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Person-Centered & Experiential Psychotherapies

Publication details, including instructions for authors and subscription information:

http://www.tandfonline.com/loi/rpcp20

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To cite this article: Roelf J. Takens (2005): Rogers' Interviews with Gloria and Kathy Revisited: A microanalysis of the client—therapist interaction / Noch einmal: Rogers' Beratungsgespräche mit Gloria und Kathy—eine Mikroanalyse der Klient-Therapeut-Interaktion / Revisión de las entrevistas de Rogers con Gloria y Kathy: un microanálisis de la interacción terapeuta consultante / Rogers' interviews met Gloria en Kathy opnieuw beschouwd: Een micro-analyse van de therapeutische interacties, Person-Centered & Experiential Psychotherapies, 4:2, 77-89

To link to this article: <u>http://dx.doi.org/10.1080/14779757.2005.9688373</u>

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Rogers' Interviews with Gloria and Kathy Revisited: A micro-analysis of the client–therapist interaction

Noch einmal: Rogers' Beratungsgespräche mit Gloria und Kathy – eine Mikroanalyse der Klient-Therapeut-Interaktion Revisión de las entrevistas de Rogers con Gloria y Kathy: un microanálisis de la interacción terapeuta consultante Rogers' interviews met Gloria en Kathy opnieuw beschouwd: Een microanalyse van de therapeutische interacties

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Abstract. In order to illustrate the use of the Processing Modes Scales of Sachse (1990a) two prototypical interviews of Rogers, respectively with Gloria and Kathy, were analyzed. It was hypothesized that Rogers would offer his clients high levels of 'processing proposals', and that, as a consequence, his clients would show high levels of processing, too. Indeed, Rogers' processing proposals were much deeper than normally found, as were the processing modes by the two clients involved. It also turned out that Rogers took a more non-directive stance in his interview with Gloria, whilst in the interview with Kathy, ten years later, his position was more process-directive. It is suggested that this may be the result of a development in his therapeutic attitude from functioning as the client's 'alter-ego' into more 'presence' in the therapeutic encounter.

Zusammenfassung. Um den Gebrauch der Prozessbearbeitungsskalen von Sachse (1990a) zu illustrieren, wurden zwei prototypische Beratungsgespräche von Rogers mit Gloria und Kathy analysiert. Die Hypothese lautet, dass Rogers seinen Klientinnen ein hohes Mass an 'Bearbeitungsangeboten' machte und dass seine Klientinnen in der Folge auch einen hohen Grad des Bearbeitens zeigen. Tatsächlich waren Rogers' Bearbeitungsangebote sehr viel tief greifender als sonst üblich, genau wie es die Bearbeitungsweisen der beiden betroffenen Klientinnen sind. Es zeigte sich auch, dass sich Rogers in seinem Beratungsgespräch mit Gloria stärker nichtdirektiv verhielt, wohingegen seine Position in seinem Gespräch mit Kathy zehn Jahre später stärker prozessdirektiv war. Die These ist, dass dies ein Resultat in der Entwicklung seiner therapeutischen Haltung war, vom "Alter Ego" der Klientin hin zu mehr "Präsenz" in der therapeutischen Begegnung.

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Resumen. A fin de ilustrar el uso de las escalas de modos de procesamiento de Sachse (1990a) se analizaron dos entrevistas prototípicas de Rogers, respectivamente con Gloria y Kathy. Se presentan las hipótesis de que Rogers solía ofrecer a sus consultantes altos niveles de 'propuestas de procesamiento", y que, como consecuencia, sus consultantes mostraban asimismo altos niveles de procesamiento. En efecto, las propuestas de procesamiento de Rogers eran mucho más profundas que las encontradas normalmente, así como también lo eran los modos de procesamiento de las dos consultantes involucradas. También resultó que Rogers adquirió una postura no directiva en su entrevista con Gloria, mientras que en su entrevista con Kathy, diez años más tarde, su posición era directiva de proceso. Se sugiere que esto tal vez sea el resultado de un desarrollo en su actitud terapéutica desde funcionar como el 'alter ego' del consultante hacia una mayor 'presencia' en el encuentro terapéutico.

Samenvatting. Om de Therapeutische Bewerkingsschalen (Sachse, 1990a) te valideren werden twee prototypische interviews van Rogers, respectievelijk met Gloria en Kathy gevoerd, geanalyseerd. Verondersteld werd dat Rogers steeds op een hoog niveau een Bewerkingsaanbod zou doen en dat, als gevolg daarvan, beide cliënten ook hoog zouden scoren op de Bewerkingswijze schaal. Conform de verwachting lag het bewerkingsaanbod gemiddeld op een hoger niveau dan doorgaans het geval is, evenals de bewerkingswijze van beide cliënten. In het gesprek met Gloria nam Rogers duidelijk een meer non-directieve houding aan dan in het interview met Kathy. In dat interview, dat tien jaar later gevoerd werd, was hij meer 'proces-directief'. Gesuggereerd wordt dat dit mogelijk samenhangt met een ontwikkeling in Rogers' therapeutische houding van 'alter-ego' voor de cliënt naar meer 'persoonlijke aanwezigheid' in de therapeutische ontmoeting.

Keywords: Client-Centered Therapy, processing, non-directiveness, presence

According to many client-centered therapists, Rogers' interview with Gloria (Shostrom, 1966) was one of the finest illustrations of a well-guided client-centered interview. Dating back thirty years, discussions about this interview still continue; for instance, on the website-listserver the issues of non-directiveness and self-disclosure (when Rogers admitted to Gloria that he saw her as 'a pretty nice daughter') are still discussed.

The interview was the first in a series, in which three famous psychotherapists (Carl Rogers, Fritz Perls, Albert Ellis) were invited to demonstrate their therapeutic stances, all with the same client (Gloria). Apart from its great impact on the training of many (client-centered) therapists around the world, this unique interview has stimulated a large output of research, for instance by Barak and LaCrosse (1975); Chen (1981); Essig and Russell (1990); Hill, Thames and Rardin (1979); Holdstock and Holdstock (1994); Kiesler and Goldston (1988); LaCrosse and Barak (1976); Meara, Pepinsky, Shannon and Murray (1981); Meara, Shannon and Pepinsky (1979); Mercier and Johnson (1984); Miller, Prior and Springer (1987); Shostrom and Riley (1968); Stalikas and Fitzpatrick (1995); Weinrach (1986, 1990, 1991); and Zimmer and Cowles (1972).

We used this interview to illustrate the use of the Processing Modes Scales, originally designed by Sachse (1990a), translated by us into Dutch (Takens, 1995), and applied in our research on psychotherapeutic relationships and interactions (Takens, 2001; Sachse and Takens, 2004). Considering Rogers as the most prominent 'Rogerian' therapist, we expected him to

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offer his clients a high level of processing proposals. At the same time, we also expected Gloria to show high levels of processing, as she did so well in the interview. Beyond this, we thought it interesting to compare the Gloria interview with a session Rogers did ten years later with Kathy, in a later series of demonstration interviews with the same publisher (Shostrom, 1976). Because Rogers said that his position as a therapist had evolved from a client's 'alter-ego' functioning into more 'presence' in the therapeutic encounter (Evans, 1975), we expected him to be more 'process-directive' in this latter interview with Kathy.

PROCESSING MODES AND PROPOSALS

According to Sachse (1987, 1992) the aim of Client-Centered Therapy should be to explicate the client's internal frame of reference regarding his or her relevant problems. Thus, the client's internal frame of reference is conceived as a system of those personal idiosyncratic sources of reference in the person that constitute the background for certain emotions, experiences, processing and actions of the person in a particular situation. It contains a person's private goals, motives, values, norms and rules. Because it determines a person's evaluations, emotions, 'felt senses' and actions in a certain problem field, it seems therapeutically relevant to explicate these 'structures of meaning' (Sachse, 1987, 1992). Therefore, clients should be encouraged to pose questions to themselves in the context of what has already been dealt with — questions which will serve the purpose of furthering them in their explication process. From a description of concrete facts, situations or behaviors, clients can ask themselves, for instance, which feelings and felt meanings have been evoked. If feelings and felt meanings are experienced, we know that personally relevant structures (of meaning) have been activated: structures of meaning that are related to the field of the context being processed. Without the evocation of these feelings or felt meanings one runs the risk that the client will develop hypotheses about what might be the real structures of meaning in a purely rational way. Instead of explicating, the client then starts 'intellectualizing' (see also Takens, 1995; Sachse and Takens, 2004).

Sachse discerned eight stages or levels of client processing, which range from 'shallow processing' to the 'explication of relevant structures of meaning', which is considered as 'deep processing' (see Table 1).

This scale of '*client processing modes*' was derived from clinical observations as well as from theoretical considerations, particularly from experiencing theory (Gendlin, 1973, 1978) and emotional processing (Zajonc, 1980).

It is not only clients who have a task in this explication process — therapists have one as well. In terms of the processing model they are supposed to pose specific questions or bring in relevant observations that will lead to a further explication of the client's meaning structure. These '*processing proposals*' put forward by the therapist can be conceived parallel to the processing modes of the client in eight different stages or levels (see Table 2).

Table 1: Processing Modes by Clients (Sachse, 1990)

- Level 1. No processing of relevant content discernible: The client poses no relevant questions or refers to contents irrelevant to the problem.
- Level 2. Intellectualizing: The client uses 'knowledge' without reference to his/her own feelings or personal data. ('How can I explain? Which theory can I use?')
- Level 3. Report: The client gives a concrete description without explicit reference to opinions, evaluations, and feelings. ('What actually happened? What was the concrete situation or behavior?')
- Level 4. Evaluation: The client labels the content. The assessment is seen as characteristic of the content (e.g. *'Person A is stupid'* or *'Behavior B is bad'*).
- Level 5. Personal evaluation: The client evaluates the content and recognizes it as being a part of his or her own frame of reference (e.g. *I think of A as a stupid person*).
- Level 6. Personal meaning: The client senses a feeling or felt meaning regarding the content and says so explicitly. (*Which feelings or felt meanings are aroused in me within this context?*)
- Level 7. Explication of relevant structures of meaning: The client explicates (verbalizes) aspects of meaning that are recognized with regard to the content being processed. (*What makes me feel like this in this context?*)
- Level 8. Integration: The client draws connections between the explicated aspects of meaning and other aspects. Similarities or contradictions are found. (*'Can I find any connections with other aspects of meaning?'*)

Table 2: Processing Proposals by Therapists (Sachse, 1990)

- Level 1. No processing of relevant content discernible: The therapist poses no relevant questions nor refers to contents relating to the client.
- Level 2. Intellectualizing: The therapist uses 'knowledge' without reference to client's own feelings or personal data. ('How can I explain? Which theory can I use?')
- Level 3. Report: The therapist asks for a concrete description without explicit reference to opinions, evaluations, and feelings. (*What actually happened? What was the concrete situation or behavior?*)
- Level 4. Evaluation: The therapist asks the client to label the content (e.g. '*Person A is stupid*' or '*Behavior B is bad*). The assessment is seen as characteristic of the content.
- Level 5. Personal evaluation: The therapist asks the client to assess the content as being a part of his or her frame of reference (e.g. *'What do you think about ...?'*).
- Level 6. Personal meaning: The therapist asks the client what (s)he is feeling regarding the content. ('Which feelings or felt meanings are aroused in you within this context?)
- Level 7. Explication of relevant structures of meaning: The therapist asks the client to explicate (verbalizes) aspects of meaning that are recognized with regard to the content being processed. (*What makes you feel like this in this context?*)
- Level 8. Integration: The therapist asks the client to draw connections between the explicated aspects of meaning and other aspects. Similarities or contradictions are found. ("Can you find any connections with other aspects of meaning?")

With their processing proposals therapists give what can be called 'strategic indications' to clients to deepen their explication process. These proposals can be accepted or not, of course. Preferably, therapists gear their proposals towards the next scale level (stage) to be reached by the client. Processing proposals are therefore prospectively, rather than retrospectively, oriented.

Directing the client's processing

The parallel nature of the client's Processing Mode Scale and the therapist's Processing Proposal Scale makes an interaction analysis on a micro level possible (Sachse and Takens, 2004). It is not so much the *absolute* level of the processing proposal that matters; its *relative* level is of even greater importance. How does the therapist's proposal relate to the mode of processing that the client realizes in his or her next reaction? Will it deepen the explication process or — the other way around — flatten the client's processing level? Or will it leave it unchanged?

Sachse hypothesized a directing effect on the client's explication process. That means that a *deepening* proposal will invite the client to process at a higher level; a *flattening* proposal will offer an opportunity for the client's processing mode to revert to a lower level; finally, a proposal at a *maintenance* level is not expected to change the client's processing. Empirical evidence for this *directional hypothesis* has been found in several studies (Sachse and Maus, 1987; Sachse, 1990b, 1990c, 1990d; Sachse and Maus, 1991; Takens, 2001; Sachse and Takens, 2004). In general, deepening processing proposals do have deepening effects on the client's processing, while flattening proposals predominantly lead to flattening effects, and the therapist's directing effect is minimal for constant-level processing proposals. In the last case the client feels free to realize processing modes on a similar, deeper or shallower level. It turns out that clients are especially susceptible to influence if they are deeper in their explication process. They thus need more of the therapist's constructive support then. Another finding was that flattening interventions have a stronger effect than deepening proposals (Sachse, 1990c, 1990d), meaning that an explication process may be more easily disrupted than facilitated.

METHOD

The two sessions by Rogers that we wanted to analyze stemmed from a series of filmed interviews in which three prominent psychotherapists were invited to say something about their therapeutic stance, followed by a demonstration of their way of working in a half-hour interview with the same client. In the first series (Shostrom, 1966), *Gloria* was the client to be interviewed by Carl Rogers, Fritz Perls and Albert Ellis. In the second series (Shostrom, 1976), *Kathy* was interviewed by Carl Rogers, Everett Shostrom and Arnold Lazarus. The Gloria tapes have become famous, whilst those of Kathy did not receive as much attention. The two clients are rather comparable with regard to their ages (they both were in their early thirties) and social status (middle-class, newly divorced American women). *Gloria* wonders if it would be all right for her to tell her nine-year-old daughter, Pamela, about her current sex life. She doubts whether she should do this, because she is afraid that Pamela will no longer respect her as a mother. During the interview it becomes clear that she herself finds it difficult to accept her sexuality, and she links this to her own rejecting parents. Kathy, whose divorced husband recently died, has problems with being alone, but also with establishing new relationships, in which she soon feels abused in the sense of allowing others to take advantage of her.

Procedure

First we transcribed both interviews and edited them by skipping utterances like 'Hmm', 'Yeah,' 'Yes,' and 'I'll see,' etc., except when they were intentionally used as an approval of what had been said. The reason for skipping such interjections was that they would be rated at a report level (= level 3), possibly yielding a false picture of the course of interactions between the participants during the interview when comparing preceding with following statements (in order to investigate our directional hypothesis). Next, all statements were reformulated in 'core sentences', including the essence of each statement by Rogers, Gloria and Kathy. (In this procedure, preferably just one core sentence per statement was formulated. However, it was possible for one of the interview partners, especially the client, to touch upon two or more subjects in the same statement. In that case a 'most important core sentence' was also indicated.) Subsequently, these core sentences were rated on the relevant scales (the client's Processing Mode Scale, and the therapist's Processing Proposal Scale).

We made use of two well-trained raters, both graduate students in clinical psychology. Rater training began with a theoretical discussion of the meaning of the scale levels. Next, the students were instructed about rating procedures and were given homework assignments. Training was continued until satisfactory rating reliabilities among the trainees were achieved, as well as agreement with the instructor's ratings. They not only did the ratings, but formulated the core sentences as well. Starting with the latter task, they discussed (the number and the contents of) the core sentences they had formulated. If they could not reach consensus on this part of the assessment task, the statements involved were referred to a third person (the author of this article) for a conclusive judgment. Inter-rater reliabilities were computed on the basis of their original scores and turned out to be high for both scales (Pearson-r = 0.84, p < 0.01).

RESULTS

Figure 1 shows the frequencies of Gloria's processing modes and those of Rogers' processing proposals in their half-hour interview. In Figure 2 the frequencies of Kathy's processing modes and Rogers' processing proposals are presented.

It is striking that both Gloria's and Kathy's scores regarding their processing modes are very high (M = 5.05 and 5.23), especially for a first interview with a therapist. As a comparison, in Table 3 the scores of a large group of more than a hundred analyzed therapeutic interviews (Takens, 2001) are included as a kind of 'standard'. The processing modes (PMs) in those interviews are significant lower (M = 4.09).

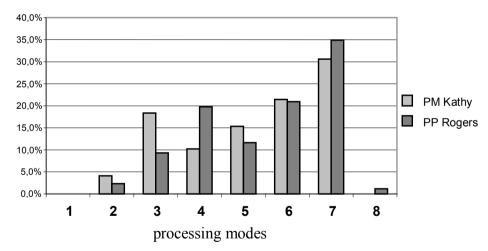
While in Gloria's interview the most frequent processing mode is at level 5 (*personal evaluation*), Kathy is most often processing at an even deeper level of 7 (*explication*). This is exceptional because usually the modal rating lies at level 3 (*report*; see Table 3). This illustrates a particularly therapeutic way of working in both cases. For Kathy, we also see many scores at level 6 (*personal meaning*). This may not be surprising in the run-up to level 7, but it does highlight the quality of the interview. For Gloria level 7 is very frequent as well, but a little lower than for

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35,0% 30.0% 25,0% 20.0% PM Gloria ■ PM Rogers 15,0% 10.0% 5.0% 0.0% 1 2 3 4 5 6 7 8 processing modes

Figure 1. Rogers interviewing Gloria

Figure 2. Rogers interviewing Kathy



Kathy, and is surpassed by the number of ratings at level 5. This indicates (at least in this interview) that Gloria is someone who does not hesitate to give her personal views. Kathy seems to be more in contact with her inner world of experiencing, from which she reflects on herself. Remarkable in this respect is her observation in the interview with Rogers that she finds it especially difficult to express her feelings ('to come out the cave'). While she often feels very vulnerable in her contact with men, this does not impede her in her encounter with Rogers.

What occurs for the two clients also happens on the therapist's side: Rogers obtains strikingly few 2 ratings and relatively few 3 ratings (see Table 4). In the interview with Gloria we find the most frequent rating at level 5, and in the interview with Kathy at level 7. The

	PM Gloria		PM Kathy		PM 'standard'	
	N	%	N	%	Ν	%
Level 1	0	0	0	0	15	0.4
Level 2	6	5.4	4	4.1	403	9.5
Level 3	16	14.4	18	18.4	1503	35.6
Level 4	11	9.9	10	10.2	675	16.0
Level 5	37	33.3	15	15.3	849	20.1
Level 6	17	15.3	21	21.4	457	10.8
Level 7	22	19.8	30	30.6	302	7.1
Level 8	2	1.8	0	0	19	0.5
Total	111	100	98	100	4223	100
Mean	5.05		5.23		4.09	

Table 3. Processing modes (PM) Gloria and Kathy, compared to Takens, 2001 (=PM 'standard')

Table 4. Processing Proposals Rogers (PP) in his interviews with Gloria and Kathy, compared to Takens, 2001 (=PMP 'standard')

	PP Gloria		PP Kathy		PP 'standard'	
	Ν	%	N	%	N	%
Level 1	0	0	0	0	39	1.4
Level 2	2	2.8	2	2.3	194	6.7
Level 3	10	13.9	8	9.3	1156	40.0
Level 4	10	13.9	17	<i>19.8</i>	501	17.4
Level 5	22	30.6	10	11.6	404	14.0
Level 6	15	20.8	18	20.9	403	14.4
Level 7	12	16.7	30	34.9	183	6.3
Level 8	1	1.4	1	1.2	7	0.2
Total	72	100	86	100	2887	100
Mean	5.08		5.49		4.04	

essential question that comes to mind is whether Rogers initiated these higher levels of explication, or whether both clients reached them spontaneously. To put it differently and to somewhat overstate it: Is Rogers such an excellent psychotherapist or did he in these interviews have two exceptionally good clients? Posing this question is a little like the chicken-and-egg problem. What came first? Did the processing proposals by Rogers succeed in stirring up high levels of self-explication in his clients, or did Rogers' outstanding clients allow him to follow at a high level? There is no simple answer to this question, of course, but conducting a sequential analysis can throw more light on it.

Sequential analysis

In order to measure the directional effect so-called triplets were considered: that is, two consecutive client statements (C_1-C_2) as well as the intervention by the therapist (T_1) : $C_1-T_1-C_2$. A therapeutic proposal is *deepening* if $T_1 > C_1$, *flattening* if $T_1 < C_1$ and *neutral* if $T_1 = C_1$. The *effect* of the therapeutic proposal is deepening if $C_2 > C_1$, flattening if $C_2 < C_1$ and not present if $C_2 = C_1$. If *directing* occurs, a deepening therapeutic proposal $(T_1 > C_1)$ will be followed by a deepened client processing mode $(C_2 > C_1)$, a flattening therapeutic proposal $(T_1 < C_1)$ will be followed by a more shallow client processing mode $(C_2 < C_1)$, and a neutral therapeutic proposal $(T_1 = C_1)$ will not be followed by any changes in the client processing mode $(C_2 = C_1)$. Thus, we may illustrate the directional hypothesis in the following expectation matrix E (Table 5):

Е	$C_2 > C_1$	$C_2 = C_1$	$C_2 < C_1$
$T_1 > C_1$	1	0	0
$T_1 = C_1$	0	1	0
$T_1 < C_1$	0	0	1

Table 5. Expectation matrix: Therapist-toClient Influence Model

Note: 1 = sequences predicted to occur; 0 = sequences predicted not to occur.

Outside the diagonal we expect to find almost empty cells: that is, a relative absence of observed sequences. This could simply be tested by applying a χ^2 -test. However, by means of a DEL-analysis (Hildebrand *et al.*, 1977), the strength of the fit between the observed and the expected data can be calculated. The DEL-coefficient (∇) can range from + 1.0 (= complete fit, meaning that each deepening proposal by the therapist is followed by a deepening statement of the client, etc.) to -1.0 (= converse fit, meaning that each deepening proposal by the therapist is followed by a flattening statement by the client, etc.). If ∇ is 0, there is no fit, implying no directing effect at all.

R⇔G	G+	G=	G-	Σ	R+ deepening proposal by Rogers
R+	5	4	0	9	R= maintenance proposal by Rogers R- flattening proposal by Rogers
R=	11	10	4	25	G+ deepening of Gloria's processing mode G= maintenance of Gloria's processing mode
R-	4	3	16	23	G- flattened procession mode by Gloria
Σ	20	17	20	57	DEL = 0.19 95% reliability interval: +0.04, +0.41

Table 6. The influence of Rogers' processing peoposal on Gloria's processing mode

In Table 6 the 57 interactions between Rogers and Gloria are schematized. (The number of interactions is lower than the number of PM-scores — respectively PP-scores in Tables 3 and 4 — since one statement may have contained several 'processing modes'). Now, the following question arises: if deepening occurs, or maintenance, or flattening following Rogers' therapeutic proposals, how does Gloria respond — with deepening, maintenance or flattening of her processing mode, or does she not bother about Rogers' proposals at all?

Considering this DEL value (0.19) it may be argued that Rogers is not particularly process-directive ('standard' DEL = 0.28 as found by Takens, 2001). He rather takes a following position, as may be seen from the relevant DEL-analysis (Table 7) (DEL = 0.39 versus 'standard' 0.23). If there is any Rogers-to-Gloria directive effect at all, it occurs in a negative sense: Rogers flattens 23 times and Gloria follows him up to 16 times. It may be observed, however, that this flattening occurred predominantly from the higher processing levels. Obviously, the chance for flattening to happen from a high position is greater, so this may be a matter of 'confounding'. That is, if we consider Rogers' deepening interventions (which there are many fewer of) Gloria follows him there in about half of the cases as well.

G⇔R	R+	R=	R-	Σ
G+	19	2	4	25
G=	4	10	5	19
G-	2	2	9	13
Σ	25	14	18	57

Table 7. The influence of Gloria's processing mode on Rogers' processing proposal

G+ deepening of Gloria's processing mode
G= maintenance of Gloria's processing mode
G- flattened procession mode by Gloria
R+ deepening proposal by Rogers
R= maintenance proposal by Rogers
R- flattening proposal by Rogers
DEL = 0.39

95% reliability interval: +0.16, +0.41

When we turn our attention to the interview with Kathy, ten years later, Rogers appears to have exchanged his following position largely for a much more 'process-directive' stance. We then find a large directional effect of 0.40 (p < 0.05) for Rogers' influence on Kathy, as he takes much less of a following stance, although the Kathy-to-Rogers influence is still statistically significant (DEL = 0.22; p < 0.05), (see Tables 8 and 9).

R⇔K	K+	K=	K-	Σ
R+	14	2	3	19
R=	7	21	5	33
R-	3	3	11	18
Σ	24	27	19	70

Table 8. The influence of Rogers' processing proposal on Kathy's processing mode

R+ deepening proposal by Rogers	
R= maintenance proposal by Rogers	
R- flattening proposal by Rogers	
K+ deepening of Kathy's processing mode	
K= maintenance of Kathy's processing mode	
K- flattening procession mode by Kathy	
DEL = 0.40	

95% reliability interval: +0.19, +0.60

Table 9. The influence of Kathy's processing mode on Rogers' processing proposal

K⇔R	R+	R=	R-	Σ
K+	14	4	1	19
K=	10	17	11	38
K-	0	4	9	13
Σ	24	25	21	70

K+ deepening of Kathy's processing mode
K= maintenance of Kathy's processing mode
K- flattened procession mode by Kathy
R+ deepening proposal by Rogers
R= maintenance proposal by Rogers
R- flattening proposal by Rogers
DEL = 0.22

95% reliability interval: +0.01, +0.43

DISCUSSION

This study was carried out in order to illustrate the use of the Processing Modes Scales of Sachse (1990a) by applying the scales to two prototypical interviews of Rogers. It was hypothesized that Rogers would offer his clients high levels of 'processing proposals', and that, as a consequence, his clients would show high levels of processing, too. Indeed, Rogers' processing proposals were much deeper than normally found (Takens, 2001; Sachse and Takens, 2004), as were the processing modes by the two clients involved in this study, Gloria and Kathy. The first client, Gloria, did show a peak score on scale level 5, implying that she is most active in evaluating her problem (sexual relationships with men after her divorce) and recognizing it as being a part of her own frame of reference. Kathy's most-scored processing mode was on level 7, implying an explication of the meanings of what she felt about her problem ('What makes me to feeling lonely', 'to adopt an unresponsive attitude towards men', etc.).

Rogers' processing proposals were finely tuned on the clients' processing modes in both interviews. It turned out that he took a more following position in his interview with Gloria than in his session with Kathy, in which he was rather 'process-directive'. Perhaps this has to do with an evolution in his thinking about the nature of the therapeutic relationship, which he discussed in his interview with Richard Evans (1975). In this interview Rogers said that he

had evolved from a (non-directive) client-centered therapist to a more person-centered therapist, becoming more 'present' in the therapeutic encounter: 'I had come to recognize quite fully that the therapist must be present as a person in the relationship if therapy is to take place. It is a much more I–Thou kind of relationship that develops between the therapist and the client...' (Rogers, in Evans, 1975, p. 25). The Gloria and Kathy interviews were conducted with a time interval of exactly ten years (in 1966 and 1976). In this sense they potentially illustrate Rogers' evolving therapeutic position from acting as a client's 'alter-ego' into more 'presence' in the therapeutic encounter. However, the differences observed here may simply reflect differences between the two clients; analyses of a larger sample of interviews by Rogers during his life span would be needed to draw more definite conclusions.

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