "Neutral Feelings Discussed." Negative correlations in "Female Feelings Felt" are worth examining. This category had moderate negative correlations with "Male Themes", "Neutral Themes", and "Male Feelings Discussed." The identified female feelings in this research with men have somewhat of a negative relationship with the identified male themes and

TABLE 5

PEARSON'S CORRELATION MATRIX

MEN'S GROUPS

	MT	FT	NT	MFF	FFF	NFF	MFD	FFD	NFD
MT	−								
FT.	.898	−							
NT	.633	.671	−						
MFF	.069	.123	.210	−					
FFF	−.622	−.595	−.416	.017	−				
NFF	−.038	.013	−.146	.626	.437	−			
MFD	.794	.631	.242	.073	−.502	.052	−		
FFD	.327	.298	−.210	−.026	.611	.361	.611	−	
NFD	.587	.533	.162	.016	.051	.340	.758	.721	−

LEGEND

MT = Male Themes   NFF = Neutral Feelings Felt
FT = Female Themes   MFD = Male Feelings Discussed
NT = Neutral Themes   FFD = Female Feelings Discussed
MFF = Male Feelings Felt   NFD = Neutral Feelings Discussed
FFF = Female Feelings Felt

GUILFORD'S TABLE FOR INTERPRETING PEARSON'S $\underline{r}$

RAW SCORE   DEGREE OF RELATIONSHIP
Less than or equal to:
(+ or −)

	DEGREE OF RELATIONSHIP
.00 − .20	Slight, almost negligible
.21 − .40	Low correlation, definite but small
.41 − .70	Moderate correlation, substantial
.71 − .90	High correlation, marked
.91 − 1.00	Very high and dependable

Source: Leonard, W.M. 1976 p. 323

TABLE 6

PEARSON'S CORRELATION MATRIX

LEVEL OF SIGNIFICANCE
MEN'S GROUPS

	MT	FT	NT	MFF	FFF	NFF	MFD	FFD	NFD
MT	–								
FT	.00	–							
NT	.02	.01	–						
MFF	.82	.69	.49	–					
FFF	.02	.03	.16	.96	–				
NFF	.90	.97	.64	.02	.14	–			
MFD	.00	.02	.43	.81	.08	.87	–		
FFD	.28	.32	.49	.93	.96	.23	.03	–	
NFD	.04	.06	.60	.96	.87	.26	.00	.01	–

LEGEND

```
MT  = Male Themes
FT  = Female Themes
NT  = Neutral Themes
MFF = Male Feelings Felt
FFF = Female Feelings Felt
NFF = Neutral Feelings Felt
MFD = Male Feelings Discussed
FFD = Female Feelings Discussed
NFD = Neutral Feelings Discussed
```

$p < .05$ level of significance

feelings. This would lend some support to gender theory.

Only twelve correlations had a p <.05, while ten had a p >.80. Therefore, out of thirty-six possible correlations, only 1/3 had a p <.05, which leads one to assume that this instrumentation with this male sample raises questions regarding its validity, as it did with its reliability analysis.

Women's Groups

The results of the Pearson's r with the women had ten scores of high or very high correlation with each other (see Tables 7 and 8, following pages and Appendix). When one examines this table, gender theory appears to be affirmed several times. "Male Feelings Discussed and Male Feelings Felt" have a score of .940, a very high and dependable correlation. "Female Feelings Felt" has a high correlation with "Female Feelings Discussed" and "Neutral Feelings Discussed." Also, "Neutral Feelings Felt" is highly correlated with "Female Feelings Discussed" and "Neutral Feelings Discussed." Finally, "Female Feelings Discussed" and "Neutral Feelings Discussed" have an r of .910 which is extremely high. These high scores appear to tell us that the hypothesized neutral and female feelings tend to correlate dependably with each other. Along these lines, the "Female Feelings Felt and Discussed" had low and almost negligible correlations with "Male Feelings Felt and Discussed."

TABLE 7

PEARSON'S CORRELATION MATRIX

WOMEN'S GROUPS

	MT	FT	NT	MFF	FFF	NFF	MFD	FFD	NFD
MT	-								
FT.	.688	-							
NT	.802	.670	-						
MFF	.533	.547	.790	-					
FFF	.583	.430	.447	.275	-				
NFF	.558	.708	.474	.426	.602	-			
MFD	.425	.590	.674	.940	.130	.467	-		
FFD	.584	.469	.487	.293	.852	.830	.225	-	
NFD	.711	.466	.698	.513	.737	.773	.434	.910	-

LEGEND

MT = Male Themes   NFF = Neutral Feelings Felt
FT = Female Themes   MFD = Male Feelings Discussed
NT = Neutral Themes   FFD = Female Feelings Discussed
MFF = Male Feelings Felt   NFD = Neutral Feelings Discussed
FFF = Female Feelings Felt

GUILFORD'S TABLE FOR INTERPRETING PEARSON'S r

RAW SCORE   DEGREE OF RELATIONSHIP

Less than or equal to:
(+ or -)

	DEGREE OF RELATIONSHIP
.00 - .20	Slight, almost negligible
.21 - .40	Low correlation, definite but small
.41 - .70	Moderate correlation, substantial
.71 - .90	High correlation, marked
.91 - 1.00	Very high and dependable

Source: Leonard, W.M. (1976) p. 323

TABLE 8

PEARSON'S CORRELATION MATRIX

LEVEL OF SIGNIFICANCE
WOMEN'S GROUPS

	MT	FT	NT	MFF	FFF	NFF	MFD	FFD	NFD
MT	–								
FT.	.01	–							
NT	.00	.01	–						
MFF	.06	.05	.00	–					
FFF	.04	.14	.13	.36	–				
NFF	.05	.01	.10	.15	.03	–			
MFD	.15	.03	.01	.00	.67	.11	–		
FFD	.04	.11	.09	.33	.00	.00	.46	–	
NFD	.01	.11	.01	.07	.00	.00	.14	.00	–

LEGEND

MT = Male Themes
FT = Female Themes
NT = Neutral Themes
MFF = Male Feelings Felt
FFF = Female Feelings Felt
NFF = Neutral Feelings Felt
MFD = Male Feelings Discussed
FFD = Female Feelings Discussed
NFD = Neutral Feelings Discussed

$p < .05$ level of significance

With respect to the level of significance of these findings in the women's groups, twenty-two out of a possible thirty-six correlations were at p <.05. Including the above discussion, the results of the Pearsons' Correlation Matrix lead one to assume the instrument to be considerably valid for the women's groups.

In retrospect, one needs to recognize that a threat to construct validity generally exists throughout the instrument due to the inherent nature of attempting to link these psychometric and theoretical notions. This research has drawn hypotheses from the psychodynamic and group literature as to which themes and affective states are "male", "female", and/or "neutral." The group members have interpreted and defined for themselves the meanings of each theme or affective state, which is naturally subjective. Thus, strict consistency in the definitions of the sixty-six items being empiricized is lacking.

For example, the theme item of "Having significant power over others" does not specifically address "who has power over whom." It is very possible that the women were talking about other people in their lives having power over them in a given situation. Nonetheless, the women reported discussing these issues, and the men did not, reflecting a considerable difference.

Therefore, this researcher recognizes that no measure in the behavioral and social sciences is completely valid

and reliable, and therefore assumes some error in
measurement.

Thus, interpretation and use of the scores in this
study will consider this condition. "However...a measure
without complete substantiation is usually better than no
measure at all (Corcoran and Fischer, 1987, p. 19).

Sampling

Acquisition of Sample

The researcher spent several months calling family
service agencies and outpatient clinics utilizing referrals
from social workers in the Chicago area, and advertising in
the monthly Illinois NASW Bulletin for group workers
interested in having their groups participate in clinical
research. The researcher was interested in controlling for
as many variables as possible in the sampling process, and
was also committed to locating groups within an agency or
social work "dominated" outpatient setting, rather than
using groups from the private practice domain.

Every attempt was were made to locate a sample whose
subjects 1) had parallel levels of mental health
functioning, 2) had similar presenting problems, 3) came
from comparable socioeconomic statuses, and had related 4)
racial and cultural backgrounds, 5) religions, 6)
occupational statuses, 7) marital statuses, and 8) parental
statuses. Other variables which were considered important
to control for included that 9) groups have leaders with an

M.S.W., M.A., and/or M.S. in counseling psychology, 10) that the groups were newly forming, and 11) that the agency or clinic had a history of providing group treatment to their client populations for several years and were familiar with standard social work group theory and practice. As previously noted, because this study is attempting to infer that gender influences elements of group process, it was necessary to control for as many variables as possible in the _spirit_ of experimental design.

Eventually, the researcher received a positive response from a family service agency in the Chicago area. Three appointments were arranged with the director and the staff to discuss the research and exactly what type of assistance was required from the workers. The researcher informed the staff that the investigation examined men's and women's therapy groups, and each worker was given a copy of the instrument. Nothing more was said regarding the exact stated questions of the study, in order to control as much as possible for workers' influence. Within a month, permission was granted for the research to be conducted with eight groups (five female, two male, and one mixed-gender) beginning in October and ending in December. A thorough discussion of the above control factors was held with the director and the sample appeared to meet these standards.

Problems encountered

During the initial training of the social workers from this agency (Agency 1), the researcher was discussing collection of the data after the second, sixth, and eighth sessions. One of the workers who led a women's group, interrupted and reported that her group, along with three others, had already met four times. She also stated that some of the sessions in the "women's program" were topic-focused, i.e., the worker would inform the members that the following week's topic would be "anger," or "empowerment." It was then discovered by the researcher and the agency director that the "women's program" had its own distinct timeline and agenda with their group therapy program and was not synchronized with the remaining four groups.

A dialogue occurred regarding how the data from the four topic-focused groups would "skew" the data from the rest of the sample regarding question 1 in the study and cause a threat to reliability and validity. The researcher directed the workers to collect the data "anyway" after the sixth and eight sessions, because it could still be very useful, and told them that "problems (miscommunication within the agency between the director and the workers) like these can arise, so we just do the best we can in clinical research."

A substantial amount of time and energy had been invested with all the workers in the group program, and this

researcher felt that in order to continue a positive working relationship, it was best to continue the research with all the groups, examine the data, and make a decision later regarding this problem. There was also a commitment to obtaining results for the purpose of agency-informed research, i.e., providing Agency 1 with information regarding their clients which they would not have otherwised obtained.

The researcher now had two men's groups, one women's group, and a mixed-gender group from Agency 1, controlling for the above eleven variables. In order to have an equal number of men's and women's groups, the dissertation advisor suggested using the data gathered from the second women's group (Agency 2) from the pre-testing, since that sample met the eleven control criteria, except for agency setting. It was also decided to exclude the data from the mixed-gender group and use only the results from the two men's groups and two women's groups for this study. Thus, this study's sample included three groups from Agency 1 and one group from Agency 2. Agency 1 provided both men's groups and one women's group, while the second women's group came from Agency 2.

Agency Settings

Agency 1 "treats victims of childhood sexual abuse, their families and molesters." It focuses on "adult survivor issues and extrafamilial molestation cases." (It)

"provides speedy community and clinical support to families following the initial report of the incest, provides follow-up treatment and self-help support...and works actively to encourage humane treatment of all family members by hospital, law enforcement, child protective service and court personnel" (Mission Statement and By-laws of Agency 1).

The first twelve weeks involve orientation and assessment of each family using a psycho-educational approach to sexual abuse via individual, group, family and marital counseling, depending upon each family's needs. The director reported that this is a time when the issues of abuse and molestation can be discussed "in the open, dealing with a lot of denial and anger," since most of the clients are court-ordered for treatment. The director further stated that one of the main purposes of the therapy during this initial intervention is "to create a culture in which sexual abuse is defined and appropriate parenting is described...(and to) engage clients around resistances." By the time the next series of interventions occurs, these initial feelings have been acknowledged and a beginning level of acceptance of the problems recognized by the clients. It was during this second stage that the data was collected in the group treatment, when the focus of the groups was in the "here and now" (Yalom, 1985).

Agency 2 assists "women as they encounter situations

which are unpredictable and overwhelming. By presenting

options and providing support... (It) is committed to the

cessation of domestic violence and to the immediate relief

of those who suffer from its consequences. (It) will provide

services which will help make it possible for families to

stay together without violence and/or to help women elimiate

the abusive situation from their lives..." (Mission

Statement and Organizational Goals from Agency 2).

This group of women was formed by the social worker

from her caseload of individual clients for whom she felt

group therapy appropriate in working through their

particular issues. Thus, these clients had also been

through a previous counseling experience dealing with their

life situations, and the "here and now" focus would be

utilized throughout the group treatment.

Presenting Problems of Clients

It is clear that this sample's presenting problems are

gender-biased, i.e., the clients are seeking treatment for

problem behaviors associated with their gender.

Specifically, the men tend to have histories of being

abusive and needing control, domination, and power over

their families, and generally are court-ordered for

treatment. The women have had histories of feeling fairly

powerless and weak, have remained rather submissive and

have generally denied familial problems previous to social

work intervention. These factors alone considerably

influence the results of the data due to this inherent
gender-laden influence. Obviously, these findings are not
generalizable to other settings and groups.

Further, many social work researchers would consider
the presenting problems of the men to be different from
those of the women, which also significantly influences
their responses. One colleague stated that the two samples
were as different as "apples and oranges."

Addressing this issue, the agency social workers
involved in the daily treatment of these "apples and
oranges" acknowledged this circumstance. However, they
insisted that researchers tend to overlook one important
fact: the men in this sample, and nearly all other
perpetrators of sexual assault/incest, are themselves
victims of childhood abuse and/or incest. This fact <u>in no
way</u> excuses their behavior, and as social workers it is our
responsibility to clearly intervene in, discuss, and treat
this unacceptable conduct. However, once engaged in the
helping process, these men deserve the same clinical
intervention as any other client. Finally, the workers
also report that "a lot of the women are involved in
collusion with the incest/abuse, and therefore are also
looked upon <u>by their children</u> as being part of the
perpetration." Therefore, how does one clearly define the
"apples from the oranges"?

For purposes of this study, the researcher agrees with

both judgments and opinions, which illustrates the difficulties and debates discussed earlier regarding clinical research. However, considering for the moment that a clinical sample was obtained meeting the criteria of a "clinical trial" (Kazdin, p. 35, see Table 9, following page and Appendix), which is usually difficult to find, as opposed to a student or analogue sample, one can acknowledge the value this study has for these particular agencies with these given populations during this time period.

Finally, this research also strongly maintains that the members of the entire sample do share a highly similar presenting problem: all been victims at one time in their lives of physical assault and/or abuse. <u>How they have chosen to act out and/or defend against the pain of this abuse and assault is certainly different, and in fact, gender related</u>. Therefore, one can acknowledge that differences do exist regarding the presenting problems between the men and women in this sample. However, recognition of their similarities must also be addressed and considered, both clinically and empirically.

Demographic Data of Sample

In the four groups, thirteen men and thirteen women between the ages of 28 and 48 with a mean age of 39.7 years participated in the study (see Table 10, following page and Appendix entitled "Client Information Sheet"). At the time

TABLE 9

KAZDIN'S TABLE OF SELECTED DIMENSIONS WHICH
INVESTIGATIONS MAY VARY IN THEIR DEGREE
OF RESEMBLANCE TO THE CLINICAL SITUATION

Dimension	Resemblance to the Clinical Situation		
	Relatively Little Resemblance (Analogue Research)	Moderate Resemblance	Identity with or Relatively High Resemblance (Clinical Trials)
Target problem	Nonproblem behavior, laboratory task performance, mild problem at subclinical levels	Similar to that seen in the clinic but probably less severe or more circumscribed	Problem seen in the clinic, intense or disabling
Population	Infrahuman subjects, nonclinical group such as college students chosen primarily because of their accessibility	Volunteers screened for problem and interest in treatment	Clients in out-patient clinic
Manner of recruitment	Captive subjects who receive special incentives (e.g. course credit) for partici-pating	Persons recruited especially for avail-able treatment	Clients who have treatment without solicitations from the clinic
Therapists	Nontherapists, nonpro-fessionals, students, automated presentation of major aspects of treatment (audio or videotapes)	Therapists in training with some previous clinical experience	Professional therapists
Selection of treatment	Client assigned to treatment with no choice of specific therapist or condition	Client given choice over some alternatives in an alternatives in an experiment	Client chooses therapist and specific treatment
Setting of treatment	Laboratory, academic, psychology department	University clinic devised for treatment delivery with estab-lished clientele	Professional facility with primary function of delivering treatment
Variation of treatment	Standardized, abbreviated or narrowly focused version of treatment	Variation that permits some individualization and flexibility in content and/or duration	Treatment tail-ored to the individual or determined on the basis of the client's problems

TABLE 10

CLIENT INFORMATION SHEET

Please fill out the below information. All answers will be kept strictly confidential. You will only need to fill out this sheet one time. Thank you very much.

1. Social Security Number or Code Word_____

2. Age_____ Birthdate_____

3. Marital Status:

   Single, engaged, or living with girl/boyfriend _____

   Marriage_____ (State first, second, third, etc.)

   Separated by choice_____

   Separated as a condition of treatment_____

   Divorced_____

4. Your Parental Status - List Children's Names and Ages:

   1)_____   3)_____   5)_____

   2)_____   4)_____   6)_____

5. Education - Highest grade completed and/or degree earned_____

6. Religion_____

7. Race_____

8. Sex_____

9. Employment Status: Yes: _____   No: _____

10. Occupation_____

11. Annual Income_____

of data collection, two were single, five were married, four were married but separated, two were divorced and living with a significant other, and thirteen were separated. Thus, over half the participants were separated from their spouses.

Twenty-three reported being a parent. The three who reported not being a parent were all men. Twenty-four reported having children, while two clients reported having none. It is unclear how a client interpreted these questions, since all clients were known to be parents and have children. Clients' custody arangements could have influenced their perceptions regarding their parental status. If a child has been adjudicated to be in the full custody of its mother after a divorce, it is possible the father might feel bitter, angry, and resentful of the situation and assume fatherhood "no longer exists" for him.

Two clients did not complete high school, twelve finished their education with a high school diploma, four had some college education, three had a bachelor's degree, one had some graduate education, two had graduate degrees, and two did not report. With respect to religion, eight reported being Roman Catholic, twelve Protestant - Presbyterian, two Christian, and four reported having no religious affiliation. Twenty-four members of the sample were Caucasian, one was Asian, and one Hispanic.

Seventeen members reported being employed, while nine

reported being unemployed. Four were professionals, five were clerks - office workers, six manual workers - line operators, two protective and service workers, and eight domestic engineers. With respect to income, four reported no annual income, three earned between $4,000 and $10,000; seven earned between $12,240 and $20,000; seven between $22,000 and $30,000; 3 between $35,000 and $50,000; and one person reported an annual income of $90,000. One person did not report occupation and income.

For the thirteen men, ages ranged from 32 years to 46 years, with a mean age of 40.15 years. One reported being single, three were married, three were divorced and now single, two were divorced and living with a significant other, and four were separated. Ten reported being fathers, and three reported not having children, as previously stated.

With respect to education, four completed high school, two had some college, three had bachelor's degrees, one had some graduate school, two had graduate degrees, and one did not report. Three were Roman Catholic, five were Protestant - Presbyterian, one was Christian, and four reported no religious affiliation. All were Caucasian.

All thirteen men reported being employed. Four were professionals, three were clerks - office workers, and six were manual workers - line workers. One man's annual income was $4,000; three made between $15,000 and $20,000;

three between $30,000 and $45,000; and one man made $90,000 yearly.

For the thirteen women, ages ranged from 28 years to 48 years, with a mean age of 39.15. One reported being single, two reported being married, one reported being divorced, and nine reported being separated. All the women reported being mothers.

In the category of education, two women had some high school, eight had their high school diplomas, two had some college, and one did not report her educational background. Five women reported being Roman Catholic, seven women were Protestant - Presbyterian, and one was Christian. Eleven women were Caucasian, one was Asian, and one Hispanic.

Nine women reported not being employed, and four reported having employment. Under occupation, two were clerks and/or office workers, two were protective and service workers, and eight reported being domestic engineers. One did not report. Out of the nine women who reported not being employed, eight did define themselves as housewives. Interestingly, nine women in the sample reported an income. It can only be assumed they interpreted the question as "combined household income." Four reported no annual income; two reported earning between $6,000 and $10,000; three reported between $12,2440 and $17,000; two between $22,000 and $25,000; and one reported earning $50,000 yearly.

Demographic Data of Agency Social Workers

Six agency workers were the therapists for these four groups (see Table 11, following page and Appendix, entitled "Social Worker Information Sheet"). One group of men was led by two female workers, and the other by a male worker. One group of women was led by two female workers, and the other by one female worker. Their ages ranged from 24 years old to 43 years old, with a mean age of 32.83 years. Four had a Master's of Social Work, one a Master of Arts in Psychology, and one a Master of Science in Psychology. Years of experience in the field ranged from one year to thirteen years, with a mean of 5.5 years.

The researcher investigated how each worker defined aspects of their "counseling" style. Three reported doing long - term treatment, one reported doing short - term treatment, all six practiced psychodynamic therapy, four included a problem-solving approach, one reported doing topic-focused treatment when necessary, one reported specifically following a "here and now" focus, one considered herself a feminist, five reported themselves as taking an active approach in therapy, and one reported being passive.

The three workers in the two women's groups were between 26 and 43 years old, with a mean age of 35.33 years. Two had Master of Social Work degrees and one had a Master of Science in Psychology. Their years of experience in

TABLE 11

SOCIAL WORKER INFORMATION SHEET

NAME:

AGE:

DEGRESS AND DATE:

HOW LONG HAVE YOU BEEN DOING GROUP WORK TREATMENT?

DISCUSS YOUR THEORETICAL FRAMEWORK FOR GROUP WORK TREATMENT:
(long term, short term, psychodynamic, analytic,
goal-oriented, problem-solving, working the transference,
Gestalt, etc.)

DO YOUR CONSIDER YOURSELF AN ACTIVE WORKER IN THE GROUP OR
DO YOU ASSUME A PASSIVE ROLE? EXPLAIN:

social work or psychology ranged from one to eight years, with a mean of 3.66 years. (One of these workers had recently completed her M.S.W. after having worked as a registered nurse for over fifteen years, which tends to skew this number.) All three reported doing long - term therapy, and one reported doing short term work. All three practiced from a psychodynamic perspective, two incorporated a problem-solving approach, none of them were topic focused, one followed a "here and now focus," one reported being a feminist, and all three considered themselves active social workers.

As for the workers in the men's groups, their ages ranged from 24 to 39 years, with a mean of 30.33 years old. Two had Master of Social Work degrees and one had a Master of Art in Psychology. Their years of experience in social work or psychology ranged from one to thirteen, with a mean of 7.33 years. All three reported doing long-term and psychodynamic treatment, and the two trained social workers incorporated a problem-solving approach. One reported being topic focused and two reported being active workers.

Data Collection

As previously mentioned, the researcher met with the social worker from Agency 2 individually, and with the group of workers in Agency 1 to discuss collection of demographic material, consent forms for participation in the research, and for the actual data collection.

The workers were given no information regarding the specific purpose of this research, except that this study was comparing women's and men's groups. Each worker was given a copy of the instrument to examine, questions were answered, and other concerns, including confidentiality, were addressed. It had been decided during the negotiations that the group workers would conduct the research in order to maintain confidentiality, and the researcher would provide the forms and collect the data from the agency following each administration date.

Each worker discussed the research with the clients in their groups during the first session, and all who agreed to participate filled out demographic data sheets and consent forms. Only one man did not participate because he was unable to read. Data was collected after the second, sixth, and eighth sessions in Agency 1, which occurred during the same weeks between October and December, 1989. Agency 2, originally part of the pre-testing, had its group collect the data after the second, third, and sixth sessions between September and October, 1989. Thus, the data was collected by all four groups after the second and sixth sessions. Since it had already been collected after the third session in Agency 2, it was felt that, for clinical considerations, asking the members to report a fourth time would be detrimental therapeutically.

As indicated earlier, all eight groups from Agency 1

participated in the research. Due to methodological considerations, only four were used for reasons previously stated.

Tables 12 and 13 (see following two pages and Appendix) list the assigned number of each client and illustrates how many times that client was present in the group to participate in the data collection for a particular day. Group 5 will be identified as the women's group from Agency 1 with six members, and Group 6 will be identified as the women's group from Agency 2 with seven members. Group 8 is the men's group with seven members and Group 9 is the men's group with six members. Both are from Agency 1.

In summary, thirteen women and thirteen men participated in the study. Twenty eight measures were collected from the women and twenty-nine from the men. Ten members from each gender participated at least two times, and three members only once.

TABLE 12

ATTENDANCE OF MEMBERS IN WOMENS GROUPS

	DATA COLLECTION NUMBER		
	#1	#2	#3
GROUP AND CLIENT #			
GROUP #5			
Member #16	x	x	x
#17	x		x
#18	x	x	x
#19	x		
#20	x		x
#21		x	x
GROUP #6			
Member #22	x		
#23	x	x	x
#24	x		x
#24	x	x	x
#26	x	x	x
#27	x		x
#27		x	

GROUP #5   - 13 Total Measures Taken with 6 Members
GROUP #6   - 15 Total Measures Taken with 7 Members

TOTALS   = 28 Total Measures Taken with 13 Members

TABLE 13

ATTENDANCE OF MEMBERS IN MENS GROUPS

	DATA COLLECTION NUMBER		
	#1	#2	#3
GROUP AND CLIENT #			
GROUP #8			
Member #35	x		
#36	x		x
#37	x	x	x
#38	x	x	x
#39	x	x	x
#40	x	x	x
#41	x		x
GROUP #9			
Member #42	x		
#43	x	x	x
#44	x		x
#45	x	x	x
#46	x		x
#47			x

(Member #47 was present in all three group sessions, but chose to participate in the research after the 3rd session only.)

GROUP #8 – 17 Total Measures Taken with 7 Members
GROUP #6 – 12 Total Measures Taken with 6 Members

TOTALS = 29 Total Measures Taken with 13 Members

CHAPTER IV

DATA ANALYSIS, FINDINGS AND DISCUSSION

General Statement

Polansky discusses the debate which involves the "misuse of interval scale statistics for numerical data in which equality of units has not been clearly established (Polansky, p. 81). He reports that there is a body of opinion that psychological and sociological variables having to do with aptitudes, attitudes, personality charac- teristics, properties of groups, and the like can be measured at best on ordinal scales. This opinion takes the form of insistence that only certain types of statistical procedures are permissible depending on the strength of measurement (Polansky, p. 81).

Polansky notes that this same view prefers to use parametric statistics only with samples that are normally distributed, and nonparametric analyses with distribution- free methods, such as ranks or classifications rather than scores. However, another viewpoint holds that "classic parametric procedures are generally <u>robust</u>, i.e., provide reasonable inferences even in the face of violation of underlying assumptions (Polansky, p. 82). Therefore, one must consider how the statistics will lead to "useful and

meaningful decisions for contributions to knowledge," and
that in adopting the "safe" approach, the researcher may be
"discarding data and weakening his chances of detecting
significant differences or relationships" (Polansky, p. 82).

Ultimately, this research follows Polansky's point of
view that, from a practical standpoint, "questions of what
to measure and how to measure, as well as problems of
sampling, control, and relevance to theory, are more
pressing" (Polansky, p. 83), than following a rigid standard
of permissible statistics. Therefore, both ordinal and
interval levels of analysis were utilized for this research
in order to contribute to our knowledge regarding gender and
group process, even though the instrument, in standard
terms, is measuring ordinal - level data.

With the GTSR, Eng used frequencies, factor analysis
and Pearson's r in the data analysis. In this research all
procedures used to answer this study's first three questions
were descriptive statistics. These included percentiles,
frequencies, and means, which assume a sample of convenience
and ordinal - level data. The Wilcoxon-Mann-Whitney Rank
correlation, as an inferential statistic assuming a randomly
drawn sample with ordinal-level data, assisted the research
in confirming and validating what was being seen in the
descriptive statistics, i.e., the significant differences
between the men's and women's scores. This analysis will be
further discussed when answering question #4. Finally, use

of the Pearons's r correlation coefficient was previously
discussed regarding instrument validity.

Question 1 - Means and Frequencies for
the Feelings Felt

How frequently and to what degree are the identified
male, female, and neutral themes discussed in three sessions
in the men's groups and the women's groups?

Means and Frequencies

In order to answer the first part of this question,
one needs to examine the obtained means and frequencies.
The means were acquired by computing a mean score for each
member for each of the nine categories (see "Means for Each
Member For Each Category," Table 14, following page and
Appendix). For example, member #16 reponded 3 times to the
instrument as noted in column one, followed by her average
scores for each category. Member #36 answered the
questionnaire two times, with a mean score of 1.42 for "Male
Themes," 1.94 for "Male Feelings Felt," and 1.50 for "Male
Feelings Discussed." The averages of all the members'
scores were then computed to obtain the means and standard
deviations of the women's groups and men's groups for each
category (see Table 15, following page and Appendix).

Results show the women scored higher in all three
"theme" categories. In order to investigate these findings
in more detail, one need only examine the Frequency of

TABLE 14

MEANS FOR EACH MEMBER FOR EACH CATEGORY

# OF SESSIONS	MT	MFF	MFD	FT	FFF	FFD	NT	NFF	NFD

MEMBER I.D. #

Group 5 (Women)

# OF SESSIONS	MT	MFF	MFD	FT	FFF	FFD	NT	NFF	NFD
#16 3	2.89	1.96	1.72	3.17	2.04	1.75	2.22	2.13	2.25
#17 2	1.75	1.75	1.25	2.75	2.75	2.06	1.58	2.38	1.69
#18 3	4.11	3.38	3.21	4.39	3.08	3.46	2.83	3.58	3.67
#19 1	2.17	2.63	2.63	3.17	2.25	2.13	2.17	2.63	2.25
#20 2	1.50	1.94	1.81	1.50	1.25	1.25	1.42	1.69	1.63
#21 2	2.17	1.88	1.31	2.17	1.44	1.31	1.83	2.13	1.94

Group 6 (Women)

# OF SESSIONS	MT	MFF	MFD	FT	FFF	FFD	NT	NFF	NFD
#22 1	2.83	3.43	3.00	3.00	3.00	4.00	2.67	3.57	3.88
#23 3	2.44	2.96	2.75	2.44	1.75	1.13	2.11	2.46	2.08
#24 2	3.33	3.50	2.94	3.92	2.19	1.75	2.92	2.38	2.19
#25 3	3.18	2.43	2.04	3.39	3.21	3.29	1.89	3.38	2.74
#26 3	3.33	2.00	1.67	3.44	2.79	3.88	2.39	3.75	3.33
#27 2	2.00	2.61	2.44	3.33	2.44	2.69	2.17	3.13	2.69
#28 1	2.33	2.75	3.00	4.33	1.38	1.88	2.00	3.63	2.00

Group 8 (Men)

# OF SESSIONS	MT	MFF	MFD	FT	FFF	FFD	NT	NFF	NFD
#35 1	2.33	1.50	2.63	3.33	1.25	1.88	1.50	2.00	2.13
#36 2	1.42	1.94	1.50	2.33	2.13	1.63	1.25	2.13	1.69
#37 3	1.83	2.01	1.63	2.44	1.51	1.75	1.89	2.14	1.42
#38 3	1.72	2.17	2.00	2.33	1.29	1.42	1.61	1.58	1.33
#39 3	1.72	1.96	1.33	2.56	1.58	1.33	2.00	1.92	1.38
#40 3	1.24	1.17	1.08	1.94	1.58	1.00	1.56	1.75	1.00
#41 2	2.00	2.38	2.56	3.00	1.25	2.00	2.08	2.25	1.88

Group 9 (Men)

# OF SESSIONS	MT	MFF	MFD	FT	FFF	FFD	NT	NFF	NFD
#42 1	1.67	2.88	1.50	3.00	1.00	1.38	2.00	2.00	1.13
#43 3	1.67	2.55	1.50	2.83	2.13	1.67	2.17	2.50	2.02
#44 2	2.42	3.00	2.50	3.42	1.19	1.44	2.50	2.44	1.94
#45 3	1.61	2.63	2.21	2.11	1.79	1.58	1.67	2.21	1.96
#46 2	1.25	3.19	1.13	1.83	2.00	1.25	1.08	2.63	1.00
#47 1	2.17	2.38	1.75	3.17	1.38	1.00	3.17	1.75	1.38

LEGEND

MT = Male Themes	NT = Neutral Themes
MFF = Male Feelings Felt	NFF = Neutral Feelings Felt
MFD = Male Feelings Discussed	NFD = Neutral Feelings Disc.
FT = Female Themes	
FFF = Female Feelings Felt	
FFD = Female Feelings Discussed	

TABLE 15

MEANS OF MEN'S AND WOMEN'S GROUP RESPONSES
IN THE NINE CATEGORIES

	MENS' GROUPS		WOMEN'S GROUPS	
	MEANS	STD DEV.	MEANS	STD.DEV
CATEGORY				
MT	1.773	.373	2.618	.741
FT	2.639	.525	3.154	.820
NT	1.883	.547	2.169	.450
MFF	2.286	.582	2.554	.626
FFF	1.544	.369	2.274	.675
NFF	2.099	.310	2.831	.700
MFD	1.793	.536	2.289	.687
FFD	1.486	.305	2.351	1.006
NFD	1.556	.398	2.487	.732

LEGEND

MT = Male Themes
FT = Female Themes
NT = Neutral Themes

MFF = Male Feelings Felt
FFF = Female Feelings Felt
NFF = Neutral Feelings Felt

MFD = Male Feelings Discussed
FFD = Female Feelings Discussed
NFD = Neutral Feelings Discussed

Themes of Women's and Men's Groups (Tables 16 and 17, see
following pages and Appendix). The frequencies
(percentages) of Likert responses for the female and male
groups are reported in the categories of "Female Themes," "
Male Themes" and "Neutral Themes."

Under "Female Themes," the women scored higher on the
women's themes, as one would expect according to gender
theory. An exception to this is on the item "responsible
for others' needs," where the frequencies are rather
similar bewteen the men and women. When one looks at the
"Male Themes," the women have scored higher on every item,
which directly conflicts with what one might expect to find
assuming gender theory. Under "Neutral Themes," women also
scored higher on every item except "romantic and/or sexual
involvement," in which the men had more frequent responses
under the "4" and "5" Likert values.

In addressing the second part of the question "to what
degree?", this study combined the Likert percentage values
of "4" and "5" together, and considered that percentage to
be a "high" degree. Similarly, the Likert values of "2" and
"3" were combined and that sum considered to be a "moderate"
degree. Finally, the percentage of reponses that were in
the Likert value of "1" were labeled a "low" degree (see
Table 18, following page and Appendix, entitled "Level of
Degree with Combined Frequencies - Themes").

Essentially, the researcher has collapsed the

TABLE 16

FREQUENCY OF THEMES
WOMEN'S GROUPS

PERCENTAGE OF TOTAL RESPONSES

THEMES	LIKERT VALUES				
	5	4	3	2	1
Male					
Control over others	32.1	28.6	21.4	3.6	14.3
Not needing others	17.9	21.4	21.4	7.1	32.1
Persuade/Influence others	7.4	22.2	33.3	7.4	29.6
Power over others	21.4	7.1	14.3	17.9	39.3
Compete with others	0	10.7	7.1	10.7	71.4
Confidant/Handle self	17.9	25.0	25.0	14.3	17.9
Female					
Concern for others	32.1	50.0	7.1	0	10.7
Too close to others	29.6	14.8	11.1	11.1	33.3
Home/ house	21.4	17.9	32.1	17.9	10.7
Family and friends	35.7	17.9	28.6	14.3	3.6
Responsible for others	14.3	28.6	21.4	14.3	21.4
Depending on others	7.1	7.1	28.6	7.1	50.0
Neutral					
Romantic /sexual invol.	7.1	3.6	21.4	14.3	53.6
Childhood /adolescence	21.4	17.9	21.4	7.1	32.1
Supervisor at work	0	3.6	3.6	21.4	71.4
Plans for future	7.1	7.1	32.1	25.0	28.6
Interests /hobbies	3.6	7.1	7.1	17.9	64.3
Adult Years	17.9	10.7	32.1	7.1	32.1

TABLE 17

FREQUENCY OF THEMES
MEN'S GROUPS

PERCENTAGE OF TOTAL RESPONSES

THEMES	LIKERT VALUES				
	5	4	3	2	1
Male					
Control over others	3.4	13.8	24.1	31.0	27.6
Not needing others	0	0	0	17.2	82.8
Persuade/Influence others	3.6	7.1	14.3	35.7	39.3
Power over others	0	0	6.9	27.6	65.5
Compete with others	3.4	0	3.4	13.8	79.3
Confidant/Handle self	6.9	3.4	20.7	24.1	44.8
Female					
Concern for others	17.2	34.5	31.0	10.3	6.9
Too close to others	3.4	17.2	27.6	27.6	24.0
Home/ house	3.4	13.8	24.1	10.3	48.3
Family and friends	6.9	27.6	17.2	17.2	31.0
Responsible for others	13.8	20.7	34.5	17.2	13.8
Depending on others	3.4	0	6.9	17.2	72.4
Neutral					
Romantic /sexual invol.	17.2	17.2	17.2	24.1	24.1
Childhood /adolescence	0	3.4	6.9	17.2	72.4
Supervisor at work	0	0	3.4	10.3	86.2
Plans for future	0	10.3	20.7	13.8	55.2
Interests /hobbies	3.4	3.4	10.3	24.1	58.6
Adult Years	3.4	3.4	27.6	27.6	37.9

TABLE 18

LEVEL OF DEGREE WITH COMBINED FREQUENCIES
OF THEMES

PERCENTAGE OF TOTAL RESPONSES

THEMES	MEN'S GROUPS			WOMEN'S GROUPS		
	High	Medium	Low	High	Medium	Low
Male						
Control over others	17	55	27	60	25	14
Not needing others	0	17	83	39	29	32
Persuade/Influence others	11	50	39	30	41	29
Power over others	0	34	65	28	32	39
Compete with others	3	17	79	11	18	71
Confidant/Handle self	10	45	45	43	39	18
Female						
Concern for others	51	41	7	82	7	10
Too close to others	20	55	24	45	22	33
Home/ house	17	34	48	39	50	10
Family and friends	34	34	31	53	43	3
Responsible for others	34	51	14	43	35	21
Depending on others	3	24	72	14	35	50
Neutral						
Romantic /sexual invol.	35	41	24	11	35	53
Childhood /adolescence	3	24	72	39	28	32
Supervisor at work	0	13	86	3	25	71
Plans for future	10	34	55	14	57	29
Interests /hobbies	7	34	59	11	25	64
Adult Years	8	55	37	28	39	32

LEGEND

High Level of Degree   = Sum of Frequencies in #4 and #5
                          Values

Medium Level of Degree = Sum of Frequencies in #3 and #2
                          Values

Low Level of Degree   = Frequency in # 1 Value

frequency scores for this specific purpose. One could argue
that the logical division would be "4" and "5", "3" by
itself, and "2" and "1" together. However, the clients
respond to these questions subjectively and can interpret a
"3" differently, e.g., a score of "3" can have a different
meaning for one group member than another, even though both
record a circle around the number "3." It was judged that
the most possible consistent score is the "1", because the
instrument labels that score as "NOT AT ALL." Thus, a score
of "1" would have a fairly high chance of being defined
similarly among the respondents.

Further, this table, along with the ones for "Feelings
Felt and Feelings Discussed" (to be discussed later)
generally show lower scores for the men than the women.
The research wanted to give the value of "2" to the men's
groups as much meaning as possible, and grouping "2" with
"1" would dilute the responses of the men. Thus, the male
responses of "2" can be given some weight in this discussion
of "low, moderate, and high degree."

Table 18 therefore indicates that the women reported
"Female and Male" Themes at higher degrees than the men.
One could therefore make a judgment that women talked about
being concerned for other people's needs much more
frequently and to a higher degree than did the men in this
sample with this instrument, since a majority of the female
responses (82%) were in the high degree category. Men did

discuss this item to a "high" degree, in comparison with their scores in "moderate" or "low," however <u>less frequently</u> than the women.

On the item of "Feeling responsible for others' care or welfare," scores were more evenly distributed for the women and were somewhat more evenly distributed for the men. For this item then, women responded significantly in both the high and moderate degrees, since there is less than a 10% difference between the two highest scores. For the men, the highest score of 51% is higher by 10% than either of the other scores, which leads one to conclude that the men in this sample reported talking about "feeling responsible for others' care or welfare" to a moderate degree.

In the "Neutral Themes" category, male responses were higher than female responses in one item only: "Romantic or sexual involvements." Therefore, the men reported discussing "romantic or sexual involvements" to a high/ moderate degree. Each of the eighteen themes can be analyzed using this procedure, which answers question #1 in this study.

Discussion

In general, women reported higher frequencies to greater degrees on all the theme items except "romantic/sexual involvements." According to gender theory then, there is an unexpected score in "Male Themes," since

this study assumed the men would report higher frequencies than the women in this category. "Having control over others," "not needing anyone telling them what to do," and "having significant power over others" were discussed less frequently and to lesser degrees among the men's groups than the women's groups.

The researcher and the social workers from Agency 1 examined these unanticipated male scores and discussed this specific sample's impact on the scores. As a result of treatment, these men begin to get in touch with their powerlessness and feel out of control over their lives, resulting in the lower scores examining these themes. The denial of their anger at having to be in therapy might also be reflected in their low scores of "not needing anyone to tell me what to do." It is also likely that they are lacking self-confidence as evidenced in their low scores in "being confident about handling things myself,"or at least in not wanting to talk about nor admit that part of themselves in the group treatment setting.

As for the women having the higher frequencies in the male items, it is likely that the group process has been able to "empower" them and provide the women with a more positive perspective regarding their confidence, use of persuasion, and control over situations that they previously did not have. Social group work provides an environment where clients are supported and encouraged to discuss their

concerns and life situations, and vent anger, frustration and any other feelings which might arise due to the presenting problems of the clients. Also, women are generally more socialized to a group environment and therefore have a higher comfort level with groups. This would validate the feminist literature which notes that formal and informal groups are more easily developed and maintained with women than men.

With respect to the category of "Neutral Themes," the theme "My boss or supervisors at work" was not an important topic of discussion for either gender. The themes "social activities, interests, or hobbies" and "plans or goals for the future" also were not discussed to any great degree, although all had higher frequency scores and means among the women.

However, the themes "things that happened in my childhood or adolescence" and "life experiences during my adult years" were reported to have been discussed more frequently for the women than the men. The workers reported that these differences are again probably due to the fact that women in our society are socialized to and more accustomed to talking about their families, husbands, and lives on a more intimate level with each other than are men, especially with this particular sample.

Finally, there are different opinions regarding men's higher frequencies on "romantic and sexual involvements."

Some of the women were survivors of domestic violence, and some were in families working on issues of incest and abuse. It is likely the women interpreted this topic to be about "new relationships," and were expectedly not ready to begin one at this point in their treatment. However, one could have expected the women to discuss their positive or negative relationships with their boyfriends and/or husbands in the group setting, and therefore the lower frequencies are unanticipated.

On the other hand, the men did discuss their relationships with the women in their lives and, compared with the other seventeen themes, only "concern for other people's needs" ranked higher for the men. It is likely that the group therapy provided an environment that gave the men "permission" to discuss these topics, i.e., they had been court-ordered to attend treatment because of their abusive behavior and the first series of groups had "socialized" them and expected them to discuss their relationships with their significant others.

Question 2 - Means and Frequencies for the Feelings Felt

How frequently and to what degree are the identified male, female, and neutral affective states felt in three sessions in the men's and women's groups?

Means and Frequencies

The women had higher means in all three categories under "feelings felt," (see Table 15). Under the hypothesized male feelings, there was not a great difference between the two genders with "aggressive, capable, competitive, and strong," although the women did report somewhat higher frequencies with these items (see Tables 19, 20, and 21 following pages and Appendix). Only small differences occured with feeling "dominant" and "self-confident," with women still reporting slightly higher than men in the higher frequencies. An unexpected finding was in the feeling of "powerful," with men reporting lower than women.

Thus, the differences between the women's scores and men's scores are not very great in the category of hypothesized male feelings. The results did not support the hypothesis that the men would report higher frequencies with greater degrees than the women in this category.

With the hypothesized female affective states, the women's groups reported higher frequencies on every item than the men in any previously discussed category. Note the zero scores in every item for the Likert value of "5" for the men, except under "emotional," which had only one response. Essentially, the men reported feeling every female affective state to the lowest degree, i.e., "not at all," except for "emotional," which men reported feeling to

TABLE 19

FREQUENCY OF FEELINGS FELT
WOMEN'S GROUPS

PERCENTAGE OF TOTAL RESPONSES

FEELINGS FELT	LIKERT VALUES				
	5	4	3	2	1
Male					
Aggressive	4.0	16.0	4.0	20.0	56.0
Capable	10.7	35.7	28.6	21.4	3.6
Competitive	10.7	3.6	14.3	25.0	46.4
Dominant	0	0	11.1	33.3	55.6
Independent	10.7	14.3	39.3	28.6	7.1
Powerful	10.7	7.1	17.9	7.1	57.1
Self-Confidant	10.7	28.6	28.6	25.0	7.1
Strong	14.3	17.9	35.7	21.4	10.7
Female					
Dependent	3.6	17.9	17.9	28.6	32.1
Emotional	17.9	25.0	17.9	28.6	10.7
Helpless	17.9	17.9	17.9	14.3	32.1
Ineffective	3.6	10.7	39.3	17.9	28.6
Inferior	10.7	3.6	14.3	17.9	53.6
Lonely	10.7	14.3	21.4	10.7	42.9
Rejected	10.7	7.1	7.1	7.1	67.9
Weak	7.1	3.6	10.7	21.4	57.1
Neutral					
Angry	29.6	14.8	25.9	7.4	22.2
Anxious	29.6	14.8	29.6	11.1	14.8
Bored	0	0	14.3	3.6	82.1
Depressed	14.8	22.2	25.9	11.1	25.9
Good	14.3	35.7	32.1	10.7	7.1
Guilty	17.9	3.6	17.9	10.7	50.0
Relieved	21.4	25.0	7.1	25.0	21.4
Sad	32.1	21.4	14.3	3.6	28.6

TABLE 20

FREQUENCY OF FEELINGS FELT
MEN'S GROUPS

PERCENTAGE OF TOTAL RESPONSES

FEELINGS FELT   LIKERT VALUES

	5	4	3	2	1
Male					
Aggressive	0	3.4	13.8	24.1	58.6
Capable	17.2	27.6	37.9	3.4	13.8
Competitive	3.4	6.9	24.1	24.1	41.4
Dominant	0	0	11.1	18.5	70.4
Independent	3.4	31.0	13.8	17.2	34.5
Powerful	0	0	6.9	17.2	75.9
Self-Confidant	3.6	25.0	46.4	7.1	17.9
Strong	3.4	31.0	31.0	13.8	20.7
Female					
Dependent	0	7.1	7.1	25.0	0.7
Emotional	3.4	13.8	24.1	31.0	7.6
Helpless	0	7.1	14.3	21.4	7.1
Ineffective	0	3.4	17.2	20.7	8.6
Inferior	0	0	6.9	17.2	75.9
Lonely	0	6.9	13.8	17.2	62.1
Rejected	0	0	0	13.8	86.2
Weak	0	0	10.3	17.2	72.4
Neutral					
Angry	3.4	0	0	17.2	79.3
Anxious	3.4	6.9	20.7	37.9	31.0
Bored	3.4	6.9	13.8	31.0	44.8
Depressed	0	0	10.3	27.6	62.1
Good	10.3	31.0	44.8	13.8	0
Guilty	0	7.1	32.1	25.0	35.7
Relieved	6.9	10.3	31.0	24.1	27.6
Sad	0	3.6	28.6	35.7	32.1

TABLE 21

LEVEL OF DEGREE WITH COMBINED FREQUENCIES

OF FEELINGS FELT

PERCENTAGE OF TOTAL RESPONSES

FEELINGS FELT	MEN'S GROUPS			WOMEN'S GROUPS		
	High	Medium	Low	High	Medium	Low
Male						
Aggressive	3	38	59	20	24	56
Capable	45	41	14	46	50	4
Competitive	10	48	41	14	39	46
Dominant	0	30	70	0	44	56
Independent	34	31	34	25	68	7
Powerful	0	24	76	18	25	57
Self-Confident	29	53	18	39	54	7
Strong	33	45	21	32	47	11
Female						
Dependent	7	32	60	21	46	32
Emotional	17	55	27	43	46	11
Helpless	7	36	57	35	32	32
Ineffective	3	38	59	14	58	28
Inferior	0	24	76	14	32	54
Lonely	7	31	62	25	32	43
Rejected	0	14	86	18	14	68
Weak	0	28	72	11	32	57
Neutral						
Angry	3	17	80	44	33	22
Anxious	10	58	31	44	40	15
Bored	10	45	45	0	18	82
Depressed	0	38	62	37	37	26
Good	41	58	0	50	43	7
Guilty	7	57	36	21	28	50
Relieved	17	55	28	46	32	21
Sad	4	64	32	54	18	28

LEGEND

High Level of Degree   = Sum of Frequencies in #4 and #5
                          Values

Medium Level of Degree = Sum of Frequencies in #3 and #2
                          Values

Low Level of Degree   = Frequency in # 1 Value

a "moderate" degree. Their frequency scores were also skewed towards the lower Likert values, with many "zeros" in the "4" and "5" values.

It is interesting to note the scores in the hypothesized "neutral themes" category. The women reported feeling angry, anxious, depressed, good, relieved, and sad much more frequently and to greater degrees than did the men, in much the same fashion as in the category "female feelings felt." With respect to "anger," men overwhelmingly reported feeling "not at all" angry (79.3), whereas women obviously reported their anger.

The women also admitted feeling "depressed, guilty, relieved, and sad," while the men's frequencies for these themes were considerably lower, and even negligible in some of the "4" and "5" values. The men did report feeling somewhat anxious, as evidenced by 58% of their responses being in the "moderate" degree level. They also reported feeling moderately good, guilty, relieved, and sad. Finally, the only neutral theme in which men did report higher frequencies than the women was "bored." Women reported 82% of the time feeling "not at all" bored, while men reported feeling bored 45% of the time.

Discussion

It is apparent that the women reported higher frequencies for every female and neutral feeling felt. This is also reflected by the mean scores for both of those

categories. The differences are not as great in the "male
feelings felt," although women generally still have more
scores in the higher frequencies under "aggressive,
dominant, independent, and powerful." The scores for both
genders are similar in feeling "capable, competitive, self-
confident, and strong." The mean scores for both genders
for the category "male feelings felt" also indicate a much
smaller difference. According to gender theory, once again
there were no surprises with "female feelings felt," but
this research did not expect to find the higher scores for
the women in "male feelings felt," and therefore this
emerging hypothesis is refuted.

The men did report a significant amount of feeling
"emotional" and "helpless," which were also the two "female
feelings felt" that had the highest scores for the women.
With this particular sample addressing their rather
difficult presenting problems, it may be therapeutically
encouraging that some of the men were beginning to identify
these feelings within themselves. Thus, one could argue
that these men in this particular instance did not validiate
previous theories and findings from the literature regarding
male behavior and feelings. However, the low scores for the
men in feeling "angry" contradict what the social workers
from Agency 1 report regarding the men. They informed this
researcher that even though some of the anger had dissipated
since the beginning of treatment several months prior to the

data collection, there remained a considerable amount of anger among them. However, one would not think so from just reading the data.

Again, the group process might be the catalyst which fosters some of the "male feelings felt" to emerge within the women, especially with the highest scores occuring in "capable, self-confident, and strong." Interestingly, the women reported feeling more "dominant" than the men, which contradicts what one might expect from this sample.

What is beginning to develop is an apparent gender difference in women being able to identify and be in touch with their affective states more than men, as evidenced in all scores under "feelings felt." These results are rather surprising, and one cannot overlook their importance. It is difficult to assume that men are merely "denying" what they are feeling just from analyzing results from statistics. Rather, this study recognizes some clinical considerations regarding the profiles and history of this sample, i.e., victims of abuse and/or neglect. At this point, it is appropriate to examine and discuss the statistical results of the next question, since the theoretical construct, i.e., feelings, is the same. A more detailed explanation of the findings will then have more credibilty with respect to where this discussion is heading. A full-length discourse explaining these findings from a clinical perspective will develop later in this chapter, answering question #5 of this

study.

Question 3 - Means and Frequencies for
the Feelings Discussed

How frequenty and to what degree are the identified male, female, and neutral affective states discussed in three sessions in the men's groups and the women's groups?

Means and Frequencies

Table 15 once again indicates higher mean scores on all three "feelings discussed" for the women than for the men. These differences are similar to the categories in "feelings felt," since they were also much greater between men and women in the hypothesized female and neutral feelings, than in the male feelings, where the gap between the genders was not as great.

The number of 0%s in the "5" and "4" Likert values for men's reponses is the most striking feature when examining this data (see Tables 22, 23, and 24, following pages and Appendix). The men's groups reported discussing every female feeling to the lowest degree, with only "emotional, helpless and rejected" again having a meaningful amount of responses in the moderate degree range.

In the "male feelings discussed" category, only "capable," "self-confident," "independent," and "strong" appear to have significant frequency scores in the "3" Likert values. With respect to Table 24, the men reported

TABLE 22

FREQUENCY OF FEELINGS DISCUSSED
WOMEN'S GROUPS

PERCENTAGE OF TOTAL RESPONSES

FEELINGS DISCUSSED	LIKERT VALUES				
	5	4	3	2	1
Male					
Aggressive	3.7	11.1	11.1	7.4	6.7
Capable	11.1	22.2	40.7	11.1	14.8
Competitive	0	3.6	10.7	17.9	67.9
Dominant	3.6	7.1	10.7	14.3	64.3
Independent	7.1	14.3	21.4	25.0	32.1
Powerful	7.1	10.7	17.9	7.1	57.1
Self-Confidant	7.1	21.4	32.1	17.9	21.4
Strong	10.7	10.7	28.6	28.6	21.4
Female					
Dependent	0	10.7	25.0	17.9	46.4
Emotional	14.3	28.6	28.6	14.3	14.3
Helpless	28.6	10.7	14.3	17.9	28.6
Ineffective	14.3	3.6	17.9	17.9	46.4
Inferior	10.7	3.6	21.4	14.3	50.0
Lonely	17.9	10.7	14.3	14.3	42.9
Rejected	17.9	14.3	3.6	7.1	57.1
Weak	10.7	10.7	7.1	10.7	64.3
Neutral					
Angry	28.6	17.9	17.9	14.3	21.4
Anxious	14.8	22.2	18.5	18.5	25.9
Bored	0	0	0	3.6	96.4
Depressed	14.3	21.4	10.7	3.6	50.0
Good	14.3	10.7	35.7	17.9	21.4
Guilty	14.3	14.3	14.3	17.9	39.3
Relieved	17.9	7.1	28.6	7.1	39.3
Sad	28.6	14.3	10.7	7.1	39.3

TABLE 23

FREQUENCY OF FEELINGS DISCUSSED
MEN'S GROUPS

PERCENTAGE OF TOTAL RESPONSES

FEELINGS DISCUSSED	LIKERT VALUES				
	5	4	3	2	1
Male					
Aggressive	0	6.9	6.9	10.3	75.9
Capable	3.4	10.3	20.7	20.7	44.8
Competitive	0	6.9	17.2	0	75.9
Dominant	0	3.4	13.8	10.3	72.4
Independent	0	3.4	24.1	10.3	62.1
Powerful	0	6.9	6.9	10.3	75.9
Self-Confidant	7.1	7.1	32.1	14.3	39.3
Strong	3.6	3.6	28.6	14.3	50.0
Female					
Dependent	0	6.9	13.8	10.3	69.0
Emotional	3.4	10.3	27.6	10.3	48.3
Helpless	0	0	20.7	6.9	72.4
Ineffective	3.4	3.4	6.9	17.2	69.0
Inferior	0	0	6.9	0	93.1
Lonely	0	10.3	6.9	13.8	69.0
Rejected	0	0	10.3	13.8	75.9
Weak	0	0	3.4	3.4	93.1
Neutral					
Angry	0	3.4	10.3	3.4	82.8
Anxious	0	7.1	10.7	14.3	67.9
Bored	0	0	3.4	3.4	93.1
Depressed	0	3.4	3.4	17.2	75.9
Good	3.4	17.2	31.0	24.1	24.1
Guilty	0	7.1	17.9	17.9	57.1
Relieved	0	6.9	10.3	10.3	72.4
Sad	0	0	3.4	13.8	82.8

TABLE 24

LEVEL OF DEGREE WITH COMBINED FREQUENCIES
OF FEELINGS DISCUSSED

PERCENTAGE OF TOTAL RESPONSES

FEELINGS DISCUSSED	MEN'S GROUPS			WOMEN'S GROUPS		
	High	Medium	Low	High	Medium	Low
Male						
Aggressive	7	17	76	15	18	67
Capable	13	41	45	33	52	15
Competitive	7	17	76	3	28	68
Dominant	3	24	72	11	25	64
Independent	3	34	62	21	46	32
Powerful	7	17	76	18	25	57
Self-Confident	14	47	39	7	54	39
Strong	7	43	50	21	47	21
Female						
Dependent	7	24	69	11	43	46
Emotional	14	38	48	43	43	14
Helpless	0	27	72	39	32	29
Ineffective	7	24	69	18	36	46
Inferior	0	7	93	14	36	50
Lonely	10	21	69	28	29	43
Rejected	0	24	76	32	11	57
Weak	0	7	93	18	18	64
Neutral						
Angry	3	14	83	46	32	21
Anxious	7	25	68	37	37	26
Bored	0	7	93	0	4	96
Depressed	3	21	76	36	14	50
Good	21	55	24	25	53	21
Guilty	7	36	57	29	32	39
Relieved	7	21	72	25	36	39
Sad	0	17	83	43	18	39

LEGEND

High Level of Degree   = Sum of Frequencies in #4 and #5
                          Values

Medium Level of Degree = Sum of Frequencies in #3 and #2
                          Values

Low Level of Degree   = Frequency in # 1 Value

discussing feeling aggressive, competitive, dominant, independent, and powerful to a low degree, while talking about feeling capable, self-confident, and strong were between the moderate and low -degree levels. With the "neutral feelings discussed," the men's groups reported discussing every feeling to the lowest degree, except "good," which is clearly in the moderate - degree range. This is similar to "neutral feelings felt."

The scores in "emotional and helpless," which are the most frequently reported female feelings discussed, are noteworthy. These two affective states are also the most frequently reported female feelings discussed among the men's groups.

Discussion

The women reported having discussed their feelings to greater degrees and more frequently than the men, regardless of whether the feelings were categorized into male, female or neutral areas. What is clear is that the men in this study at least reported identifying or being in touch with some of the hypothesized male affective states, although not as frequently as the women.

In "female feelings discussed," the men began to report feeling helpless and emotional, which also gained the highest scores for the women in this category. It could be said that the families were court-ordered for treatment, and therefore felt helpless due to this circumstance. However,

as a clinician, one cannot assume this to be the only reason. As victims, people gain a sense of helplessness which relates not only to the assault, but eventually to other parts of their lives. Ultimately, a sense of helplessness can pervade one's sense of self if nothing is done about the initial assaults and/or abuse. Having been powerless once, they are not sure they won't be powerless again.

If we look at what the men reported regarding feeling powerful, we see that they reported not talking at all about feeling powerful 76% of the time, the highest percentage for a male theme in the Likert value of "1," along with "competitive." In fact, Table 24 shows that "powerful and competitive" have the same scores when grouped according to the high, medium, and low -degree levels. For the men, then, it is likely that these two constructs correlated positively with each other.

At this juncture, it is important to discuss some detailed statistics that SPSS performed with the Cronbach's Coefficient Alpha. Entitled "Reliability Analysis," SPSS dissected the data and reported two types of scores: 1) The Alpha, If The Item Was Deleted, and 2) The Corrected Item - Total Correlation. The first score tells us how much the alpha would be reduced or increased if the particular item one is studying is not included in the analysis. The corrected item examines the single item that

Question 4 - Wilcoxon-Mann-Whitney Means Rank Sum Test

Are the gender themes and affective states' responses similar or different for the men and women in the treatment groups?

After analyzing the data, it is apparent that the gender themes and affective states' responses are different for the men and women in the treatment groups. Nonetheless, this answer does not give us any "hard" information either with respect to how much difference there is or in determining the signficance of those differences. The Wilcoxon-Mann-Whitney (W-M-W) test detects differences other than that of central tendency by locating the samples on a single continuum which produces useful information regarding their ranks to each other and level of significance.

Another common test used in social science research for detecting significant differences between two groups is the t-test. The t-test, however, is used for interval/ratio - level data and assumes a large sample that is randomly drawn (Kerlinger, 1986; Blalock, 1979; and Leonard 1976). Since this study used ordinal - level data with a small sample, the Wilcoxon-Mann-Whitney (W-M-W) analysis was deemed more appropriate. As in any other inferential statistic, the W-M-W assumes random sampling to which, by strict standards, this research does not conform. A discussion regarding the use of the W-M-W in this study,

examining the sample and its validation of the descriptive
analyses, follows.

The sample included the <u>total population</u> of single-
gender groups being seen in Agency A between October, 1989
and December, 1989 and in Agency B between September, 1989
and November, 1989. Blalock analyzes the debate which
surrounds the use of significance tests when one's sample
includes the entire population. "The position one takes on
this question seems to depend primarily on whether one is
satisfied with generalizations to fixed populations, or
whether one wishes to make inferences about the causal
process that may have generated the population data"
(Blalock, p. 242, 1979). He notes that the argument for
making causal inferences from non-experimental data based
on samples incorporating entire populations includes
findings linked with theoretical concepts. Thus, he
believes there are times when "it makes sense" to use tests
of significance when one has data with the type of sample
used in this study. Blalock emphasizes, however, that in
this situation a test of significance will not rule out
other kinds of alternative explanations which need to be
addressed.

This study seeks to make inferences about the causal
process from theoretical concepts, i.e., whether
hypothesized male and female affects and behaviors
contribute to or "cause" the difference in the scores on the

instrument. Several alternative explanations are addressed below in Section F regarding the differences in scores.

Finally, in his discussion of the <u>robustness of a test</u>, Blalock raises the issue of following strict standards of measurement by asking, "What harm does it do to use a difference-of-means test if the populations have a specified non-normal form?" (Blalock, 1979, p. 274) He answers by suggesting the use of several tests on various levels and then allowing the reader to make his/her decision regarding interpretation of the findings. Since the descriptive statistics revealed obvious differences between the men's and women's groups, especially in the affective states, it was deemed appropriate to examine whether or not these findings would be indicated and/or validated with the W-M-W analysis.

In general, the W-M-W is used to test whether two independent groups have been drawn from the same population when ordinal level measurement has been achieved. It is considered to be one of the most powerful nonparametric tests of significance (Siegel and Castellan, 1988; Blalock, 1979; and Leonard, 1976). With this in mind, it usually states the null and alternative hypotheses regarding the specific study.

The null hypothesis, therefore, in this study is that the mean ranks of the women's responses for each category will be the same as the mean ranks of the men's responses,

i.e., no difference between the two. The alternative
hypothesis is that the mean ranks would be different, i.e.,
that the mean ranks of the women's responses would be
greater than the mean ranks of the men's responses for each
category.

Table 25 (see following page and Appendix) provides
the results of the W-M-W for each category. At a .05 or
less level of significance for all nine categories, the fol-
lowing categories occur at higher mean ranks for the women's
groups than for the men's groups: Male Themes, Male Feelings
Discussed, Female Feelings Felt, Female Feelings Discussed,
Neutral Feelings Felt, and Neutral Feelings Discussed.
"Female Themes" is approaching significance at a P =.06.

Thus, the differences in six out of the nine
categories are statistically significant, and therefore,
with these particular categories, one would reject the null.
In "Female Themes," this research would also reject the null
since it is approaching significance very closely. However,
one would accept the null in "Male Feelings Felt" and
"Neutral Themes" and assume there is not a signifcant
difference between the two groups in these categories. With
these results, one would consider the two groups to be
significantly different. However, with a small sample such
as this, and considering it was not randomly drawn, one
should not emphatically state a significant difference
exists. Instead, we can use the descriptive statistical

TABLE 25

WILCOXON-MANN-WHITNEY MEAN RANK SUM TEST SCORES

CATEGORIES

	MT	MFF	MFD	FT	FFF	FFD
MEAN RANK						
MEN	8.92	12.27	10.58	10.69	9.35	9.92
WOMEN	18.08	14.73	16.42	16.31	17.65	17.08
EXACT 2-TAILED P:	.0015	.4184	.0501	.0642	.0042	.0164

	NT	NFF	NFD
MEAN RANK			
MEN	11.12	9.58	8.38
WOMEN	15.88	17.42	18.62
EXACT 2-TAILED P:	.1129	.0072	.0003

LEGEND

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MT  = Male Themes
MFF = Male Feelings Felt
MFD = Male Feelings Discussed
FT  = Female Themes
FFD = Female Feelings Felt
FFD = Female Feelings Discussed
NT  = Neutral Themes
NFF = Neutral Feelings Felt
NFD = Neutral Feelings Discussed
```

results to assume that a difference between the men and women exists and state that the W-M-W, as a more powerful statistic, validated what we saw.

This particular situation clearly reflects how rigid, scientific standards of measurement can sometimes decrease our ability to detect significant differencs or relationships when involved in clinical research. Even though the $\underline{n}$ is rather small (13 men and 13 women, with two to three measures from each group member) and a convenient sample, the W-M-W provided a different picture of the data which frequencies, percentages and means could not. This was extremely helpful for postulating clinical implications for these particular agencies with these particular clients receiving this particular intervention.

Question 5 - Discussion

To what does one attribute these similarities and/or differences?

Methodological Issues

The similarities and/or differences between the men's and women's scores can be attributed in part to factors over which researchers and clinicians have relatively little control in examining or "doing" group therapy. Previous sections of this paper have discussed in detail the methodological problems associated with research in social group work treatment.

Simply stated, the difficulty of doing research in group treatment is compounded by the complexity of the group phenomenon. "Maintaining experimental control of critical variables becomes more difficult as the number of participants increases. When these variables are interpersonal ones, the control problems increase at a factorial rate" (Bednar and Kaul, 1978. pp. 769-770). Bednar and Kaul note that significant treatment effects can be attributed to unrecognized, unintended, and in many cases unwelcome variations in a group's development. It is not surprising, therefore, to find nonspecific effects "arising from situational arousal and enthusiam...considering the high levels of emotional expression, interpersonal activity, and encouragement to disclose that are so common" in group therapy (Bednar and Kaul, 1978, p. 771).

Also, if one were to follow a strict line of inquiry, the samples are different. For the most part, the men were the overt abusers, while the women in this sample were either the victims or "passive observers" to the abuse of their children, with little power and access to services for help. The similarities and differences of the men and women in this sample were previously discussed at length in Chapter IV under "Sampling." Suffice to say that this could be a contributing factor to the differences in the findings.

Clinical picture

The members of the women's groups _generally_ reported

1) talking about the identified themes, 2) feeling the identified feelings and 3) talking about the identified feelings more frequently and to greater degrees than the members of the men's groups. Not only were the high women's scores in the hypothesized male categories unexpected, but the findings regarding the men reporting on the "feelings" categories were unforeseen. Specifically, the men in these groups had difficulty identifying affective states and even more difficulty talking about them. The men's low frequencies and low degrees warrant a discussion regarding the clinical picture of this sample and their presenting problems.

The men and women in this research have been victims at one time or another in their lives of some form of physical abuse, molestation and/or assault. In treatment, many clients with this presenting problem report that in order to survive the trauma, they experience dissociation, whereby they somehow psychologically/emotionally detach themselves from the physical experience. Some report actually "watching the abuse occurring from the corner," others discuss how they literally block out every feeling in order to avoid any pain, and some simply forget the event ever occurred. Essentially, the victims "cut off" or "split off" from their feelings in order to defend against the pain. When this type of experience repeatedly occurs over time or is not dealt with appropriately through

clinical intervention, the ability to identify or "get in touch with" affect in general decreases.

In discussion regarding the above statistical findings, the group workers of both agencies report that these clients undoubtedly experienced the "splitting off of feelings" as described above. The consequences are enormous, because the clients then increase their chances of not not acquiring the ability to attach general life experiences to appropriate affect, and will therefore remain "cut off" from feelings throughout their daily lives. Statistically, this has appeared for the members in the men's groups more than for those in the women's groups. The question remains, however, as to why the women in this sample were still able to report how they felt and talk about their feelings much more frequently and to greater degrees than the men. As previously suggested, our socialization process regarding appropriate gender roles and behavior allows, sanctions, and contributes to women getting in touch with and strenghtening their abilities to remain connected with their feelings via their connections with each other. Pogrebin writes:

> Most women communicate with their best friends on three levels: topical (politics, work, events), relational (the friendship itself), and personal (one's thoughts and feelings). Most men, however, generally restrict their exchanges to the topical...Women talk about themselves, their feelings, doubts, fears, loves, relationships, families, home and problems; men talk about competition and aggression and things they have seen or heard...while men equate friendship with fun, for

women friendship revolves around shared angst,
trauma or difficulty (Bader, on Pogrebin, p. 7,
1990).

For the women in this sample, being mothers, sisters,

daughters, and friends allowed them the opportunities to

gain access to their feelings <u>via the significant</u>

<u>relationships with each other,</u> while the men, for the most

part, did not have these types of opportunities, i.e.,

sanctions by our culture to form these types of connections

and meaningful relationships which provide access to

"feelings." Therefore, it is no surprise from a gender

theory perspective that the men would be in denial, cut off,

not in touch with their feelings, and threatened by sharing

these feelings with each other in a group treatment setting.

Group Environment and Process

For women, the social group work process offers an

environment which has a known quality to it, a place where

people share of themselves, their feelings, experiences,

wishes, hopes, and thoughts. As previously discussed, the

comfort level for women in groups is probably higher than

for men. Also, it is common knowledge that women attend

counseling nearly twice as much as men. This suggests that

women are more inclined to discuss their problems and admit

to their imperfections and limitations than men.

In light of these two notions, the social group work

setting can be very new and extremely threatening for the

men, especially with this group of clients who are court -

ordered for treatment. Thus, the differences in statistics can also be attributed to these circumstances.

Standard Deviation

The women had greater standard deviations (see Table 15) for eight out of the nine categories, the exception being "neutral themes" with the men's at .547 and the women's at .450. Thus, the women have a greater variance on their responses, especially in the category of "female feelings discussed," with a standard deviation of 1.006.

A possible cause of this variation might be that the women's groups came from two different agency settings with the focus of the stated presenting problems of the clients being different. Group 5 is from an agency treating families specifically for problems of incest. Group 6 is from an agency working with women who are victims of domestic violence. The focus of a short-term therapy group on the specific presenting problems of the clients, coupled with different social workers and the agency's defined goals and focus, can certainly cause this variation.

Table 26 (see following page and Appendix) lists the means for each category for each of the four groups studied. Group 6 from Agency 2 has higher means in every category than Group 5 from Agency 1. Comparing the two men's groups, Group 9 has higher means in five of the categories, two of the categories are nearly identical (female feelings felt and neutral feelings felt), and Group 8 has higher means in

TABLE 26

MEANS FOR EACH GROUP FOR EACH CATEGORY

CATEGORIES

	MT	MFF	MFD	FT	FFF	FFD	NT	NFF	NFD
WOMEN'S GROUPS									
#5	2.43	2.26	1.99	2.86	2.13	1.99	2.01	2.42	2.24
#6	2.78	2.81	2.55	3.41	2.39	2.66	2.31	3.19	2.70
MEN'S GROUPS									
#8	1.51	1.88	1.81	2.56	1.51	1.57	1.70	1.97	1.55
#9	1.79	2.77	1.76	2.72	1.58	1.39	2.10	2.26	1.57

LEGEND

MT = Male Themes
MFF = Male Feelings Felt
MFD = Male Feelings Discussed
FT = Female Themes
FFF = Female Feelings Felt
FFD = Female Feelings Discussed
NT = Neutral Themes
NFF = Neutral Feelings Felt
NFD = Neutral Feelings Discussed

the remaining two categories. Variations in scores, then,
can be attributed in part to these circumstances.

Instrumentation - Reliability and Validity Threats

A self-reporting instrument given in an emotionally
charged clinical situation with hypothetical constructs
lends itself to various validity and reliability threats,
which can influence the results of the data and therefore
be a cause for the variation in scores.

In reference to the results from Cronbach's
Coefficient Alpha, the instrument is more reliable for the
women in this sample than for the men. One can therefore
assume that the results for the men in several categories
would not be as consistent over time as they would be for
the women. However, when one analyzes each of the 66 items
separately for the groups, as was done in this study,
significant patterns do emerge that justify drawing a number
of conclusions regarding the findings.

Threats to content and construct validity arise with
respect to how each member interprets the theoretical
constructs of the 66 items, how accurately the items fit
into hypothesized male, female, and neutral categories
according to gender theory, and how the client understood
and interpreted for himself/herself the specific questions
and Likert values. The Pearson's r provides us with some
information regarding the correlation between categories.
The men had several items highly or very highly correlated,

and the women even more than the men. This could also influence the difference in scores between the two genders.

Considering the subjective nature of determining content validity and, in strict terms, a question regarding the use of the Pearson's r with this purposive sample ordinal-level data, one cannot assume complete instrument validation, especially with the results regarding validity with the male sample.

Campbell and Stanley (1963) discuss "testing" as a threat to internal validity. Essentially, this is the effect of taking the same test several times. Since the instrument was administered three times to the group members, familiarity with the instrument occurs. Thus, knowing that they would be "tested" at the end of the session and/or having knowledge regarding the questions of the SGWR could have affected the scores for the second and third measures.

Social Worker

The group leader has both direct and indirect influence and responsibilities in the groupwork setting.

> He attempts to change members by his personal
> interaction with each individual in the group, and
> he has a social engineering function in which he
> indirectly contributes to outcome by helping to
> construct a group which is an effective agent of
> change...The leader's person and behavior loom very
> large in the course of the group, and he is
> generally endowed by the group members with surplus
> meaning and power... (Lieberman, Yalom, and Miles,
> 1973, p. 429).

In this early study of encounter groups in the late 1960s, Lieberman, Yalom, and Miles found that the factors most important in determining client change were not significantly influenced by the worker's theoretical approach, i.e., Gestalt, Transactional Analysis, Psychodrama, Personal Growth, Analytic, etc. Instead, the most effective worker style was displayed by workers who were moderate in the amount of stimulation they offered to the group, high in caring for the welfare of the group members, and moderate in setting rules, limits, group direction, procedures, and decision-making.

In their most recent review of the literature regarding the worker's influence on group psychotherapy, Beutler, Crago, and Arizmendi (1986) have defined the specific variables of a clinician which have impact on the therapeutic relationship and outcome of treatment. These include age, gender, ethnicity, socioeconomic status, professional background, therapeutic style, therapuetic interventions, relationship attitudes, social influence attributes, expectations, personality patterns, emotional well-being, and attitudes and values (Beutler, Crago, and Arizmendi, 1986, p. 258). They note that many of these are so interrelated that attempting to separate them does an injustice to their complexity. Finally these authors state how difficult it is to separate the therapist from the therapy and the patient, when one is attempting to ascertain

exactly which therapist variable being investigated is the influencing factor in the clinical work.

It is not the intention of this study to directly examine the group workers' impact on the therapeutic process, nor to discuss the findings of the dozens of studies reviewed by Beutler, Crago, and Arizmendi. However, it would be a disservice not to speculate on how some of the workers' differences could affect the group members' responses in this research.

A difference in agency settings could have influenced the scores, particularly between the women's groups. Worker theoretical orientation has a large impact on the behavior of the group and its members. Every worker in this study stated they practiced from a psychodynamic perspective, along with various other methods depending upon the needs of the clients and agency function. The worker from Agency 2 in group 6 stated she practiced from a femininst perspective, which could certainly influence the higher scores in the women's groups, and more specifically the larger variance and standard deviation in the women's means.

Having two female workers in one of the men's group is significant to point out for this particular study. Reutler, Crago, and Arizmendi (1986, p. 265) found that overall, the current research suggests that "female therapists, first, and therapists of the patient's gender, second, facilitate treatment benefit, especially if these

therapists present a nonstereotypic sexual viewpoint."
Also, the literature review in Chapter III regarding
mixed-gender groups found that men benefitted from being in
mixed-group settings more than from being in all-men's
groups. Even though the women in Group 9 were the leaders
and the men were the members in this study, they are still
working together in a group therapy setting, whose roles,
behaviors and feelings are partly influenced by their
genders.

These two points could explain the higher mean scores
in Group 9 with the female workers than in Group 8 with the
male worker (see Table 26). Group 8 had higher means in
only three categories, all being the "feelings discussed,"
of which two ("male feelings discussed" and "neutral
feelings discussed") were very close to being equal scores
with Group 9.

One could speculate that the men with the male leader
felt "safer," less threatened, and/or more comfortable about
discussing their feelings with only men. In other words,
they did not have to "play out" the traditional male
characteristics of being in control and self-confident, and
could "let down" in an all-men's group which includes the
worker. However, this would contradict previous research
which found that men were able to discuss their feelings and
display more interpersonal interaction in a mixed-gender
group than in an all-male group (Aries, 1976). Also, it is

possible the male leader in Group 8 might have encouraged the group members to "discuss their feelings" more than the female leaders in Group 9. In any case, the differences in these mean scores are worth examining. Having a male leading one of the men's group and females leading the other could certainly cause a difference in the findings.

Note Tables 27, 28, 29, and 30 (see following pages and Appendix). These tables contain the verbatim responses by the group members to questions E and F on page five of the instrument. The questions asked the member to write down which topics they initiated during group for that session and which topics were initiated by the worker. This researcher, who has led dozens of both short and long term treatment groups herself, strongly believes one of the biggest impacts on any group is the social worker's style, i.e., how active or passive s/he is, what topics s/he initiates and which ones s/he allows and/or encourages the members initiate.

The topics of abuse and relationships appear to be consistent throughout the sessions for all four groups. From the group members' perspectives, some of the workers were more active at times than others. This is certainly justified and expected from a therapeutic position, since the purposes and needs of the group and its members, where the group is in its development, and what issues are being dealt with - all need to be considered.

TABLE 27

CONTENT ANALYSIS OF TOPICS MEMBERS AND WORKERS

INITIATED IN GROUP SESSIONS AS REPORTED BY MEMBERS

GROUP 5

The below material is taken verbatim from the written responses of the members to questions E and F on page 5 of the instrument. Group 5 is the women's group from AGENCY 1 with the two female workers.

QUESTION E: What subjects or topics did you personally initiate in this session? (reported by members)

MEMBERS:

1st session: being verbally abused, abusing our bodies, being abused as a child

2nd session: when you are abused in your life, cause and effect of a comment made to you, how our parents were good and bad parents and how that affects us, how my actions impact other family members, none

3rd session: babysitting problem and not getting paid for it and speaking out for it, christmas holidays and stress of hodlidays, how to take care of myself, none

QUESTION F: What subjects or topics did the worker initiate in this session? (reported by members)

WORKERS:

1st session: handling the abuse, people abusing us and abuse to ourselves, questionnaire about abuse

2nd session: boundaries and barriers of sexual, physical, and emotional abuse, feelings, family

3rd session: holidays and stress

TABLE 28

CONTENT ANALYSIS OF TOPICS MEMBERS AND WORKERS

INITIATED IN GROUP SESSIONS AS REPORTED BY MEMBERS

GROUP 6

The below material is taken verbatim from the written responses of the members to questions E and F on page 5 of the instrument. Group 6 is the women's group from AGENCY 2 with the single female worker.

QUESTION E: What subjects or topics did you personally initiate in this session? (reported by members)

MEMBERS:

1st Measure: visitation issues with children, emotional abuse my husband put my daughter through, frustrations of meeting new people, abuse as only physical, control, powerless, guilt, isolation, lonely, worthless, abuse, anger, rage, sadness, helplessness, fear, not in control of life, separating from abuse

2nd Measure: children carrying on abusive traits, suicide, drinking, games, depression, brain washing by an abuser, anger, sadness, my life, my feelings.

3rd Measure: ambivalent feelings children have for mother and father, guilt, anger, lonliness, rejection, fear, taking care of self, giving time to myself

QUESTION F: What subjects or topics did the worker initiate in this session? (reported by members)

WORKER:

1st Measure: feelings, legislative bills to be passed before the House (of Representatives), these surveys, anger, hopelessness, sadness, anxiousness

2nd Measure: how husbands controlled us, what things we've given up, anger, lonliness, feelings, imbalance of power, seeking help

3rd Measure: feelings independence, anger, individual choices from previous week

TABLE 29

CONTENT ANALYSIS OF TOPICS MEMBERS AND WORKERS
INITIATED IN GROUP SESSIONS AS REPORTED BY MEMBERS
GROUP 8

The below material is taken verbatim from the written
responses of the members to questions E and F on page 5 of
the instrument. Group 8 is the men's group from AGENCY 1
with the single male worker.

QUESTION E: What subjects or topics did you personally
initiate in this session ? (reported by members)

MEMBERS:

1st Measure: what initiated the cause of abusing the kids,
outcome from weekend home visitation, impact of molester
returning home, restitution and reaction to joint session,
feelings of responsibilty toward victim, none

2nd Measure: TV programs and influence on our egos,
avoiding future molestations, none

3rd Measure: parents responsibility of informing kids about
sex equally for boys and girls, when are you ready for a
sexual relationship, discussions about feelings with family,
none

QUESTION F: What subjects or topics did the worker initiate
in this session? (reported by members)

WORKER:
1st Measure: feelings of retaliation toward abused child,
what could be said to make things better, feelings at time
of involvement, emotional and sexual basis for molestation,
our feelings, what might have caused the molest

2nd Measure: controlling self in sexual situations,
controlling fantasies, none - he redirected the subject to
get more responses

3rd Measure: how we felt or knew when we were ready for
sexual involvement, rejection in family, problems kids face
in school when students ask molested kids questions - how
they respond and express feelings, pressure from holidays

TABLE 30

CONTENT ANALYSIS OF TOPICS MEMBERS AND WORKERS

INITIATED IN GROUP SESSIONS AS REPORTED BY MEMBERS

GROUP 9

The below material is taken verbatim from the written responses of the members to questions E and F on page 5 of the instrument. Group 9 is the men's group from AGENCY 1 with the two female workers.

QUESTION E: What subjects or topics did you personally initiate in this session? (reported by members)

MEMBERS:

1st Measure: relating with spouse, lonliness, laziness, isolation, assertion, confidence, self-awareness, association with adult feelings and childhood events, fair punishment for crimes, none

2nd Measure: relationship with wife and in-laws, court, drug and alcohol abuse, none

3rd Measure: legal system and the courts, wife and child relationships, none

QUESTION F: What subjects or topics did the worker initiate in this session?   (reported by members)

WORKERS:

1st Measure: relationshiops, fears, accomplishments, AA, alcohol and drug abuse, introduced to new members, status of our marriages and separations, don't remember, none

2nd Measure: feelings and emotional reactions regarding other members

3rd Measure: sex, jail, sentencing, none was needed

It appears that the workers initiated "feeling" topics and themes which are objects of study in the instrument. This would certainly contribute to the similarities and differences between each groups' scores and skew the results. However, how is one truly able to control for this without considering ethical issues regarding the treatment? Every therapist is trained to address group members' affect with respect to their presenting problems. Therefore, it would be expected that the workers would initiate discussion of their clients' anger, sadness, lonliness, etc. The question is the degree to which the social worker was influenced by seeing the instrument before engaging in the therapy with these clients. At this point, one will never know, but one could assume the training sessions did impact the workers' interventions to some extent, either consciously or unconsciously. Regardless, these tables provide valuable information which cannot be overlooked when speculating on the causes of the similarities and differences between the groups' responses.

Finally, how the worker proceeded with the actual data collection may have effected a variance in scores. Although the researcher trained all the workers at the same time with the same set of instructions, one cannot control for the various differences in worker presentation, group atmosphere, client variables, and subtle interactions that occur in the group process. Every worker informed the

researcher that their data collection went smoothly, with some group members expressing interest in the findings, while others "did it matter-of-factly." In only one instance did one member from one of the men's groups refuse to participate, expressing fear of lack of confidentially. However, he too, participated in the third data collection.

It is likely that the content of the instrument and the research process did influence, to some degree, how the workers may have focused the sessions being analyzed. Nevertheless, it appears the clinical work being done was certainly ethical and professional, was focused in on the needs of the clients and the groups, and was appropriate for the long-term work of treating the clients' problems. It is also highly probable the workers followed their therapeutic agendas and concentrated on the clinical needs of their clients without considering the research.

It is therefore difficult to draw any solid conclusions regarding how much and which therapist variables influenced the differences and similarities of the scores between the men's and women's groups. We can certainly speculate on and address those variables which had probable impact and encourage further study on these issues.

Question 6 - Discussion

Is gender identity development theory reflected in these specific social group work treatment settings?

This question basically addresses the emerging

hypotheses regarding men, women, and their expected responses according to gender theory:

a: Men in the men's groups will report higher frequencies than women in the women's groups in the categories defined as "male themes, male feelings felt, and male feelings discussed."

b: Women in the women's groups will report higher frequencies than men in the men's groups in the categories defined as "female themes, female feelings felt, and female feelings discussed."

Simply restated, gender theory maintains that people evolve identities, develop senses of selves, and symbolically interact with others and the world around them through the roles they are given or choose in our society. Psychologically, men "learn" that to be masculine in our society, they need to eventually separate, individuate, and remain _affectively_ detached from others in order to be accepted by their peers, co-workers, friends, and family as mature, individuated, autonomous adult males. This affirmation by others through symbolic interaction leads to his identity as a "man," which is equated with his being powerful, competitive, self-confident, capable, aggressive, and strong. Biologically, a recent study reported in the _New York Times_ confirmed that testosterone, a male hormone, is linked to competitiveness and dominance, and that high levels of testosterone "play a role in the normal urge for

the upper hand" (Goleman, 1990, p. 5).

Women, however, psychologically develop their identities and senses of selves through their connections, relationships, and attachments to others via the roles they acquire. As sisters, mothers, daughters, teachers, secretaries, nurses, hostesses, cooks, and homemakers, their sense of "femininity" develops as they symbolically interact with those whom they, teach, parent, nurture, comfort, are responsible, and care. In order to successfully fulfill the responsiblities of these roles, women develop a sense of empathy, which becomes the central organizing concept in their relational experiences (Surrey, 1988).

Women place a strong emphasis on forming and maintaining these meaningful affiliations, and therefore become dependent on these friendships for support, encouragement, and a sense of self. "Self-esteem then, is related to the degree of emotional sharing, openness, and a shared sense of understanding...(Surrey, 1988). When women lose these relationships and connections, or are judged by others to be failing in their responsiblities, they tend to feel somewhat inferior, lonely, ineffective, and rejected.

The traditional male perspective would then label this dependency as pathological, while a feminist perspective sees this dependency as healthy, natural, and expected. Gender identity development theory is reflected in the women's groups in the female themes. Being concerned for

others' needs; their homes, family, and friends; and feeling responsible for others' welfare had the highest frequencies of any category in the women's groups. In "female feelings felt and discussed," gender theory does not emerge as readily, except in feeling "emotional and helpless." When compared with the men's responses in these two categories, the women's are much greater.

Even though hypotheses were not considered for the neutral items, the women's groups had high scores on "neutral feelings felt and discussed," which would reflect gender theory in the sense of women being connected with their feelings in general.

What does not reflect gender theory and is in conflict with the group literature are the women's scores with the male themes. Having control over others, not needing others to tell them what to do, persuading or influencing others, having power over others, and feeling self-confident all had high scores for the women. However, it needs to be clearly stated that the responses reflect "the topic talked about," not asking specficially who is "controlling, persuading, or influencing" whom. The idea here is that the women are reporting having talked about these topics, while the men are not.

Gender theory is not reflected in "male feelings felt" for the women. They reported feeling very capable and rather powerful, self-confident, strong, and aggressive.

They felt somewhat competitive and not dominant. The women reported not spending a lot of time talking about these male feelings, although "self-confident, strong, and independent" were male feelings discussed somewhat frequently.

Gender identity development theory is not reflected in the mens' groups in any of 22 hypothesized male items except for "feeling capable and talking about feeling capable." It is reflected in the "female feelings and female feelings discussed" since these scores are rather low for the men. The only feelings that appear to emerge for the men are "emotional and helpless," in both "feelings felt" and "feelings discussed."

The men did not discuss any neutral feelings, although they did report feeling somewhat anxious, good, bored, and guilty. This would also reflect gender theory, i.e., the men did not talk about how they felt. Finally, the men did not talk about the identified male themes and reported discussing only one neutral theme, "romantic or sexual involvement." What is unexpected is their reporting rather high frequencies on the hypothesized female themes, i.e., concern for others, feelings about being too close to others, family and friends, and responsible for others' welfare.

In conclusion, the findings from this study confirm some of the hypotheses for both the men and women, and

disprove others. Gender theory is reflected by the women's groups in "female themes" to a high degree and to moderate degrees in "female feelings felt," and "female feelings discussed." It is not reflected in "male themes" and in "male feelings discussed." However, it is presented in "male feelings discussed" to a low to moderate degree.

Gender identity development theory is reflected to a high degree for the men's groups in "female feelings felt" and "female feelings discussed." It is not indicated in "male feelings felt," "male feelings discussed," "male themes" and "female themes."

CHAPTER V

IMPLICATIONS OF FINDINGS

Research

Heuristic Approach v. Logical Empiricism

The debate regarding methodological standards between the heuristic approach and the logical empiricism approach in social work research has been previously addressed (Mullen, 1985; Heineman Pieper, 1983; Hudson, 1982; Schuerman, 1981; and Heineman, 1981). It is obvious from this clinical study that the tenets of the heuristic approach are applicable to the questions being asked. As stated above, the purpose of this endeavor was to inform and guide agency practice regarding gender issues in social group work treatment with the particular populations being served.

This study treated the skills of the practitioner as resources, not as liabilities. It respected the trained judgments of the group worker rather than "scoffed at them as soft and inherently unreliable." It has generated knowledge that is more relevant to the clinician and more applicable to the important problems with which the field of social work is and will be confronted, rather than concerned itself with following restrictive quantified

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methods (Heineman Pieper, 1983 p. 3).

On the other hand, one cannot ignore some general notions regarding the scientific process that has historically provided us with valuable information and tools to guide our practice and theory building. This research has utilized scientific data analyses, applied specific discussions regarding experimental control of influential variables and attempted to theoretically construct measureable items, e.g., the themes and affective states, in order to begin making predictions regarding treatment.

> Although prediction as a test of a theoretical proposition plays an important confirmatory role in basic science, it also can be thought of as a theory's ability to provide practical guidance to practitioners. In social work practice, theories of intervention might be expected to provide sufficient precision to suggest to practitioners how they might intervene to achieve a particular purpose. This idea of prediction does not equate explanation and prediction, and it is different from that of prediction as a test of a theory. It seems especially important to practitioners and is the type of prediction that ...(discusses)...the relative importance of prediction over explanation for social work practitioners (Mullen, 1985).

The literature on gender issues in group therapy gave little indication of using a quantified instrument to obtain members' feedback addressing issues about which this researcher has written. The few articles and discussions on gender issues in group work with non-student samples have not been empirically based, but rather were written from the worker's own perspective of the group process. By involving the group members in the research process with this

quantified questionnaire, the agency social workers were provided with an opportunity for "hard" feedback regarding their clinical work. This research process engaging the group members' participation has also communicated to them that their impressions and feelings regarding the treatment were being examined and highly regarded, which in turn increases their involvement in the clinical work.

Therefore, this study utilized the most appropriate methods and tools which the field of social work has at this time in order to answer the specific questions raised, under the given conditions, with the available agency populations. It drew on both heuristic and empirical methodologies, which provided the foundations for this clinical research.

Future Applications

This study has raised questions regarding the efficacy of gender issues in group treatment. The findings cannot be generalized to other types of group settings, a similar population being served in a clinical setting, and/or other populations meeting in group therapy at this time. It was a beginning attempt to empiricize certain theoretical constructs and address issues in social work group treatment so that others may learn from its process and problems. Threats to reliability and validity with the instrument are apparent, most notably with the men's groups.

Of the earlier research that did include instruments

examining the interaction and behavior of men and women in groups, student samples were obtained. Some of the findings in this current research contradicted these previous studies and discussions regarding male and female behavior engaged in groupwork. One can assume that using a clinically based sample had a significant impact on the findings. Thus, the socioeconomic class of the group members and socialization to the client role probably contributed considerably to these differences regarding what the group members talked about, felt, and reported feeling.

What is now called for is further research examining male and/or female groups in a variety of clinical and/or agency settings, each with its own presenting problem. Since this study's client population presented with problems that are extremely gender - laden, it would be valuable to test clients working with such other concerns as developmental issues (widowhood, new parents, approaching middle age), health problems (cancer support group, over-eaters), and family issues (adult children of single parents, problems with caring for elderly relatives), etc. This would aid in discovering how the different client demographics and presenting problems influence the results of the data.

It would also be interesting to examine the same agencies used in this research with another group of their

clients. The results from this could be used to determine if the findings hold true for the clients using these agencies with their specific presenting problem. Also, other agencies serving families being treated for domestic violence, abuse, incest, etc., could be studied. The results could then be compared, and possible generalizations could be <u>considered</u> for further study with this client population.

Practice

The value of group work intervention has been validated in treating clients presenting with problems associated with domestic violence, incest, childhood molestation, etc. By examining Tables 27, 28, 29, and 30, it is obvious the clients were active participants engaged in the helping process with experienced clinicians who were committed to the clients' overall psychological and social well-being.

Group work can be extremely difficult with respect to its formation, maintenance, and achievement of goals, considering the different personalities and individual needs of each client. Agencies frequently treat clients via individual and family therapy rather than using group intervention, due to the logistic difficulties. However, directors, supervisors, program administrators, and social workers should not allow these obstacles to intrude on their intervention plans when treating the client and his/her life

situation. They should seriously consider the advantages
group work has to offer, clinically and financially, for the
client, the agency and the social worker.

Recommendations need to be made regarding men who are
victims of childhood abuse and/or assault. These findings
clearly showed that the men in this sample were
uncomfortable and in some cases unable to "be in touch with"
and report their feelings. What this social worker and
those of Agency 1 are calling for is more early intervention
with boys (from childhood through adolescence and early
adulthood) who are known or suspected victims of childhood
abuse/molestation. The treatment needs to include active
involvement on the part of the worker in identifying
affective states, not only around the particular abusive
incident(s), but also around life situations in general.

This clinical work could not only address the boy's
current psychological and physical condition, but also
prevent a life without understanding, appreciation and
connection with appropriate affect. Early intervention
with an empathic self-object would allow the boy an
opportunity to form a positive, healthy relationship which
he could eventually transfer to other relationships in the
outside world. This would most likely lead to prevention
of his becoming an adult who defends against his childhood
pain by abusing others, i.e., his wife and children.

Social group work treatment for women whose emotional

and physical needs are not being met by our society needs to continue. Early intervention using group methods with abused and/or assaulted female children and adolescents would facilitate treatment and, in fact, affirm their senses of identity and affiliation with their peers, given what we know regarding the psychological development of females and their comfort level in a group environment.

Teaching

Femininst theory and Stern's theory of interpersonal relatedness share many notions and theoretical constructs regarding the formation and critical importance of attachments and relationships throughout one's life. It would contribute considerably to our field to include these writings and contributions in our syllabi for the Human Behavior and Social Environment sequence. To continue teaching that individuation and separation is the only goal of psychological development and identity formation does a disservice to our students, client research, and theory building.

Incorporating feminist identity development theory into the curriculum would give our students a broader understanding of the human condition and therefore allow them to diagnose and treat their clients from a gender perspective when appropriate. It would also allow them to examine their own identity issues from a gender perspective,

which would make for an increased awareness of their own
social and psychological issues, aiding them in achieving a
more productive field placement experience.

Finally, it would be feasible and would contribute to
our knowledge building to administer this research using
student samples during a simulated group experience. More
information could be obtained regarding the variables
contributing most signifcantly to the research results.
The findings from these student samples could then be
compared to and examined with those from the agency-based
population.

Theory

The clinical disciplines of social work, psychiatry,
and psychology have not, as yet, been able to provide an
adequate theoretical understanding and conceptualization of
how and why group thearpy can be effective for meeting the
various needs of people presenting with problems around
their difficult life situations.

Schlachet notes that group theorists and researchers
are still a long way from forming a satisfactory global
theory of group psychotherapy (Schalchet, 1986). Kaul and
Bednar state that the accumulated evidence suggests that
group treatments have been shown to be effective, at least
to some degree under some conditions which are,
unfortunately, basically unknown...After nearly four decades
of research, there are no fundamental improvements in our

knowledge about the more specific and basic elements of
effective group treatments...With a few noteworthy
exceptions, group theorists have ignored the issue of
developing an even partially separate conceptual identity
for the group discipline ...(as compared to individual
psychotherapy)...The result is that the group discipline has
borrowed, and failed to modify, major portions of its
conceptual identity. The result is more theoretical
immpoverishment than one might desire (Kaul and Bednar,
1986. pp. 671-672).

This researcher/social work clinician has begun to
address examining a different perspective of group treatment
which makes an attempt toward developing a theory of group
work treatment. In an unpublished paper, this researcher
writes about her hypothesis regarding the effectiveness of
group therapy:

> As there are more shared themes among the group
> clients, as the meaning system becomes
> interpersonally constructed via both cognitive and
> affective processes, the members will increasingly
> respond to each other's needs, which then   creates
> a new sphere or "psychic space" of a shared meaning
> system, always evolving and changing over time.
> This becomes a circular process, i.e., as the
> members interact with each other, as they share
> their personal lives, thoughts, and feelings, then
> this sphere of shared experience of "intrapsychic
> group space" is created, which in turn influences
> how they choose to continue to share their lives and
> interact with each other. Invariably, each
> individual's internal being, that is, her sense of
> self or identity, and the choices she chooses to
> make for her own life, are influenced by the group
> experience. (Gagerman, 1988, p. 2-3).

This social worker firmly believes that Stern's theory of

human development, along with symbolic interaction theory,
can be applied and utilized in forming a theory of social
group work. This paper has defined the usefulness of
symbolic interaction, and how people internalize their
identities via their interactions with the world. It can
easily be applied to the group work setting as described in
the above paragraph.

Daniel Stern's theory of intersubjective relatedness
basically involves how people are able to let each other
know that what they are thinking and feeling is similar to
what another person is thinking and feeling. It is a
"deliberately sought sharing of experiences about events
and things" (Stern, 1985, p. 128). "For such an experience
to occur, there must be some shared framework of meaning and
means of communication, such as gesture, posture, or facial
expression" (Stern, 1985, p. 125). One can easily see how
this phenomenon occurs throughout the group process and
allows for connections and relationships to form.

From a femininst perspective, Surrey defines
intersubjectivity as "the ongoing intrinsic inner awareness
and responsiveness to the continous existence of the other
or others and the expectation of mutuality in this regard"
(Surrey, 1985, p. 9). As inersubjectivity increases between
two people, they will both grow toward better relatedness.

> In this model, the self gains vitality and
> enhancement in relationship and is not reduced or
> threatened by connections. (This) definition of
> relationship implies a sense of knowing oneself and

others through a process of mutual relational
interaction and continuity of "emotional-cognitive
dialogue" over time and space (Surrey, 1985, p. 10).

In social group work, the sharing of themes, affect,

intentions, and meaning systems develops. Connections,

relationships, and affiliations all become part of the

process which creates this group space. How the group

members negotiate and construct this group space via their

shared meaning system and connections is the basis of a

theory of group psychotherapy. Schlachet explains how D.

W. Winnicott addresses this phenomena by describing the

interpersonal relationship which unfolds between the mother

and infant. It can be applied to what occurs between the

members in the group treatment environment:

> (They)...share this intermediate space and often
> negotiate the process of constructing it together.
> As they get older, this intermediate world becomes
> the shared world of ...the communication of their
> private versions of reality...Very private worlds
> become mutually experienced (Schlachet, p. 36 and
> 39, 1986).

This research and theory of group psychotherapy, therefore,

draws from a combination of symbolic interaction, femininst

theory of connections and relationships, and current

analytic notions of the self in relation to others. If one

of the major purposes of group work is to build connections

and relationships among the group members, then feminist

thought, intersubjectivity, and theories of the self

beginning with the early symbolic interactionists to the

current psychodynamic self-psychologists, need to be

seriously researched and addressed for building a theory of group therapy.

This research examined and empiricized group content, i.e., the themes and affective states which had only just begun to develop among the group members. It attempted to include the above theoretical underpinnings. One can only speculate how much further the research would have gotten and the shared meaning system that could have been investigated, if the groups had met for a longer period of time. This, too, is an area for further research and development.

Conclusion

Definitions of relationships from a feminist perspective have important consequences for the women and men in our society and for the relationships between and among the two genders. By providing avenues which sanction men understanding, appreciating, and discovering their affective states through the relationships they form, men will be be able to uncover dimensions and strengths of their connections in ways previously untapped and unrecognized. For centuries, women have engaged in connections with their mothers, daughters, sisters, and female companions in a way that has finally been recognized and appreciated for its high value and worth. As feminists, we need to share our knowledge, intuitions, strengths, empathic abilities, and capacity to engage in shared meaning systems with our male

friends, brothers, fathers, sons, and husbands so that they may know the importance and beauty of an emotional, dependent, intersubjective, mutually nurturing relationship.

The social group work setting is one of those avenues, uniquely positioned and attuned to feminist values. As social workers, we need to encourage the development of these qualities in both the men and women in our treatment groups. By providing this type of experience for our clients, we will enable them to transfer these qualities to their significant relationships outside the group setting. As this occurs, our clients will live fuller, more complete lives by sharing their feelings and emotions with those to whom they are most close, thereby acquiring a lifetime of true connection to others and their own selves.

APPENDIX A

TABLE 1

SOCIAL GROUP WORK REPORT

These papers contain a series of questions about the group session which you have just completed. The questions have been organized in sets of three so that they are easier to read, and make the description of your experiences in the group simple and quick.

Please answer all the questions. This should take no longer than 15 mintues. Thank you for your help and cooperation.

Name(s) of Social Worker_____

Social Security Number or Code Word_____

Date of Session_____

On a scale between 1 and 5, circle the number that best answers your opinion for each question, with # 1 being "not at all" and # 5 being "a lot".

QUESTION # A.

WHAT <u>TOPICS</u> OR <u>SITUATIONS YOU HAVE BEEN IN</u>, DID YOU DISCUSS IN THIS GROUP SESSION?

NOT AT ALL...............A LOT

1.	Concern for other peoples' needs	1	2	3	4	5
2.	Romantic or sexual involvements	1	2	3	4	5
3.	Having control over or dominating a situation	1	2	3	4	5
4.	Things that happened in my childhood or adolescence	1	2	3	4	5
5.	Not needing anyone to tell me what to do	1	2	3	4	5
6.	Problems or feelings about being close to others	1	2	3	4	5
7.	Being able to persuade or influence others	1	2	3	4	5
8.	My boss or supervisors at work	1	2	3	4	5
9.	My home or things around the house	1	2	3	4	5
10.	My relationships with family members or friends	1	2	3	4	5
11.	My plans or goals for the future	1	2	3	4	5
12.	Having significant power over others	1	2	3	4	5
13.	My social activities, interests, or hobbies	1	2	3	4	5
14.	Feeling responsible for other's care or welfare	1	2	3	4	5
15.	Being competitive with people	1	2	3	4	5
16.	Being confident about handling things myself	1	2	3	4	5
17.	Life experiences during my adult years	1	2	3	4	5
18.	Having concerns about depending too much on others	1	2	3	4	5

These responses are in alphabetical order. Please give an
answer to each of them.

QUESTION # B: DURING THIS SESSION I <u>FELT</u>:

		NOT AT ALL.........................A LOT				
1.	Aggressive	1	2	3	4	5
2.	Angry	1	2	3	4	5
3.	Anxious	1	2	3	4	5
4.	Bored	1	2	3	4	5
5.	Capable	1	2	3	4	5
6.	Competitive	1	2	3	4	5
7.	Dependent	1	2	3	4	5
8.	Depressed	1	2	3	4	5
9.	Dominant	1	2	3	4	5
10.	Emotional	1	2	3	4	5
11.	Good	1	2	3	4	5
12.	Guilty	1	2	3	4	5
13.	Helpless	1	2	3	4	5
14.	Independent	1	2	3	4	5
15.	Ineffective	1	2	3	4	5
16.	Inferior	1	2	3	4	5
17.	Lonely	1	2	3	4	5
18.	Powerful	1	2	3	4	5
19.	Rejected	1	2	3	4	5
20.	Relieved	1	2	3	4	5
21.	Sad	1	2	3	4	5
22.	Self-Confident	1	2	3	4	5
23.	Strong	1	2	3	4	5
24.	Weak	1	2	3	4	5

These reponses are also in alphabetical order. Please
answer each of them. Note how this question is <u>different</u>
than the one you just completed.

QUESTION # C: DURING THIS SESSION I <u>TALKED ABOUT</u> FEELING::

                        NOT AT ALL..........................A LOT

1.	Aggressive	1	2	3	4	5
2.	Angry	1	2	3	4	5
3.	Anxious	1	2	3	4	5
4.	Bored	1	2	3	4	5
5.	Capable	1	2	3	4	5
6.	Competitive	1	2	3	4	5
7.	Dependent	1	2	3	4	5
8.	Depressed	1	2	3	4	5
9.	Dominant	1	2	3	4	5
10.	Emotional	1	2	3	4	5
11.	Good	1	2	3	4	5
12.	Guilty	1	2	3	4	5
13.	Helpless	1	2	3	4	5
14.	Independent	1	2	3	4	5
15.	Ineffective	1	2	3	4	5
16.	Inferior	1	2	3	4	5
17.	Lonely	1	2	3	4	5
18.	Powerful	1	2	3	4	5
19.	Rejected	1	2	3	4	5
20.	Relieved	1	2	3	4	5
21.	Sad	1	2	3	4	5
22.	Self-Confident	1	2	3	4	5
23.	Strong	1	2	3	4	5
24.	Weak	1	2	3	4	5

D. HOW DO YOU FEEL, IN GENERAL, ABOUT THE GROUP SESSION WHICH YOU HAVE JUST COMPLETED?   (Circle the one answer which best applies.)

THIS SESSION WAS:

Terrible   Poor   Okay   Very Good   Excellent

E.   HOW MUCH DID YOU TALK IN THE GROUP THIS SESSION?

Not at all   Not a lot   Some   Pretty Much   Very much

F.   WHAT SUBJECTS OR TOPICS DID YOU PERSONALLY INITIATE IN
        THIS SESSION?

G.   WHAT SUBJECTS OR TOPICS DID THE WORKER INITIATE IN
   THIS SESSION?

Thank you very much for your help.   Please make sure you have answered all the questions.

APPENDIX B

TABLE 2

CRONBACH'S COEFFICIENT ALPHA

ITEM	TOTAL SAMPLE	MEN'S GROUPS	WOMEN'S GROUPS
Male Themes	.77	.47	.75
Female Themes	.74	.75	.74
Neutral Themes	.81	.77	.81
Male Feelings Felt	.75	.62	.79
Female Feelings Felt	.78	.48	.76
Neutral Feelings Felt	.88	.38	.91
Male Feelings Discussed	.39	.60	.20
Female Feelings Discussed	.66	.22	.69
Neutral Feelings Discussed	.75	.51	.62

APPENDIX C

TABLE 3

PEARSON'S CORRELATION MATRIX
TOTAL SAMPLE

	MT	FT	NT	MFF	FFF	NFF	MFD	FFD	NFD
MT	-								
FT.	.767	-							
NT	.689	.673	-						
MFF	.423	.430	.511	-					
FFF	.555	.332	.238	.274	-				
NFF	.639	.627	.344	.494	.710	-			
MFD	.615	.657	.510	.602	.177	.486	-		
FFD	.687	.526	.352	.283	.797	.836	.420	-	
NFD	.804	.577	.514	.395	.731	.799	.618	.901	-

LEGEND

MT = Male Themes　　　　　　NFF = Neutral Feelings Felt
FT = Female Themes　　　　　MFD = Male Feelings Discussed
NT = Neutral Themes　　　　 FFD = Female Feelings Discussed
MFF = Male Feelings Felt　　 NFD = Neutral Feelings Discussed
FFF = Female Feelings Felt

GUILFORD'S TABLE FOR INTERPRETING PEARSON'S $\underline{r}$

RAW SCORE   DEGREE OF RELATIONSHIP
Less than or equal to:
(+ or -)

.00 - .20	Slight, almost negligible
.21 - .40	Low correlation, definite but small
.41 - .70	Moderate correlation, substantial
.71 - .90	High correlation, marked
.91 - 1.00	Very high and dependable

Source: Leonard, W.M. (1976) p. 323

APPENDIX D

TABLE 4

PEARSON'S CORRELATION MATRIX
LEVEL OF SIGNIFICANCE
TOTAL SAMPLE

	MT	FT	NT	MFF	FFF	NFF	MFD	FFD	NFD
MT	–								
FT	.00	–							
NT	.00	.00	–						
MFF	.03	.03	.01	–					
FFF	.00	.10	.24	.18	–				
NFF	.00	.00	.09	.01	.00	–			
MFD	.00	.00	.01	.00	.39	.01	–		
FFD	.00	.01	.08	.16	.00	.00	.03	–	
NFD	.00	.00	.01	.05	.00	.00	.00	.00	–

LEGEND

```
MT  = Male Themes
FT  = Female Themes
NT  = Neutral Themes
MFF = Male Feelings Felt
FFF = Female Feelings Felt
NFF = Neutral Feelings Felt
MFD = Male Feelings Discussed
FFD = Female Feelings Discussed
NFD = Neutral Feelings Discussed
```

$p < .05$ level of significance

APPENDIX E

TABLE 5

PEARSON'S CORRELATION MATRIX

MEN'S GROUPS

	MT	FT	NT	MFF	FFF	NFF	MFD	FFD	NFD
MT	–								
FT.	.898	–							
NT	.633	.671	–						
MFF	.069	.123	.210	–					
FFF	–.622	–.595	–.416	.017	–				
NFF	–.038	.013	–.146	.626	.437	–			
MFD	.794	.631	.242	.073	–.502	.052	–		
FFD	.327	.298	–.210	–.026	.611	.361	.611	–	
NFD	.587	.533	.162	.016	.051	.340	.758	.721	–

LEGEND

MT = Male Themes
FT = Female Themes
NT = Neutral Themes
MFF = Male Feelings Felt
FFF = Female Feelings Felt
NFF = Neutral Feelings Felt
MFD = Male Feelings Discussed
FFD = Female Feelings Discussed
NFD = Neutral Feelings Discussed

GUILFORD'S TABLE FOR INTERPRETING PEARSON'S r

RAW SCORE   DEGREE OF RELATIONSHIP
Less than or equal to:
(+ or –)

.00 – .20	Slight, almost negligible
.21 – .40	Low correlation, definite but small
.41 – .70	Moderate correlation, substantial
.71 – .90	High correlation, marked
.91 – 1.00	Very high and dependable

Source: Leonard, W.M. 1976 p. 323

APPENDIX F

TABLE 6

PEARSON'S CORRELATION MATRIX

LEVEL OF SIGNIFICANCE
MEN'S GROUPS

	MT	FT	NT	MFF	FFF	NFF	MFD	FFD	NFD
MT	-								
FT	.00	-							
NT	.02	.01	-						
MFF	.82	.69	.49	-					
FFF	.02	.03	.16	.96	-				
NFF	.90	.97	.64	.02	.14	-			
MFD	.00	.02	.43	.81	.08	.87	-		
FFD	.28	.32	.49	.93	.96	.23	.03	-	
NFD	.04	.06	.60	.96	.87	.26	.00	.01	-

LEGEND

MT = Male Themes
FT = Female Themes
NT = Neutral Themes
MFF = Male Feelings Felt
FFF = Female Feelings Felt
NFF = Neutral Feelings Felt
MFD = Male Feelings Discussed
FFD = Female Feelings Discussed
NFD = Neutral Feelings Discussed

$p < .05$ level of significance

APPENDIX G

TABLE 7

PEARSON'S CORRELATION MATRIX

WOMEN'S GROUPS

	MT	FT	NT	MFF	FFF	NFF	MFD	FFD	NFD
MT	–								
FT.	.688	–							
NT	.802	.670	–						
MFF	.533	.547	.790	–					
FFF	.583	.430	.447	.275	–				
NFF	.558	.708	.474	.426	.602	–			
MFD	.425	.590	.674	.940	.130	.467	–		
FFD	.584	.469	.487	.293	.852	.830	.225	–	
NFD	.711	.466	.698	.513	.737	.773	.434	.910	–

LEGEND

MT = Male Themes   NFF = Neutral Feelings Felt
FT = Female Themes   MFD = Male Feelings Discussed
NT = Neutral Themes   FFD = Female Feelings Discussed
MFF = Male Feelings Felt   NFD = Neutral Feelings Discussed
FFF = Female Feelings Felt

GUILFORD'S TABLE FOR INTERPRETING PEARSON'S r

RAW SCORE   DEGREE OF RELATIONSHIP

Less than or equal to:
(+ or -)

.00 - .20   Slight, almost negligible
.21 - .40   Low correlation, definite but small
.41 - .70   Moderate correlation, substantial
.71 - .90   High correlation, marked
.91 - 1.00   Very high and dependable

Source: Leonard, W.M. (1976) p. 323

APPENDIX H

TABLE 8

PEARSON'S CORRELATION MATRIX

LEVEL OF SIGNIFICANCE
WOMEN'S GROUPS

	MT	FT	NT	MFF	FFF	NFF	MFD	FFD	NFD
MT	–								
FT.	.01	–							
NT	.00	.01	–						
MFF	.06	.05	.00	–					
FFF	.04	.14	.13	.36	–				
NFF	.05	.01	.10	.15	.03	–			
MFD	.15	.03	.01	.00	.67	.11	–		
FFD	.04	.11	.09	.33	.00	.00	.46	–	
NFD	.01	.11	.01	.07	.00	.00	.14	.00	–

LEGEND

MT = Male Themes
FT = Female Themes
NT = Neutral Themes
MFF = Male Feelings Felt
FFF = Female Feelings Felt
NFF = Neutral Feelings Felt
MFD = Male Feelings Discussed
FFD = Female Feelings Discussed
NFD = Neutral Feelings Discussed

$p < .05$ level of significance

APPENDIX I

TABLE 9

KAZDIN'S TABLE OF SELECTED DIMENSIONS WHICH
INVESTIGATIONS MAY VARY IN THEIR DEGREE
OF RESEMBLANCE TO THE CLINICAL SITUATION

Dimension	Resemblance to the Clinical Situation		
	Relatively Little Resemblance (Analogue Research)	Moderate Resemblance	Identity with or Relatively High Resemblance (Clinical Trials)
Target problem	Nonproblem behavior, laboratory task performance, mild problem at subclinical levels	Similar to that seen in the clinic but probably less severe or more circumscribed	Problem seen in the clinic, intense or disabling
Population	Infrahuman subjects, nonclinical group such as college students chosen primarily because of their accessibility	Volunteers screened for problem and interest in treatment	Clients in out-patient clinic
Manner of recruitment	Captive subjects who receive special incentives (e.g. course credit) for participating	Persons recruited especially for available treatment	Clients who have treatment without solicitations from the clinic
Therapists	Nontherapists, nonprofessionals, students, automated presentation of major aspects of treatment (audio or videotapes)	Therapists in training with some previous clinical experience	Professional therapists
Selection of treatment	Client assigned to treatment with no choice of specific therapist or condition	Client given choice over some alternatives in an alternatives in an experiment	Client chooses therapist and specific treatment
Setting of treatment	Laboratory, academic, psychology department	University clinic devised for treatment delivery with established clientele	Professional facility with primary function of delivering treatment
Variation of treatment	Standardized, abbreviated or narrowly focused version of treatment	Variation that permits some individualization and flexibility in content and/or duration	Treatment tailored to the individual or determined on the basis of the client's problems

APPENDIX J

TABLE 10
CLIENT INFORMATION SHEET

Please fill out the below information. All answers will be kept strictly confidential. You will only need to fill out this sheet one time. Thank you very much.

1. Social Security Number or Code Word_____

2. Age_____   Birthdate_____

3. Marital Status:

    Single, engaged, or living with girl/boyfriend _____

    Marriage_____ (State first, second, third, etc.)

    Separated by choice_____

    Separated as a condition of treatment_____

    Divorced_____

4. Your Parental Status - List Children's Names and Ages:

    1)_____   3)_____   5)_____

    2)_____   4)_____   6)_____

5. Education - Highest grade completed and/or degree earned_____

6. Religion_____

7. Race_____

8. Sex_____

9. Employment Status: Yes: _____   No: _____

10. Occupation_____

11. Annual Income_____

APPENDIX K

TABLE 11

SOCIAL WORKER INFORMATION SHEET

NAME:

AGE:

DEGRESS AND DATE:

HOW LONG HAVE YOU BEEN DOING GROUP WORK TREATMENT?

DISCUSS YOUR THEORETICAL FRAMEWORK FOR GROUP WORK TREATMENT:
(long term, short term, psychodynamic, analytic,
goal-oriented, problem-solving, working the transference,
Gestalt, etc.)

DO YOUR CONSIDER YOURSELF AN ACTIVE WORKER IN THE GROUP OR
DO YOU ASSUME A PASSIVE ROLE?   EXPLAIN:

APPENDIX L

TABLE 12

ATTENDANCE OF MEMBERS IN WOMENS GROUPS

	DATA COLLECTION NUMBER		
	#1	#2	#3
GROUP AND CLIENT #			
GROUP #5			
Member #16	x	x	x
#17	x		x
#18	x	x	x
#19	x		
#20	x		x
#21		x	x
GROUP #6			
Member #22	x		
#23	x	x	x
#24	x		x
#24	x	x	x
#26	x	x	x
#27	x		x
#27		x	

GROUP #5   - 13 Total Measures Taken with 6 Members
GROUP #6   - 15 Total Measures Taken with 7 Members

TOTALS   = 28 Total Measures Taken with 13 Members

APPENDIX M

TABLE 13

ATTENDANCE OF MEMBERS IN MENS GROUPS

	DATA COLLECTION NUMBER		
	#1	#2	#3
GROUP AND CLIENT #			
GROUP #8			
Member #35	x		
#36	x		x
#37	x	x	x
#38	x	x	x
#39	x	x	x
#40	x	x	x
#41	x		x
GROUP #9			
Member #42	x		
#43	x	x	x
#44	x		x
#45	x	x	x
#46	x		x
#47			x

(Member #47 was present in all three group sessions, but chose to participate in the research after the 3rd session only.)

GROUP #8   - 17 Total Measures Taken with 7 Members
GROUP #6   - 12 Total Measures Taken with 6 Members

TOTALS   = 29 Total Measures Taken with 13 Members

APPENDIX N

TABLE 14

MEANS FOR EACH MEMBER FOR EACH CATEGORY

# OF SESSIONS	MT	MFF	MFD	FT	FFF	FFD	NT	NFF	NFD

MEMBER I.D. #

Group 5 (Women)

	# OF SESSIONS	MT	MFF	MFD	FT	FFF	FFD	NT	NFF	NFD
#16	3	2.89	1.96	1.72	3.17	2.04	1.75	2.22	2.13	2.25
#17	2	1.75	1.75	1.25	2.75	2.75	2.06	1.58	2.38	1.69
#18	3	4.11	3.38	3.21	4.39	3.08	3.46	2.83	3.58	3.67
#19	1	2.17	2.63	2.63	3.17	2.25	2.13	2.17	2.63	2.25
#20	2	1.50	1.94	1.81	1.50	1.25	1.25	1.42	1.69	1.63
#21	2	2.17	1.88	1.31	2.17	1.44	1.31	1.83	2.13	1.94

Group 6 (Women)

	# OF SESSIONS	MT	MFF	MFD	FT	FFF	FFD	NT	NFF	NFD
#22	1	2.83	3.43	3.00	3.00	3.00	4.00	2.67	3.57	3.88
#23	3	2.44	2.96	2.75	2.44	1.75	1.13	2.11	2.46	2.08
#24	2	3.33	3.50	2.94	3.92	2.19	1.75	2.92	2.38	2.19
#25	3	3.18	2.43	2.04	3.39	3.21	3.29	1.89	3.38	2.74
#26	3	3.33	2.00	1.67	3.44	2.79	3.88	2.39	3.75	3.33
#27	2	2.00	2.61	2.44	3.33	2.44	2.69	2.17	3.13	2.69
#28	1	2.33	2.75	3.00	4.33	1.38	1.88	2.00	3.63	2.00

Group 8 (Men)

	# OF SESSIONS	MT	MFF	MFD	FT	FFF	FFD	NT	NFF	NFD
#35	1	2.33	1.50	2.63	3.33	1.25	1.88	1.50	2.00	2.13
#36	2	1.42	1.94	1.50	2.33	2.13	1.63	1.25	2.13	1.69
#37	3	1.83	2.01	1.63	2.44	1.51	1.75	1.89	2.14	1.42
#38	3	1.72	2.17	2.00	2.33	1.29	1.42	1.61	1.58	1.33
#39	3	1.72	1.96	1.33	2.56	1.58	1.33	2.00	1.92	1.38
#40	3	1.24	1.17	1.08	1.94	1.58	1.00	1.56	1.75	1.00
#41	2	2.00	2.38	2.56	3.00	1.25	2.00	2.08	2.25	1.88

Group 9 (Men)

	# OF SESSIONS	MT	MFF	MFD	FT	FFF	FFD	NT	NFF	NFD
#42	1	1.67	2.88	1.50	3.00	1.00	1.38	2.00	2.00	1.13
#43	3	1.67	2.55	1.50	2.83	2.13	1.67	2.17	2.50	2.02
#44	2	2.42	3.00	2.50	3.42	1.19	1.44	2.50	2.44	1.94
#45	3	1.61	2.63	2.21	2.11	1.79	1.58	1.67	2.21	1.96
#46	2	1.25	3.19	1.13	1.83	2.00	1.25	1.08	2.63	1.00
#47	1	2.17	2.38	1.75	3.17	1.38	1.00	3.17	1.75	1.38

LEGEND

MT = Male Themes   NT = Neutral Themes
MFF = Male Feelings Felt   NFF = Neutral Feelings Felt
MFD = Male Feelings Discussed NFD = Neutral Feelings Disc.
FT = Female Themes
FFF = Female Feelings Felt
FFD = Female Feelings Discussed

APPENDIX O

TABLE 15

MEANS OF MEN'S AND WOMEN'S GROUP RESPONSES
IN THE NINE CATEGORIES

| | MENS' GROUPS | | WOMEN'S GROUPS | |
	MEANS	STD DEV.	MEANS	STD.DEV
CATEGORY				
MT	1.773	.373	2.618	.741
FT	2.639	.525	3.154	.820
NT	1.883	.547	2.169	.450
MFF	2.286	.582	2.554	.626
FFF	1.544	.369	2.274	.675
NFF	2.099	.310	2.831	.700
MFD	1.793	.536	2.289	.687
FFD	1.486	.305	2.351	1.006
NFD	1.556	.398	2.487	.732

LEGEND

MT = Male Themes
FT = Female Themes
NT = Neutral Themes

MFF = Male Feelings Felt
FFF = Female Feelings Felt
NFF = Neutral Feelings Felt

MFD = Male Feelings Discussed
FFD = Female Feelings Discussed
NFD = Neutral Feelings Discussed

APPENDIX P

TABLE 16

FREQUENCY OF THEMES
WOMEN'S GROUPS

PERCENTAGE OF TOTAL RESPONSES

THEMES	LIKERT VALUES				
	5	4	3	2	1
Male					
Control over others	32.1	28.6	21.4	3.6	14.3
Not needing others	17.9	21.4	21.4	7.1	32.1
Persuade/Influence others	7.4	22.2	33.3	7.4	29.6
Power over others	21.4	7.1	14.3	17.9	39.3
Compete with others	0	10.7	7.1	10.7	71.4
Confidant/Handle self	17.9	25.0	25.0	14.3	17.9
Female					
Concern for others	32.1	50.0	7.1	0	10.7
Too close to others	29.6	14.8	11.1	11.1	33.3
Home/ house	21.4	17.9	32.1	17.9	10.7
Family and friends	35.7	17.9	28.6	14.3	3.6
Responsible for others	14.3	28.6	21.4	14.3	21.4
Depending on others	7.1	7.1	28.6	7.1	50.0
Neutral					
Romantic /sexual invol.	7.1	3.6	21.4	14.3	53.6
Childhood /adolescence	21.4	17.9	21.4	7.1	32.1
Supervisor at work	0	3.6	3.6	21.4	71.4
Plans for future	7.1	7.1	32.1	25.0	28.6
Interests /hobbies	3.6	7.1	7.1	17.9	64.3
Adult Years	17.9	10.7	32.1	7.1	32.1

APPENDIX Q

TABLE 17

FREQUENCY OF THEMES
MEN'S GROUPS

PERCENTAGE OF TOTAL RESPONSES

THEMES	LIKERT VALUES				
	5	4	3	2	1
Male					
Control over others	3.4	13.8	24.1	31.0	27.6
Not needing others	0	0	0	17.2	82.8
Persuade/Influence others	3.6	7.1	14.3	35.7	39.3
Power over others	0	0	6.9	27.6	65.5
Compete with others	3.4	0	3.4	13.8	79.3
Confidant/Handle self	6.9	3.4	20.7	24.1	44.8
Female					
Concern for others	17.2	34.5	31.0	10.3	6.9
Too close to others	3.4	17.2	27.6	27.6	24.0
Home/ house	3.4	13.8	24.1	10.3	48.3
Family and friends	6.9	27.6	17.2	17.2	31.0
Responsible for others	13.8	20.7	34.5	17.2	13.8
Depending on others	3.4	0	6.9	17.2	72.4
Neutral					
Romantic /sexual invol.	17.2	17.2	17.2	24.1	24.1
Childhood /adolescence	0	3.4	6.9	17.2	72.4
Supervisor at work	0	0	3.4	10.3	86.2
Plans for future	0	10.3	20.7	13.8	55.2
Interests /hobbies	3.4	3.4	10.3	24.1	58.6
Adult Years	3.4	3.4	27.6	27.6	37.9

APPENDIX R

TABLE 18

LEVEL OF DEGREE WITH COMBINED FREQUENCIES
OF THEMES

PERCENTAGE OF TOTAL RESPONSES

THEMES	MEN'S GROUPS			WOMEN'S GROUPS		
	High	Medium	Low	High	Medium	Low
Male						
Control over others	17	55	27	60	25	14
Not needing others	0	17	83	39	29	32
Persuade/Influence others	11	50	39	30	41	29
Power over others	0	34	65	28	32	39
Compete with others	3	17	79	11	18	71
Confidant/Handle self	10	45	45	43	39	18
Female						
Concern for others	51	41	7	82	7	10
Too close to others	20	55	24	45	22	33
Home/ house	17	34	48	39	50	10
Family and friends	34	34	31	53	43	3
Responsible for others	34	51	14	43	35	21
Depending on others	3	24	72	14	35	50
Neutral						
Romantic /sexual invol.	35	41	24	11	35	53
Childhood /adolescence	3	24	72	39	28	32
Supervisor at work	0	13	86	3	25	71
Plans for future	10	34	55	14	57	29
Interests /hobbies	7	34	59	11	25	64
Adult Years	8	55	37	28	39	32

LEGEND

High Level of Degree   = Sum of Frequencies in #4 and #5
                         Values

Medium Level of Degree = Sum of Frequencies in #3 and #2
                         Values

Low Level of Degree   = Frequency in # 1 Value

APPENDIX S

TABLE 19

FREQUENCY OF FEELINGS FELT
WOMEN'S GROUPS

PERCENTAGE OF TOTAL RESPONSES

FEELINGS FELT   LIKERT VALUES

	5	4	3	2	1
Male					
Aggressive	4.0	16.0	4.0	20.0	56.0
Capable	10.7	35.7	28.6	21.4	3.6
Competitive	10.7	3.6	14.3	25.0	46.4
Dominant	0	0	11.1	33.3	55.6
Independent	10.7	14.3	39.3	28.6	7.1
Powerful	10.7	7.1	17.9	7.1	57.1
Self-Confidant	10.7	28.6	28.6	25.0	7.1
Strong	14.3	17.9	35.7	21.4	10.7
Female					
Dependent	3.6	17.9	17.9	28.6	32.1
Emotional	17.9	25.0	17.9	28.6	10.7
Helpless	17.9	17.9	17.9	14.3	32.1
Ineffective	3.6	10.7	39.3	17.9	28.6
Inferior	10.7	3.6	14.3	17.9	53.6
Lonely	10.7	14.3	21.4	10.7	42.9
Rejected	10.7	7.1	7.1	7.1	67.9
Weak	7.1	3.6	10.7	21.4	57.1
Neutral					
Angry	29.6	14.8	25.9	7.4	22.2
Anxious	29.6	14.8	29.6	11.1	14.8
Bored	0	0	14.3	3.6	82.1
Depressed	14.8	22.2	25.9	11.1	25.9
Good	14.3	35.7	32.1	10.7	7.1
Guilty	17.9	3.6	17.9	10.7	50.0
Relieved	21.4	25.0	7.1	25.0	21.4
Sad	32.1	21.4	14.3	3.6	28.6

APPENDIX T

TABLE 20

FREQUENCY OF FEELINGS FELT
MEN'S GROUPS

PERCENTAGE OF TOTAL RESPONSES

FEELINGS FELT   LIKERT VALUES

	5	4	3	2	1
Male					
Aggressive	0	3.4	13.8	24.1	58.6
Capable	17.2	27.6	37.9	3.4	13.8
Competitive	3.4	6.9	24.1	24.1	41.4
Dominant	0	0	11.1	18.5	70.4
Independent	3.4	31.0	13.8	17.2	34.5
Powerful	0	0	6.9	17.2	75.9
Self-Confidant	3.6	25.0	46.4	7.1	17.9
Strong	3.4	31.0	31.0	13.8	20.7
Female					
Dependent	0	7.1	7.1	25.0	0.7
Emotional	3.4	13.8	24.1	31.0	7.6
Helpless	0	7.1	14.3	21.4	7.1
Ineffective	0	3.4	17.2	20.7	8.6
Inferior	0	0	6.9	17.2	75.9
Lonely	0	6.9	13.8	17.2	62.1
Rejected	0	0	0	13.8	86.2
Weak	0	0	10.3	17.2	72.4
Neutral					
Angry	3.4	0	0	17.2	79.3
Anxious	3.4	6.9	20.7	37.9	31.0
Bored	3.4	6.9	13.8	31.0	44.8
Depressed	0	0	10.3	27.6	62.1
Good	10.3	31.0	44.8	13.8	0
Guilty	0	7.1	32.1	25.0	35.7
Relieved	6.9	10.3	31.0	24.1	27.6
Sad	0	3.6	28.6	35.7	32.1

APPENDIX U

TABLE 21

LEVEL OF DEGREE WITH COMBINED FREQUENCIES

OF FEELINGS FELT

PERCENTAGE OF TOTAL RESPONSES

FEELINGS FELT	MEN'S GROUPS			WOMEN'S GROUPS		
	High	Medium	Low	High	Medium	Low
Male						
Aggressive	3	38	59	20	24	56
Capable	45	41	14	46	50	4
Competitive	10	48	41	14	39	46
Dominant	0	30	70	0	44	56
Independent	34	31	34	25	68	7
Powerful	0	24	76	18	25	57
Self-Confident	29	53	18	39	54	7
Strong	33	45	21	32	47	11
Female						
Dependent	7	32	60	21	46	32
Emotional	17	55	27	43	46	11
Helpless	7	36	57	35	32	32
Ineffective	3	38	59	14	58	28
Inferior	0	24	76	14	32	54
Lonely	7	31	62	25	32	43
Rejected	0	14	86	18	14	68
Weak	0	28	72	11	32	57
Neutral						
Angry	3	17	80	44	33	22
Anxious	10	58	31	44	40	15
Bored	10	45	45	0	18	82
Depressed	0	38	62	37	37	26
Good	41	58	0	50	43	7
Guilty	7	57	36	21	28	50
Relieved	17	55	28	46	32	21
Sad	4	64	32	54	18	28

LEGEND

High Level of Degree   = Sum of Frequencies in #4 and #5
                          Values

Medium Level of Degree = Sum of Frequencies in #3 and #2
                          Values

Low Level of Degree   = Frequency in # 1 Value

APPENDIX V

TABLE 22

FREQUENCY OF FEELINGS DISCUSSED
WOMEN'S GROUPS

PERCENTAGE OF TOTAL RESPONSES

FEELINGS DISCUSSED	LIKERT VALUES				
	5	4	3	2	1
Male					
Aggressive	3.7	11.1	11.1	7.4	6.7
Capable	11.1	22.2	40.7	11.1	14.8
Competitive	0	3.6	10.7	17.9	67.9
Dominant	3.6	7.1	10.7	14.3	64.3
Independent	7.1	14.3	21.4	25.0	32.1
Powerful	7.1	10.7	17.9	7.1	57.1
Self-Confidant	7.1	21.4	32.1	17.9	21.4
Strong	10.7	10.7	28.6	28.6	21.4
Female					
Dependent	0	10.7	25.0	17.9	46.4
Emotional	14.3	28.6	28.6	14.3	14.3
Helpless	28.6	10.7	14.3	17.9	28.6
Ineffective	14.3	3.6	17.9	17.9	46.4
Inferior	10.7	3.6	21.4	14.3	50.0
Lonely	17.9	10.7	14.3	14.3	42.9
Rejected	17.9	14.3	3.6	7.1	57.1
Weak	10.7	10.7	7.1	10.7	64.3
Neutral					
Angry	28.6	17.9	17.9	14.3	21.4
Anxious	14.8	22.2	18.5	18.5	25.9
Bored	0	0	0	3.6	96.4
Depressed	14.3	21.4	10.7	3.6	50.0
Good	14.3	10.7	35.7	17.9	21.4
Guilty	14.3	14.3	14.3	17.9	39.3
Relieved	17.9	7.1	28.6	7.1	39.3
Sad	28.6	14.3	10.7	7.1	39.3

APPENDIX W

TABLE 23

FREQUENCY OF FEELINGS DISCUSSED
MEN'S GROUPS

PERCENTAGE OF TOTAL RESPONSES

FEELINGS DISCUSSED	LIKERT VALUES				
	5	4	3	2	1
Male					
Aggressive	0	6.9	6.9	10.3	75.9
Capable	3.4	10.3	20.7	20.7	44.8
Competitive	0	6.9	17.2	0	75.9
Dominant	0	3.4	13.8	10.3	72.4
Independent	0	3.4	24.1	10.3	62.1
Powerful	0	6.9	6.9	10.3	75.9
Self-Confidant	7.1	7.1	32.1	14.3	39.3
Strong	3.6	3.6	28.6	14.3	50.0
Female					
Dependent	0	6.9	13.8	10.3	69.0
Emotional	3.4	10.3	27.6	10.3	48.3
Helpless	0	0	20.7	6.9	72.4
Ineffective	3.4	3.4	6.9	17.2	69.0
Inferior	0	0	6.9	0	93.1
Lonely	0	10.3	6.9	13.8	69.0
Rejected	0	0	10.3	13.8	75.9
Weak	0	0	3.4	3.4	93.1
Neutral					
Angry	0	3.4	10.3	3.4	82.8
Anxious	0	7.1	10.7	14.3	67.9
Bored	0	0	3.4	3.4	93.1
Depressed	0	3.4	3.4	17.2	75.9
Good	3.4	17.2	31.0	24.1	24.1
Guilty	0	7.1	17.9	17.9	57.1
Relieved	0	6.9	10.3	10.3	72.4
Sad	0	0	3.4	13.8	82.8

APPENDIX X

TABLE 24

LEVEL OF DEGREE WITH COMBINED FREQUENCIES
OF FEELINGS DISCUSSED

PERCENTAGE OF TOTAL RESPONSES

FEELINGS DISCUSSED	MEN'S GROUPS			WOMEN'S GROUPS		
	High	Medium	Low	High	Medium	Low
Male						
Aggressive	7	17	76	15	18	67
Capable	13	41	45	33	52	15
Competitive	7	17	76	3	28	68
Dominant	3	24	72	11	25	64
Independent	3	34	62	21	46	32
Powerful	7	17	76	18	25	57
Self-Confident	14	47	39	7	54	39
Strong	7	43	50	21	47	21
Female						
Dependent	7	24	69	11	43	46
Emotional	14	38	48	43	43	14
Helpless	0	27	72	39	32	29
Ineffective	7	24	69	18	36	46
Inferior	0	7	93	14	36	50
Lonely	10	21	69	28	29	43
Rejected	0	24	76	32	11	57
Weak	0	7	93	18	18	64
Neutral						
Angry	3	14	83	46	32	21
Anxious	7	25	68	37	37	26
Bored	0	7	93	0	4	96
Depressed	3	21	76	36	14	50
Good	21	55	24	25	53	21
Guilty	7	36	57	29	32	39
Relieved	7	21	72	25	36	39
Sad	0	17	83	43	18	39

LEGEND

High Level of Degree   = Sum of Frequencies in #4 and #5
                          Values

Medium Level of Degree = Sum of Frequencies in #3 and #2
                          Values

Low Level of Degree   = Frequency in # 1 Value

APPENDIX Y

TABLE 25

WILCOXON-MANN-WHITNEY MEAN RANK SUM TEST SCORES

CATEGORIES

	MT	MFF	MFD	FT	FFF	FFD
MEAN RANK						
MEN	8.92	12.27	10.58	10.69	9.35	9.92
WOMEN	18.08	14.73	16.42	16.31	17.65	17.08
EXACT 2-TAILED P:	.0015	.4184	.0501	.0642	.0042	.0164

	NT	NFF	NFD
MEAN RANK			
MEN	11.12	9.58	8.38
WOMEN	15.88	17.42	18.62
EXACT 2-TAILED P:	.1129	.0072	.0003

LEGEND

MT = Male Themes
MFF = Male Feelings Felt
MFD = Male Feelings Discussed
FT = Female Themes
FFD = Female Feelings Felt
FFD = Female Feelings Discussed
NT = Neutral Themes
NFF = Neutral Feelings Felt
NFD = Neutral Feelings Discussed

APPENDIX Z

TABLE 26

MEANS FOR EACH GROUP FOR EACH CATEGORY

CATEGORIES

	MT	MFF	MFD	FT	FFF	FFD	NT	NFF	NFD
WOMEN'S GROUPS									
#5	2.43	2.26	1.99	2.86	2.13	1.99	2.01	2.42	2.24
#6	2.78	2.81	2.55	3.41	2.39	2.66	2.31	3.19	2.70
MEN'S GROUPS									
#8	1.51	1.88	1.81	2.56	1.51	1.57	1.70	1.97	1.55
#9	1.79	2.77	1.76	2.72	1.58	1.39	2.10	2.26	1.57

LEGEND

MT = Male Themes
MFF = Male Feelings Felt
MFD = Male Feelings Discussed
FT = Female Themes
FFF = Female Feelings Felt
FFD = Female Feelings Discussed
NT = Neutral Themes
NFF = Neutral Feelings Felt
NFD = Neutral Feelings Discussed

APPENDIX AA

TABLE 27

CONTENT ANALYSIS OF TOPICS MEMBERS AND WORKERS

INITIATED IN GROUP SESSIONS AS REPORTED BY MEMBERS

GROUP 5

The below material is taken verbatim from the written
responses of the members to questions E and F on page 5 of
the instrument. Group 5 is the women's group from AGENCY 1
with the two female workers.

QUESTION E: What subjects or topics did you personally
initiate in this session? (reported by members)

MEMBERS:

1st session: being verbally abused, abusing our bodies,
being abused as a child

2nd session: when you are abused in your life, cause and
effect of a comment made to you, how our parents were good
and bad parents and how that affects us, how my actions
impact other family members, none

3rd session: babysitting problem and not getting paid for
it and speaking out for it, christmas holidays and stress of
hodlidays, how to take care of myself, none

QUESTION F: What subjects or topics did the worker
initiate in this session? (reported by members)

WORKERS:

1st session: handling the abuse, people abusing us and
abuse to ourselves, questionnaire about abuse

2nd session: boundaries and barriers of sexual, physical,
and emotional abuse, feelings, family

3rd session: holidays and stress

APPENDIX BB

TABLE 28

CONTENT ANALYSIS OF TOPICS MEMBERS AND WORKERS

INITIATED IN GROUP SESSIONS AS REPORTED BY MEMBERS

GROUP 6

The below material is taken verbatim from the written
responses of the members to questions E and F on page 5 of
the instrument. Group 6 is the women's group from AGENCY 2
with the single female worker.

QUESTION E: What subjects or topics did you personally
initiate in this session? (reported by members)

MEMBERS:

1st Measure: visitation issues with children, emotional
abuse my husband put my daughter through, frustrations of
meeting new people, abuse as only physical, control,
powerless, guilt, isolation, lonely, worthless, abuse,
anger, rage, sadness, helplessness, fear, not in control of
life, separating from abuse

2nd Measure: children carrying on abusive traits, suicide,
drinking, games, depression, brain washing by an abuser,
anger, sadness, my life, my feelings.

3rd Measure: ambivalent feelings children have for mother
and father, guilt, anger, lonliness, rejection, fear, taking
care of self, giving time to myself

QUESTION F: What subjects or topics did the worker initiate
in this session? (reported by members)

WORKER:

1st Measure: feelings, legislative bills to be passed
before the House (of Representatives), these surveys, anger,
hopelessness, sadness, anxiousness

2nd Measure: how husbands controlled us, what things we've
given up, anger, lonliness, feelings, imbalance of power,
seeking help

3rd Measure: feelings independence, anger, individual
choices from previous week

APPENDIX CC

TABLE 29

CONTENT ANALYSIS OF TOPICS MEMBERS AND WORKERS

INITIATED IN GROUP SESSIONS AS REPORTED BY MEMBERS

GROUP 8

The below material is taken verbatim from the written
responses of the members to questions E and F on page 5 of
the instrument. Group 8 is the men's group from AGENCY 1
with the single male worker.

QUESTION E: What subjects or topics did you personally
initiate in this session ? (reported by members)

MEMBERS:

1st Measure: what initiated the cause of abusing the kids,
outcome from weekend home visitation, impact of molester
returning home, restitution and reaction to joint session,
feelings of responsibilty toward victim, none

2nd Measure: TV programs and influence on our egos,
avoiding future molestations, none

3rd Measure: parents responsibility of informing kids about
sex equally for boys and girls, when are you ready for a
sexual relationship, discussions about feelings with family,
none

QUESTION F: What subjects or topics did the worker initiate
in this session? (reported by members)

WORKER:
1st Measure: feelings of retaliation toward abused child,
what could be said to make things better, feelings at time
of involvement, emotional and sexual basis for molestation,
our feelings, what might have caused the molest

2nd Measure: controlling self in sexual situations,
controlling fantasies, none - he redirected the subject to
get more responses

3rd Measure: how we felt or knew when we were ready for
sexual involvement, rejection in family, problems kids face
in school when students ask molested kids questions - how
they respond and express feelings, pressure from holidays

APPENDIX DD

TABLE 30

CONTENT ANALYSIS OF TOPICS MEMBERS AND WORKERS

INITIATED IN GROUP SESSIONS AS REPORTED BY MEMBERS

GROUP 9

The below material is taken verbatim from the written responses of the members to questions E and F on page 5 of the instrument. Group 9 is the men's group from AGENCY 1 with the two female workers.

QUESTION E: What subjects or topics did you personally initiate in this session? (reported by members)

MEMBERS:

1st Measure: relating with spouse, lonliness, laziness, isolation, assertion, confidence, self-awareness, association with adult feelings and childhood events, fair punishment for crimes, none

2nd Measure: relationship with wife and in-laws, court, drug and alcohol abuse, none

3rd Measure: legal system and the courts, wife and child relationships, none

QUESTION F: What subjects or topics did the worker initiate in this session?   (reported by members)

WORKERS:

1st Measure: relationshiops, fears, accomplishments, AA, alcohol and drug abuse, introduced to new members, status of our marriages and separations, don't remember, none

2nd Measure: feelings and emotional reactions regarding other members

3rd Measure: sex, jail, sentencing, none was needed

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VITA

Janice R. Gagerman was born in Chicago, Illinois on Friday morning, May 12, 1950. In the early morning hours, Seymour drove Sadelle to Michael Reese Hospital in his taxi cab, dropped her off, and came back fourteen hours later. Fridays were very busy days for cab drivers then, and he now had five mouths to feed.

Janice and her family eventually left their third floor apartment on the west side at 14th and Karlov, and moved to the south side, where she spent her remaining childhood years. She was surrounded by an enormous extended family, including twenty-five aunts and uncles, thirty-five first cousins, countless second cousins, two brothers and a sister, two grandmothers, and Seymour and Sadelle.

While 95% of the rest of the women in this entire family married and carried on the traditions of family and motherhood, Janice obtained her Bachelor of Arts in 1971 and her Master of Social Work in 1975 from the University of Illinois, Urbana. She moved with her husband, David to California and lived in Chico for ten years, practicing clinical social work in both agency and private practice settings. She became experienced in individual, family, and group interventions treating numerous clients with

various presenting problems - from borderline pathology to developmental issues.

During this time, she also taught part-time at California State University, Chico in the Department of Sociology and Social Work. In 1985, Janice realized that she needed to return to school for a doctorate, being extremely curious about the research process, and having many unanswered questions regarding her clients' treatment.

She returned to Chicago with her husband and two sons, enrolled in a new clinical doctoral program at Loyola University of Chicago, Department of Social Work, and became a student once again. In August, 1989, she was hired as a full-time faculty member at the University of Illinois, Chicago, Jane Addams College of Social Work to teach the practice and human behavior sequences and, of course, social group work treatment. She is presently completing her second year at Jane Addams and thoroughly enjoys the academic life.

It is likely Janice will return to Chico in northern California. She misses the mountains, rivers, ocean, orchards, and gardens that once were a major part of her life. There is also a community of people and places which became a part of her soul and spirit, professionally, politically, and personally, which beckons her return.

LOYOLA UNIVERSITY
SCHOOL OF SOCIAL WORK

DISSERTATION APPROVAL SHEET

The Dissertation submitted by Janice Gagerman has been read and approved by the following committee:

Dr. Margaret Dahl, Director
Adjunct Assistant Professor of Social Work
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Dr. Tom Meenaghan
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Dr. Joe Lassner
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The final copies have been examined by the director and the signature which appears below verifies the fact that any necessary changes have been incorporated and that the dissertation is now given final approval by the Committee with reference to content and form.

The dissertation is therefore accepted in partial fulfillment of the requirement for the degree of Doctor of Social Work.

1/10/90
_____
Date

Margaret Dahl
_____
Director's Signature