

CHAPTER VI

***** SUMMARY AND CONCLUSIONS

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Summary

The aim of the present investigation was to study self-esteem changes under the influence of group counselling.

The study on self-esteem changes is of great practical significance in a country like India where the guidance movement has not gone beyond the standardization and construction of some useful tests. There are a number of schools where no guidance facilities are available at present.

However, a significant amount of research has been devoted to the development of new concepts and techniques of behaviour modification during the last two decades. Of the various techniques, psychotherapy and behaviour therapy have been fruitfully applied to the treatment of abnormal behaviour.

The term psychotherapy actually refers to a number of techniques which are employed for the treatment of behaviour problems. There are, in fact, three different approaches to psychotherapy, namely, the psychoanalytic, the client-centered

and the existential.' In the client-centered approach, the patient is trying to gain insight into his own problems and difficulties with the help of therapist who with a permissive and accepting tendencies on his part provides an atmosphere so that the patient becomes able to give free expression to his ideas. The various procedures subsumed under psychotherapy are in no way similar except in the fact that they are all used for the treatment of behaviour problems. Since these procedures are based on different personality theories, they evolve different goals. The various outcomes are also not comparable, for this reason. Moreover, the background and training of the therapists are not comparable. Psychotherapists were all the time influenced by case study reports, clinical observations and various theories of psychotherapy developed by persons committed to one school of psychotherapy or another. Any issue relating to the goals and criteria of psychotherapy was resolved by committing oneself to one particular approach and by relying heavily on expert opinion or personal conviction based on one's own experiences in the field. We have now a body of scientific literature, with the help of which various issues could be tackled on a more reasonable basis. Despite the fact that there are now many researches devoted to the problem of behaviour change, it has not been possible for us to state precisely that a particular psychotherapeutic procedure is

successful in attaining certain specific goals. This is so because there are very few researches which are conducted under carefully controlled conditions. Moreover, the available researches are open to different interpretations. There have been many claims for the success of a particular therapeutic procedure, but such claims are to be judged in relation to a number of other non-therapeutic procedures. While attributing the successful accomplishments of certain specific goals to a particular psychotherapy, one has to be very careful because a number of factors operate simultaneously at the time when the therapy is being administered. It is necessary to recognize the fact that psychotherapy is a form of social interaction, but it is not as it is claimed by many a unique form of interaction. Equally important or perhaps more important is, however, the fact that the personality of the therapist and the skills that he possesses are of crucial significance in determining the outcome of psychotherapy. Although it is true that different types of psychotherapy enable the client to gain necessary insight into his own problems and difficulties, there are some gaps in our knowledge which need to be filled by researches which are carefully planned and conducted.

The present investigation is just an attempt in this direction. More specifically it deals with changes in self-esteem under the influence of group counselling. The technique

of group counselling, although of fairly recent origin has produced enough research in the area of behaviour of change. The technique of group counselling provides a situation in which five to six individuals interact for the solution of some of their problems. Group counselling cannot be considered to be simply an extension of individual counselling to several individuals at once. It provides a qualitatively different and unique experience to the participants. In the process of group counselling the counsellor has to play a very important role in creating a more accepting, permissive and safe atmosphere. Group counselling provides an opportunity to interact with other individuals with similar or different problems. The size of the group, the personality of the counsellor, the theme of discussion, the nature of the sample all play a very important role in the process of counselling. It is more suitable to adolescent subjects who are confronted with a variety of problems. It was for this reason that group counselling was adopted in the present investigation.

The present study aims to study the following issues :

1. It is assumed that the self-ideal congruence which is the measure of self-esteem will increase as a result of group counselling treatment.

2. The second assumption is that the initially low self-esteem subjects would show far greater improvement than the initially high self-esteem subjects.
3. The third assumption states that the improvement in self-esteem will be accompanied by reduction in depression, neurotic symptoms and anxiety.

The measure of self-esteem was developed by carefully selecting 49 self-referent items by referring to seven important areas of behaviour. The Neurotic Scale was originally prepared by Miss Panchal in her M.A. dissertation. This scale was slightly modified and used to measure neuroticism. The Depressive Affect Scale and the Anxiety Scale were constructed by the investigator. The Depressive Affect Scale consisted of 30 items, depicting depressive reactions and the Anxiety Scale which indicated anxiety reactions also consisted of 30 items. The Self-esteem Scale was correlated with these scales and the correlations were sufficiently high and in the expected direction. The Self-esteem Scale was then administered to a group of 300 adolescent subjects selected from five schools situated in the City of Baroda. The self-ideal congruence was computed for each subject by correlating the two sets of scores obtained under two different instructions - one for self-sort and the other for ideal self-sort. On the basis of their performance, 50 subjects with high self-esteem and 50 subjects with low self-esteem

were selected. Each of these two groups was further subdivided into an experimental group and a control group of 25 each. The two experimental groups were then subjected to group counselling in small groups. All the 50 subjects were grouped into seven small groups, six of which consisted of seven subjects each and one consisted of eight subjects. While grouping, both high and low self-esteem subjects were placed together. The only criterion adopted for grouping the subjects was that they were studying in the same division. The subjects were all adolescent boys and girls studying in Std. 10. Group counselling technique was used, because it is more suitable to adolescent subjects. Each of the seven groups was treated once a week for a period of three months. Thus each group received in all 12 sessions. The theme of discussion was directed by the investigator, who acted as counsellor, being experienced in the field, through the presentation of some concrete situational problems. In the intake interview the counsellor convinced the subjects of the importance and utility of freely discussing and participating in a group situation. She also explained to them the responsibility they had to bear in a group. Each session began with the presentation of a situational problem. Care was taken to see that each one participated freely. It was not possible to keep a verbatim record of each and every person in a group, but the counsellor had prepared a record sheet with names of the subjects on the

left hand side of the page and some blank against each name, so that she could take down the points raised and discussed by each subject. These points were then considered for the group as a whole. The specific trends were brought out from the analysis of the contents.

At the end of counselling sessions, the subjects were again tested on the Self-esteem Scale, the Depressive Affect Scale, the Neurotic Scale and the Anxiety Scale. The changes in respect of these measures were analyzed and discussed.

In addition, five subjects were studied in detail by partly treating them in group sessions and partly in individual sessions. It should be noted here that the individual counselling in these five cases was not a supplementary device to group counselling. In fact both procedures have certain distinguishing features. The idea for treating them under the two procedures was not forced upon them by the counsellor.

The analysis of the results is both qualitative and quantitative. The initial self-ideal congruence was compared with the self-ideal congruence obtained after the counselling treatment. The comparison was made in terms of the number of subjects showing improvement, frequency distribution of the subjects in different score ranges,

mean self-ideal congruence and the amount of change. The changes in self-esteem in the experimental groups were compared to those in the respective control groups. Besides, the changes in the high self-esteem group were compared with those in the low self-esteem group. The report of the various interview sessions was presented by analyzing the contents of interviews. Finally the reports of five different cases were presented. Based on the analysis of the results the following conclusions are drawn :

Conclusions

1. Both the experimental groups and the control groups showed changes in the level of self-esteem when tested after an interval of three months. But the amount of positive change was far greater in the experimental groups than in the control groups. The improvement in the control subjects was attributed to non-counselling procedures, since they were not treated by adopting any procedure. The question to what extent the resulting changes are attributable to the specific treatment and to what extent to other uncontrolled factors is answered here by saying that there are significant improvements in the experimental groups in comparison to the respective control groups. As far as the results of the present investigation are concerned, the improvements in the experimental subjects are clearly attributable to the successful administration of the counselling treatment. The amount of improvement in the experimental subjects above that which could be

attributed to non-counselling procedures is an indication of the success of ^{the} counselling treatment.

- 2 A greater amount of change in self-esteem has been observed in the low self-esteem group than in the high self-esteem group. This is another indication of the success of group counselling. Small changes are expected in the high self-esteem subjects under the influence of counselling, whereas greater amount of changes is expected in the low self-esteem subjects. The results indicate that there are far greater changes in self-esteem in the low group than in the high group. Since the high group has the higher level of self-esteem, it is inferred that the group has fewer problems and difficulties to be surmounted. In other words low self-esteem subjects have been able to raise the level of their self-esteem under the influence of group counselling.
- 3 The mean self-ideal correlation in the low self-esteem experimental group at the pre-counselling stage was .05 and at the post-counselling stage it was .50. This indicates that there has been a considerable improvement in the low group. In the low self-esteem control group the difference in self-esteem measures at the pre- and post-counselling stages is not so great as that in the experimental group.

- 4 The mean self-ideal correlation in the high experimental group at the pre-counselling stage was .62 and at the post counselling stage it was .67. Thus the change in self-esteem from pre-counselling stage to post-counselling is not appreciable. The means of the self-ideal correlations at the pre- and post-counselling stages in the high self-esteem control group are .59 and .60 respectively.
- 5 The experimental groups showed a marked decrease in neurotic symptoms, depression and anxiety as a result of counselling treatment. The changes in respect of neuroticism, depression and anxiety are greater in the experimental groups than those in the control groups.
- 6 Low self-esteem subjects showed greater amount of reduction in the initial levels of depression, neuroticism and anxiety in comparison to high self-esteem subjects.
- 7 The qualitative analysis of the results has provided sufficient data to infer the quality of improvement over the period of treatment. It was observed that the group situation enabled the subjects to change their attitudes and perception. Those subjects who were initially reluctant to discuss their problems felt free to do so and recognized the fact that there are many solutions to the problems and not just one which they had thought of. They also learned that problems arise because of faulty attitudes and perceptions. It was observed that the subjects became

more and more active and participating as the counselling treatment advanced. The initial levels of apathy, indifference, resistance and aggressiveness were considerably reduced during the treatment. There were indications of the fact that the subjects did develop sufficient insight to probe deeper into their own problems. In general, certain definite trends towards behaviour change were observed. In the first place, the subjects moved from over-emphasis to symptoms in the initial stage of counselling to increasing self-reference in the later stage of counselling. Secondly, the subjects showed a more pronounced tendency to develop positive attitudes with the progress of counselling. Thirdly, there was a trend towards making more self-approval statements in the place of ambiguous statement. Fourthly, the subjects moved towards greater maturity with the progress of counselling.

Some Suggestions for Further Research

The present investigation was restricted to small groups of adolescent boys and girls who were treated by group counselling procedure over a period of three months for 12 sessions. The variables which are worth investigation are sex groups, number of subjects in each group, the basis of grouping, the duration and length of treatment, types of treatment and the personality of the counselling. It is

not yet clear whether combining boys and girls in one group is more advantageous than keeping them in separate groups. It is also not known whether the grouping of both high and low self-esteem subjects would result in a more significant improvement than keeping them in different groups. In the present investigation, both the high as well as low, self-esteem subjects were combined in one group. Another important variable to be studied is the size of the group. Although it has been stated by some researchers that the maximum limit should be six or seven subjects, it is by no means clear whether the group of less than six or seven would be better than the group of more than seven subjects. The various bases of grouping the subjects also demand research. Various combinations of subjects differing in age, sex, family, background, socio-economic status, achievement level and intellectual abilities, are worth trying in order to establish certain generalized principles for grouping the subjects. One can also investigate the problems of comparing different procedures of treatment. The effects of directive and non-directive approaches could also be studied in a group-setting. It is also necessary to evaluate the results in the experimental subjects by comparing them to different control measures. It is possible to vary the duration of each session and also the total

length of the therapy period. The possible interaction between the duration of therapy and the total length of therapy period could be studied experimentally. The sex of the counsellor is also an important variable, which deserves careful investigation. This study could be conducted by forming two sex groups of the subjects and subjecting them to both male and female counsellors. In this case, too, the interaction, if any, between the sex of the counsellor and that of subjects could be studied experimentally. Similar investigations could be undertaken by using counsellors differing in respect of their personality make-up. In the present investigation, only two extreme groups differing in self-esteem were selected. It is possible to take the middle group also and to compare the resulting changes in this group with the other two groups. These and many other investigations could be undertaken. Finally, it is worth noting that more and more researches are needed in order to use group counselling with better advantages. In India, where counselling facilities at school level are extremely rare and the worth of the counsellor is not fully recognised or there are many students and very few counsellors, any investigation aiming at establishing certain general and specific principles for the operation of group counselling would prove to be of great practical value.