CHAPTER III

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CHAPTER III

PLAN AND PROCEDURE

The Problem

The present investigation as stated in an introductory chapter, aims at studying the Self-esteem changes consequent upon counselling interviews. Self-esteem as it is commonly understood refers to the generalized feeling of adequacy or inadequacy on the part of an individual. In a statistical sense self-esteem represents the degree of congruence between the perceived self and the ideal self. The self-esteem could be changed under the influence of certain experimental conditions to which it is subjected. Changes in certain specific aspects of behaviour or in overall behaviour have been and are being studied by various investigators, most of whom have reported that self-esteem is a fluid organization of feelings and perceptions, which changes appreciably under the influence of some kind of psychotherapy. The various researches that have been carried out so far have stressed qualitative or quantitative aspects of behaviour or both. Investigators

emphasizing qualitative aspect of behaviour have stressed the importance of verbalizations made by the individual during psychotherapy. Investigations conducted along these lines have shown that self-esteem tends to change from negative to positive, and that the subject shows an increasing degree of self-awareness. Investigators dealing with the quantitative aspects of behaviour have shown that the initial low correlation between self and ideal self, which is the measure of self-esteem tends to increase as a result of influence of psychotherapy. Some other investigators have administered certain personality tests like the Rorschach and the TAT at various points of testing during the process of psychotherapy. The test results have shown marked improvement in the client's behaviour. It is now an established fact that the client's self-esteem could be changed from low to high by subjecting him to some experimental operations designed to bring about such changes. Ordinarily in such investigations selfesteem measure is obtained prior to therapy administration and after the therapy administration. The resulting changes from pre-to post-therapy administration are then compared with those obtained from the control subjects who were not given any therapy. To the extent that the change in behaviour in the experimental group exceeds the change in behaviour of

the control group, the effectiveness of the therapy in producing these changes is demonstrated.

It is not simply enough to say that the client's behaviour changes are due to psychotherapy. However, equally important or perhaps more important is the fact that the changes in behaviour take place under certain specific conditions or situations. The magnitudes of such changes are determined by the factors within an individual as well as experimentally created conditions or situations. It has been shown by some investigators, for example, that initially low self-esteem cases are more likely to change than cases with initially high self-esteem. It has also been shown that some low self-esteem cases do not change due to high level of frustration tolerance. Similarly, some experimental procedures may be more leffective; than others in producing changes in the client's behaviour. It, thus, appears that there are many factors which influence behaviour change in the client. One of the important reasons for the lack of unanimity among various research findings is the multiplicity of factors determining change in the client's behaviour. The present investigation is one more attempt to study changes in certain specific areas of behaviour among school-going children when they are subjected to brief counselling sessions extending over a period of a few months.

The Hypotheses

No specific hypotheses have been formulated, but certain specific issues concerning the possible effects of group counselling treatment have been raised and discussed. The first issue pertains to the relation between the perceived self and the ideal self. Any discrepancy between them reflects the sense of dissatisfaction. This dissatisfaction could be reduced under the influence of group counselling treatment. The increase in the degree of self-ideal congruence from pre-counselling to post-counselling could be treated as an index of reduction in self-dissatisfaction. It is, therefore, quite reasonable to assume that the self-ideal congruence following the treatment with counselling interviews would be greater than that obtained prior to such treatment. The justification of this assumption thus requires the comparison between self-ideal congruence scores obtained before and after counselling treatment. In the present investigation the self-ideal congruence scores would be examined in all the four groups - two experimental groups and two control groups - in terms of the number of persons showing improvement, the number of persons obtaining scores above certain value and the number of persons obtaining scores below certain value.

The second issue pertains to the magnitude of change in the two experimental groups. It is assumed that the amount of change in self-esteem from pre- to post counselling treatment would be greater among subjects with low self-esteem. It is also assumed that there will be some increase in self-esteem even among subjects with initially high self-esteem. In both the groups the improvement would be higher than that of the respective control groups. There may be cases whose initial level of self-esteem is so high and the idealized self so close to the perceived self that there is little scope for improvement.

There are no two opinions about the beneficial effects of some kind of counselling interviews. A person undergoing counselling is able to overcome his weaknesses and inhibitions and attains the personal sense of well-being. The successful counselling makes an individual more realistic, confident, self-sufficient and less defensive. In view of this it is expected that the subjects' performance on Depressive Affect Scale, Neurotic Scale and Anxiety Scale would be better due to the influence of counselling treatment.

In addition to these three main issues, it was also thought by the investigator that the process of change in

behaviour requires thorough studies of a few selected individuals so as to understand how and in which manner the specific changes are effected.

The Experimental Design

The broad objective of the experiment is to study self-esteem changes which might occur in the subjects undergoing counselling interviews. The general plan of the research calls for measuring self-esteem both before and after the administration of counselling interviews. The design is illustrated on the next page:

EXPERIMENTAL DESIGN

EXPERIMENTAL GROUP

HIC	SH
SELF-ES GROU	

PRE - TEST

COUNSELLING TREATMENT

POST-TEST

LOW SELF-ESTEEM GROUP

PRE - TEST

COUNSELLING TREATMENT

POST - TEST

CONTROL GROUP

HIGH SELF-ESTEEM GROUP

PRE -TEST

POST - TEST

LOW SELF-ESTEEM GROUP

PRE - TEST

POST - TEST

As seen from the above illustration both the experimental groups and the control groups were given a pre-test on Self-esteem Scale. The two experimental groups were then subjected to counselling treatment in a group counselling situation for a period of three months. Both the experimental and control groups were then given a post-test on the self-esteem scale. The high self-esteem experimental group and its control group as well as the low self-esteem experimental group and its control group were formed on the basis of their initial performance on the Self-esteem Scale which will be described in the next section. To the extent that the experimental group shows greater change in self-esteem in comparison to that in the control group, the effectiveness of the intervening treatment is demonstrated.

The Sample

The initial sample consisted of 300 adolescent boys and girls who were selected from five high schools situated in the City of Baroda. In order to form two extreme groups, these 300 subjects were administered the Self-esteem Scale. On the basis of their performance 50 subjects were selected to constitute the high self-esteem group and an equal number of subjects to constitute the low self-esteem group. In the high self-esteem group the self-ideal congruence which is expressed in the form of correlation ranged from .46 to .84

and in the low self-esteem group it ranged from -. 21 to +.27. Each of these two groups were further subdivided into an experimental group and a control group consisting of 25 subjects in each. Thus the investigator has to deal with 50 subjects by giving them group counselling treatment in small groups over an extended period of time. One might argue that the sample size is quite small and therefore it cannot represent the population from which it is drawn. There are two reasons for selecting 50 subjects (25 high self-esteem and 25 low self-esteem) for the group counselling treatment. First, it could be stated that for the study which is undertaken for studying changes in selfesteem due to counselling treatment, a strictly random sample is not needed. Secondly, since these 50 subjects are to be treated with counselling treatment over a period of three months in small groups of seven or eight subjects in each group, handling of more than 50 subjects would be exceedingly difficult. All that is done in this investigation is to study the basic attitudes of the subjects and the changes in these attitudes and therefore it could be assumed that the population from which the sample is selected would share these basic attitudes. The initial sample consisted of 300 subjects. Out of these 300 subjects 50 subjects were selected so that the two extreme groups were adequately represented.

All the subjects were the students of Std. 10. They were selected from the high school situated in the City of Baroda. While selecting the schools, it must be admitted that the investigator selected schools likely to cooperate fully in the work. Since the investigator had to make repeated contacts with the same subjects over a period of three months, it was not possible to get full cooperation from all the high schools. It was also not possible for the investigator to deal with many cases for the type of work involving individual approach or small group approach. The selection of the schools was therefore, limited to the following five schools:

- 1. New Era Girls' High School
- 2. University Experimental School
- 3. Sharda Mandir High School
- 4. Gnanodaya Vidyalaya
- 5. M.K. High School.

There are many advantages of selecting adolescent boys and girls as subjects. At this stage of development the individual is concerned more with his self-concept. He begins to think what he is like and what he should become in future. It is during this period that an adolescent thinks about his future vocation and shows awareness concerning his intellectual

competence, aptitudes, economic condition, abilities, interests etc. It is at this stage of development that he is confronted with a number of problems. It is a period of unusual status ambiguity, because adolescents are generally not clear about their social duties and responsibilities, their rights and responsibilities. The adolescent period is thus a very important period of development for the study of self-esteem.

Measurement of Self-esteem

Self-esteem is essentially an index of correlation which is obtained by correlating two sets of scores of self-sort and ideal self-sort. Self-sort was done by the subjects under standard instructions to keep in mind the kind of person one actually is. Similarly, the ideal self-sort was done by the subject keeping in mind the kind of person one would like to be. Both self-concept and ideal self-concept are essentially subjective phenomena. The relation between the two could be studied effectively employing Stephenson's Q-technique. (1953). The Q - technique requires the subject to sort the self-referent items into seven, nine or eleven piles ranging from most descriptive of the self to least descriptive of the self under two different instructions in a forced normal distribution. An index of the relationship is

obtained by correlating the two sets of scores obtained for two sortings.

For the purpose of developing items of the self-esteem measure the following seven areas of behaviour were considered:

- 1. Family relations
- 2. Self-determination
- 3. Intellectual ability
- 4. Social relations
- 5. Emotional stability
- 6. Ability to stand criticism
- 7. Personal strengths and weaknesses

Since some of these areas do not appear to be mutually exclusive, care was taken to see that they were adequately defined in terms of certain specific items. The reason for selecting these seven areas was that they were used by some of the investigators working in the field and that they were found to be quite relevant to the study of the behaviour of adolescent subjects. Several items were gathered from standard personality tests and inventories. Other items were prepared by the investigator to define each of the seven areas of behaviour. The problem of exact and unambiguous communication is very important especially when one is dealing with the measurement of subjective experiences. It is,

therefore, necessary to use a simple form of expression and unambiguous words. Since the self-esteem measure is to be used for Gujarati-speaking subjects, it was decided to use Gujarati language in preparing the items.

Twenty items were prepared for each of the seven areas of behaviour. In addition to the language and format of the items, care was taken to see that the items within each behaviour area depict different degree of favourableness and unfavourableness through neutrality. One hundred and forty items after preliminary inspection were given to 10 competent judges to sort them into seven categories of behaviour. This procedure was necessary for determining the relevance of items to pertinent categories. They were also asked to indicate those items which they thought were irrelevant. Based on the judgments of the 10 judges, seven items for each of the seven areas were carefully selected by considering the frequency of their placement in a particular category and the degree of favourableness they depicted. Thus in all 49 items were selected by following the procedure mentioned above. The reliability of this instrument was determined by the Retest Procedure. A group of 100 subjects was administered the Self-esteem Measure twice with an interval of 15 days. The correlation was found to be

.76, which is quite high. The Self-esteem Scale with its Gujarati and English versions is shown in Appendices A and B. It is quite reasonable to assume that the correlations of self-esteem with depression, neuroticism and anxiety would turn out to be negative and significant. Higher scores on Depressive Affect Scale, Neurotic Scale and Anxiety Scale indicate higher degrees of depression, neuroticism and anxiety respectively. The correlation between self-esteem and depression was found to be -.62, which is negative and quite high for indicating the type and extent of relationship. Similarly the correlations of self-esteem and neuroticism on one hand and anxiety on the other turn out to be -.53 and -.34 respectively. Although the correlation between selfesteem and anxiety is low, it does indicate that subjects with high self-esteem tend to possess low anxiety. Thus the relation of self-esteem with depression, neuroticism and anxiety is of sufficient magnitude and is in the expected direction.

The self-esteem scale thus prepared was administered to the initial sample of 300 subjects under two different instructions - one for self-sort and the other for ideal self-sort. For the self-sort the following instructions were given to the subjects:

Every individual has definite notions about his interests, aptitudes and abilities. We can express our notions about ourselves through statements. In order to know what type of notions you have about yourself or how you perceive your self in the present situation some statements are made given below: Read these statements carefully and indicate what type of ideas you have about yourself at present according to the following instructions: While responding to the statements, please do not forget that you are expressing your notions as to what you actually are at present.

- 1. First of all read all the 49 items carefully Out of these items, select 17 items which, you think, are more applicable to you. Put a (tick) mark against each item number to indicate your preferences.
- 2. From the 17 items that you have just preferred, choose eight items that are more applicable to you that any one of the remaining items, indicate your choice by putting brackets on both the sides of the tick marks (\(\subseteq \).
- 3. From the right items, select two that are more applicable to you than the remaining items. Put the large brackets on both the sides of the small brackets \((\subseteq) \) to indicate your choice.

- 4. You have selected 17 items which, you think, are more applicable to you. Now, out of the remaining 32 items select 17 that, you think, are less applicable to you. Indicate your answer by x (cross) marks before the number of each preferred item.
- 5. From the 17 items that you have just selected, choose eight that are less applicable to you in comparison to the remaining nine items. Indicate your answer by putting small brackets on both the sides of the cross, (X).
- 6. Out of these eight items, select two that you think are less applicable to you than the remaining items. Indicate your choice by putting large brackets on both the sides of small brackets, \[\(\times \) \].

After completing this be sure that you have marked the statements as follows:

before nine items

(≥) before six items

() before two items

X before nine items

(X) before six items

(X) before two items

For the purpose of measuring the ideal self, the same Self-esteem Scale was administered to the same subjects two

days after the first administration. During this time the following instructions were given:

'Two days ago you were given some statements to express your ideas about your self as you are at present. This time you are given the same statements. You have to indicate in reference to these items which what type of person you would like to be. Whatever ideas you have about yourself at present may be different from those you might have about yourself in future. You have to choose each item keeping in mind the type of person you would like to be in future while answering you should not forget that you are expressing your ideas about yourself in future.'

In this type of investigation there is a possibility that the subjects may not carry out the instructions given by the investigator. Secondly, the interval of two days between the two administrations may not be sufficient to counteract the possible biases. The investigator has ascertained that the instructions were carried out by the subjects at the time when the scale was being administered to them. As

regards the time interval between two administrations it was the thought that for the study on self-esteem, too long a period was not desirable. In a certain sense a period as long as 10 days may not be desirable for this kind of study. At the same time too short a period is undesirable, because the subjects' sorting may be adversely affected due to the memory effect. Although the interval of two days is quite short, it was used alongwith certain measures to counteract the memory effect. The subjects were not informed that they would be asked to do the sorting once again after an interval of two days. In the absence of such knowledge, it is not possible that the subjects will attempt to respond to items in a manner in which they responded to them previously. Moreover, the possibility of biasing effects was minimized by ascertaining that the subjects responded to the items by strictly following the instructions.

Each subject, as mentioned above, made two appraisals — one for the self and the other for the ideal self. These appraisals were made by sorting the items into seven categories ranging from least to most. Items most descriptive of the self were put in the seventh category and those least descriptive in the first category. The number of items to be sorted was decided so that the resulting distribution was

approximately normal. The distribution of items is shown below:

	Mos	t Char	aracteristic		Least characteristi		
	7	6	5	4	3	2	1
Number of Items	2	6	9	15	9	6	2

Each statement thus sorted twice under two instructions received two scores (one for each sorting). These two sets of scores for all the items were then correlated to derive an index of congruence for each subject.

Measurement of Depression

Besides Self-esteem Scale, each subject was also administered the Depressive Affect Scale. Most of the items of this scale were prepared by the investigator. Some of the items were developed by referring to standard personality inventories. The relevance of items was ascertained in consultation with some competent judges who were asked to indicate whether the items measure depression. Based on their opinions 30 items were selected. The reliability of the test was determined by the Retest Procedure. It was found to be .71. Thus the test is highly reliable. The Depressive Affect Scale and its English version are shown in Appendix C and in Appendix D. The purpose of developing this test was

would be negatively correlated with the measure of selfesteem. Thus it served as a criterial for the relevance of
the self-esteem measure. Secondly, it was also thought
would
that the variations in self-esteem would by
variations in depression. The Depressive Affect Scale was,
therefore, administered also after the administration of
counselling interviews.

The Depressive Affect Scale as explained above consisted of 30 items. The subject was required to mark each item by encircling any one of the three alternatives provided against each item. More specifically the subject was asked to mark each item on a three-point scale with '3' denoting the highest degree of depression and '1' denoting the lowest degree of depression. The subjects' score on this scale was simply the sum of the scores on each individual item. The highest possible score was 90 and the lowest possible score was 30. The higher score indicates greater depression.

Measurement of Neuroticism

Besides the Depressive Affect Scale, the Neurotic Scale was also used with the object of correlating it with the Self-esteem Measure. This w scale was developed by Panchal (1970

It was used here with certain minor modifications. The original scale consisted of 108 items, which were developed by referring to some standard tests and also by discussing with some competent persons working in the field of clinical psychology. While developing the items, the following six dimensions of behaviour were considered:

- (a) Mature Vs. emotional
- (b) Confident Vs. insecure
- (c) Tough-minded Vs. sensitive
- (d) Conscientious Vs. changeable
- (e) Realistic Vs. sentimental
- (f) Steady and relaxed Vs. Tense and overanxious

Items based on standard test and the opinions of persons specialized in clinical branch of psychology were developed to describe each of the six dimensions mentioned above.

These items were then given to six judges who were asked to determine the relevance of each item to pertinent category.

Besides, each judge was also asked to indicate the degree to which each item indicated the underlying characteristic.

For this purpose they were required to mark each item on a three-point scale with '1' indicating the least degree and '3' indicating the highest degree of the underlying characteristic. The column for marking out the irrelevant

items, if any, was also provided. Based on the judgments of these judges, 40 items were selected. These 40 items were then administered to a group of 25 neurotics and a group of 100 normal individuals. The Chi-square test was used to see whether the items discriminated normals from neurotic individuals. Items with insignificant Chi-square value were eliminated and some more items even with significant Chisquare value were elimited, since they were found to be rather ambiguous. The final Neurotic of Scale consisted of 30 items. The reliability coefficient estimated by the Kuder Richardson Formula was found to be .70. Since this scale was slightly modified by the present investigator so as to make it suitable for school children its reliability needs to be ascertained. For this purpose the test was administered twice to an independent sample of the 100 subjects with an interval of 15 days between the two administrations. The reliability estimated by this procedure was .68. The Neurotic Scale is shown in Appendix E and its English version is shown in Appendix F.

In this scale the subject was required to encircle any one of the three alternatives provided against each item. In otherwords, he had to rate each item on a three-point scale in which 37 (A) denoted the highest degree of neuroticism and 45 (C) the lowest degree of neuroticism. The subjects'

items. The highest and the lowest possible scores were 90 and 30 respectively. The higher score indicates the greater degree of neuroticism.

Measurement of Anxiety

Like the Neurotic Scale, the Anxiety Scale was also used with a view to correlating it with the Self-esteem Measure. This scale was prepared on the line of Taylor Manifest Anxiety Scale (TMAS). For the purpose of preparing this scale, items similar to those used in TMAS were constructed by the investigator. All the items depicted overt manifestations of anxiety. These items were given to five judges with instructions to indicate whether the items were relevant for measuring overt anxiety reactions. They were also asked to indicate the degree to which each item showed manifestations of anxiety by putting a 🗸 (tick) mark on a three point scale in which '3' indicated the highest degree of manifestation and '1' indicated the lowest degree. Based on the opinions of these experts 30 items were selected to comprise the anxiety measure. For the purpose of ascertaining reliability, this scale was administered to an independent group of 100 subjects twice with an interval of 15 days between the two administrations. The reliability coefficient obtained by correlating the two sets of scores was .73, which is quite

high. This Scale is shown in Appendix G and its English version in Appendix H.

The subjects' anxiety score in this test was based on the number of items, tick-marked by them. The maximum possible score in this scale was 30.

The Process of Counselling

Having obtained the measures of self-esteem and other variables, the experimental groups were subjected to group treatment. Group counselling is relatively of recent origin and many things are as yet to be known about its functioning. Ordinarily the group consists of about five individuals, so that the maximum advantage of group interaction can be effectively gauged. A group consisting of seven individuals may be used but beyond this number it is difficult to work effectively. In the present investigation, in all seven groups were formed, six groups involving seven subjects each and one involving eight subjects. Thus in all 50 subjects were selected and they were subjected to group counselling interviews in their respective groups. No specific criterion was kept in mind while grouping the experimental subjects, but care was taken to see that the subjects were studying in the same division of Std.10. It was also seen that no group contained either all subjects with high self-esteem or low

self-esteem. All the groups consisted of both high and low self-esteem subjects with diverse problems. In group counselling it is also important to specify the frequency of meetings, the total period over which the meetings are conducted and the duration of each meeting. In the absence of any standardized procedure for the variation of the frequency, duration and total length of the time interval, it was thought proper and adequate by the present investigator to hold the meeting once a week for one hour or slightly more over a period of three months. Each group received in all 12 sessions. There was no special provision for counselling rooms in the schools where counselling interviews were conducted. The laboratory room, the drawing room, the music room and the sewing room were utilized for the interviews.

Having brought the subjects together in small groups with high and low self-esteem, the next question was how the counselling should get started. At the present state of our knowledge, very little is known regarding the essential processes to be considered in counselling interviews. The definite description of the various processes involved in counselling is a task for the future investigators. In the present investigation the following procedure was adopted:

As in the case of individual counselling, a highly stimulating type of atmosphere needs to be created, so that

the subjects may feel secure and confident in revealing their own problems and showing an inclination to solve them. This type of atmosphere was created by encouraging the subjects to talk freely about topics in which they were interested and also by discussing the problems of other persons and the way they were solved. They were then told about the purpose of their meeting and were convinced about the fruitfulness of discussing one's own problems jointly in a group meeting. The subjects were then asked to supply their identifying data, which included name, education and occupation of parents, number of siblings and their particulars, their interests, hobbies etc. This was done in the first two sessions. The investigator was fully convinced about the subjects' willingness to discuss their own problems and to know more about them. From the third session to the last session a theme was adopted, which helped the investigator to follow the course of interviews with increasing degree of understanding. The themes adopted in this investigation may be defined as topics and points of focus with a clear beginning and a clear stopping point. The topics were related to seven areas of personality, which were considered for preparing the Self-esteem Scale. In preparin the theme the age level of the subjects and their educational background were kept in mind. The procedure for presenting the topics or situational problems was not rigidly adhered to. Questions and problems which the subjects brought in during

the course of discussion were also considered. The purpose of presenting and of discussing certain specific questions and problems was to help the subjects to create necessary skills and insight, so that they can solve their problems with greater confidence. With the development of skills and insight, the subjects become more accepting and understanding of their own self and others.

The subjects were encouraged to take more and more active part in discussing problems involving their relationships with parents, friends, brothers, sisters, neighbours and teachers. It was noticed by the investigator in the beginning of the third and fourth sessions that some subjects did not feel free to present their own problems. Such subjects were specially attended to by the investigator. Some other subjects were found to be participating actively by presenting problems as if they were not their own. Some of the subjects were found to be very aggressively discussing their own problems with parents, neighbours and friends. Feelings of inferiority and shyness were observed in some subjects who were encouraged and helped to rid themselves of these feelings. Those subjects who could not present their problems in the presence of others were asked to write down on a piece of paper. Such problems were discussed by the group without letting the other subjects to know-ebout whose problems they were discussing. Gradually the

tendency to recognize and to accept one's own problem at its face value was observed during counselling interviews. There were three subjects who expressed their desire to see the counsellor personally for the discussion of their problems. These subjects were given an appointment and treated individually. The details of the treatment and of the outcome of the treatment are given in a separate chapter. Problems in the areas of social relations, family relations, personal strengths and weaknesses, ability to stand criticism etc. were frequently raised by the subjects. The approaches followed by them to the solution of these problems in the initial stage were found to be highly inadequate and gradually they were replaced by more rational approaches.

Since there were seven to eight subjects in each group and since the group involved both high and low self-esteem subjects with diverse problems it was difficult to record everything that was stated by each subject. The investigator had prepared a record sheet in advance. It was possible for the investigator to jot down rapidly the points referred to by each subject in a group. The report of the analysis of verbal expressions of the subjects is presented in a subsequent chapter.

Summary

The present investigation aims at studying the effects of counselling interviews on an individual's self-esteem. Self-esteem is defined as the congruence between an individual's notions of his self and ideal self. The self is simply the knowledge of what an individual thinks himself to be at a given moment, while the ideal self is conceived as what the individual would like himself to be.

In order to measure self-esteem Q - technique was used seven main areas were considered in preparing the instrument. The relevance of the instrument was tested by correlating it with the Depressive Affect, the Neurotic and the Anxiety Scales. The Self-esteem Scale was administered to 300 subjects. Out of these 300 subjects, 50 subjects obtaining the highest score on the Self-esteem Scale were divided into the two groups, forming an experimental group and a control group. Similarly, 50 subjects obtaining the lowest score on the Self-esteem Scale were also divided into an experimental group and a control group. The two experimental groups were then subjected to group counselling, over a period of three months. Counselling involved the presentation of some situational problems and the discussion of these problems by the members of the group. Finally, all the groups were tested again on all the four measures mentioned above. The

pre-counselling results were compared with the post-counselling results. The analysis and interpretations of the results will be discussed in the next chapter.

Chapter III

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