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An investigation of the effects of breach of confidentiality of adolescents' level of trust

Carolyn Bosta Warrick
College of William & Mary - School of Education

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**An investigation of the effects of breach of confidentiality on
adolescents' level of trust**

Warrick, Carolyn Bosta, Ed.D.

The College of William and Mary, 1991

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**AN INVESTIGATION OF THE EFFECTS
OF BREACH OF CONFIDENTIALITY
OF ADOLESCENTS' LEVEL OF TRUST**

**A Dissertation
Presented to
The Faculty of the School of Education
The College of William and Mary in Virginia**

**In Partial Fulfillment
Of the Requirements for the Degree
Doctor of Education**


**by
Carolyn Bosta Warrick
May 1991**

AN INVESTIGATION OF THE EFFECTS
OF BREACH OF CONFIDENTIALITY
ON ADOLESCENTS' LEVEL OF TRUST


by

Carolyn Bosta Warrick

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To my loving husband, Marion,
whose thoughtfulness, support and
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helped make the completion of this dissertation
a reality;

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**AN INVESTIGATION OF THE EFFECTS
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ABSTRACT

The purpose of this study was to investigate the effects of breach of confidentiality on adolescents' level of trust using a pretest/posttest control group experimental design. The study used a normal population of volunteer eighth grade middle school students enrolled in average regular education classes in the Hampton Public School System. The initial sample consisted of 162 students (123 of which completed the entire study), designated as high or low trusters based on their scores on Rotter's Interpersonal Trust Scale, who were randomly assigned to 1 of 3 groups, and the groups randomly assigned to 1 of 3 treatment conditions (Full Justification for breach of confidentiality, Minimal Justification and Control), with high and low trusters equally distributed.

The dependent variables of trust and self-disclosure were assessed by Rotter's Interpersonal Trust Scale, Jourard's Self-Disclosure Questionnaire, and the High School Personality Questionnaire. Multivariate analysis of variance (MANOVA) was the statistical technique employed to analyze the data. Five research hypotheses provided the basis for determining whether or not there would be significant differences at the .05 level among

groups, and whether or not there would be differential effects between high and low trusters.

The major findings of the research provided no empirical support for the hypothesis that adolescents' level of trust would be significantly affected by breach of confidentiality. Further, the findings revealed that there was no significant impact on adolescents' level of trust whether the counselor provided them with a full justification or minimal justification for breach of confidentiality. No statistically significant differences were found among the Full Justification, Minimal Justification, and Control groups on the variables of trust, self-disclosure and the 14 factors assessing personality functioning on the High School Personality Questionnaire. The analyses showed, however, that there was a significant time effect for self-disclosure, with students, regardless of group, reporting a higher level of self-disclosure at posttest. There also was a statistically significant differential effect between high and low trusters, on the trust measure and on two factors of the High School Personality Questionnaire (Cheerfulness and Withdrawal), with high trusters showing a decrease in their scores and low trusters showing an increase in their scores.

Further research is needed to verify the results of this study. Recommendations include the replication and extension of this study by increasing the sample size to incorporate pre-adolescent, mid-adolescent and late-adolescent students to ascertain if breach of confidentiality has a differential effect on trust according to age;

using special populations of students such as unmotivated gifted students or potential dropouts due to academic underachievement or truancy; using students who actually seek assistance from counselors for personal problems rather than relying on volunteers; and varying the counseling style as well as sex of the counselor and student in the videotape presentation.

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**AN INVESTIGATION OF THE EFFECTS
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Chapter 1

Introduction

Justification for the Study

Emerging legal and ethical trends relating to the issue of confidentiality, particularly as applied to the educational setting, are prompting researchers to take a closer look at this area. Confidentiality generally is viewed as an ethical concept relating to the professional's obligation not to disclose information given in confidence by a client without substantial justification or legal cause. More specifically, Siegel (1979) defines confidentiality as an ethical concept that implies an explicit contract or promise by the professional to reveal nothing about an individual except under conditions agreed to by the individual.

As outlined in the Ethical Principles of Psychologists (APA, 1989), principle 5 dealing with confidentiality, states the following:

Psychologists have a primary obligation to respect the confidentiality of information obtained from persons in the course of their work as psychologists. They reveal such information to others only with the consent of the person or the person's legal representative, except in those unusual circumstances in which not to do so would result in clear danger to the person or others.

Where appropriate, psychologists inform their clients of the legal limits of confidentiality. (p. 392)

Although the components of confidentiality are embodied in ethical standards, historical legal developments have imposed requirements regarding the limits of confidentiality within the context of counseling sessions. For example, in recent years each of the fifty states have instituted legal requirements related to the reporting of child abuse. Other states, based on the precedent setting court decision of Tarasoff v. Regents of the University of California (1976) have a duty to warn provision within state statute that requires psychologists, counselors and other mental health providers to breach confidentiality and warn the intended victim when the client is determined to be a threat.

In the context of a counseling session, breach of confidentiality may be viewed as an ethical/moral dilemma for both the counselor as well as the client. Although it is important to examine the counselor's own motives in regard to breaching confidentiality, nothing alters the fact that by doing so a moral contract has been broken. As a result, the trust component may be modified and cognitive dissonance can be generated within the individuals. Reduction of this dissonance is necessary not only to restore harmony and congruity within the individuals but also to assure the continuing therapeutic process of the counseling session.

The expectation of confidentiality by clients in a counseling session is well documented in the literature (e.g., McGuire, Toal, &

Blau, 1985; Messinger & McGuire, 1981; Muehlman, Pickens, & Robinson, 1985; Woods & McNamara, 1980). Kobocow, McGuire, and Blau (1983) cite the expectation of confidentiality, and the value of trust in a counseling relationship, as critical factors in the facilitation of self-disclosure of personal and sensitive information particularly when working with adolescents.

A number of studies (e.g., Kaul & Schmidt, 1971; LaFromboise & Dixon, 1981; Merluzzi & Brischetto, 1983; Rothmeier & Dixon, 1980), using both audiotaped and videotaped analogue presentations of counseling sessions, successfully manipulated the variable of perceived counselor trustworthiness. Repeatedly, trustworthiness was reported to be an essential component of the counseling process and of the counselor's influence in the counseling relationship.

Trustworthiness, however, and the factors affecting it are difficult to define and isolate. Merluzzi and Brischetto (1983) specifically studied breach of confidentiality and perceived counselor trustworthiness. They reported that trustworthiness was compromised in cases involving highly serious problems such as suicide, and even in situations where the counselors were empathic, caring and deliberate in their decision to breach confidentiality. There has been no attempt to directly investigate the effect of breach of confidentiality on the client's level of trust. If, as Merluzzi and Brischetto reported, confidentiality is a key element in perceived counselor trustworthiness, and trustworthiness is

compromised when a breach of confidentiality occurs, what impact does that have for the client?

The relationship between trust and confidentiality is critical when dealing with adolescents. With trust, in general, being an issue with adolescents, it is all the more imperative to be acutely aware of what effects, if any, breach of confidentiality may have on trust. In certain situations, despite assurances of confidentiality, it is in the client's best interests to breach confidentiality if it is determined that the client may be a danger to self and/or others.

A review of the literature pertaining to trust, confidentiality, and self-disclosure with the adolescent population lends support to the need for further investigation. Trust, in particular, is documented as a researchable topic and repeatedly cited as an area for future research. Educational research can provide scientific, educational and practical benefits for the practitioner in the field by exploring relationships between variables and applying the results to educational practice. The current study will investigate the effect of breach of confidentiality on adolescents' level of trust using a pretest-posttest control group experimental design.

Statement of the Problem

The purpose of the study is to determine if breach of confidentiality has an effect on adolescents' level of trust, and to ascertain to what extent the type of justification given by the counselor for breach of confidentiality may effect adolescents' level of trust.

Research Hypotheses

1. Subjects receiving full justification for breach of confidentiality will achieve higher post-treatment trust scores on Rotter's Interpersonal Trust Scale than will subjects receiving minimal justification for breach of confidentiality.
2. Subjects receiving full justification for breach of confidentiality will achieve higher post-treatment self-disclosure scores on Jourard's Self-Disclosure Questionnaire than will subjects receiving minimal justification for breach of confidentiality.
3. Subjects receiving full justification for breach of confidentiality will show greater differences in post-treatment scores on the 14 separate dimensions of personality functioning on the High School Personality Questionnaire than will subjects receiving minimal justification for breach of confidentiality.
4. Subjects classified as HIGH TRUSTERS in both treatment groups will show a more significant drop in their post-treatment trust scores on the Interpersonal Trust Scale than will subjects classified as LOW TRUSTERS in both treatment groups.
5. Subjects classified as HIGH TRUSTERS in both treatment groups will show a more significant drop in their post-treatment scores on the 14 separate dimensions of

personality functioning on the High School Personality Questionnaire than will subjects classified as LOW TRUSTERS in both treatment groups.

Theoretical Rationale

Cognitive consistency theories have been particularly prolific in generating research in the field of social psychology. According to Zajonc (1968), the basic assumption of all consistency theories is that conflict, uncertainty, and inconsistency among cognitive interactions have the characteristic of being motivational forces and thus can activate behavior. Additionally, all consistency theories are homeostatic in nature in that they propose that individuals desire to maintain a state of consistency between cognitions and actions (Aronson, 1968).

The theory of cognitive dissonance, as formulated by Leon Festinger in 1957, is perhaps one of the most influential of the cognitive consistency theories. The theory addresses the conditions that arouse dissonance in an individual and the ways in which dissonance can be reduced. A state of cognitive dissonance is said to exist when behavior that is discrepant with one's own cognitions creates psychological discomfort. Cognitive dissonance forces the individual to reconstruct cognition to restore congruity and inner harmony.

Festinger (1957) originally proposed that one of the predominant motivations of the individual is striving for self-consistency and the reduction of cognitive dissonance. He based his

theory upon the premise that the human organism tries to establish internal harmony or congruity among his attitudes, opinions, knowledge and values by constant striving toward consonance among his cognitions.

Zimbardo (1960) clearly and simply summarized Festinger's theory:

Dissonance theory assumes a basic tendency toward consistency of cognitions about oneself and about the environment. When two or more cognitive elements are psychologically inconsistent, dissonance is created.

Dissonance is defined as a psychological tension having drive characteristics. Thus, the existence of dissonance is accompanied by psychological discomfort and when dissonance arises, attempts are made to reduce it.

(p. 86)

According to Festinger (1957), dissonance between two cognitive elements results from different sources. He identifies four situations in which dissonance can arise: (1) logical inconsistency, (2) cultural mores, (3) when one cognitive element is encompassed, by definition, in a more general cognition, and (4) past experience. Festinger maintains that the magnitude of dissonance or consonance that is present is a direct function of the importance of the elements for the individual.

The individual's personal commitment to a cognition, Festinger argues, has an influence on the type of dissonance

reduction employed. Festinger states that dissonance can be reduced in one of three ways:

1. By changing one or more of the elements involved.
2. By adding new elements that are consonant with the existing cognition.
3. By decreasing the importance or eliminating the dissonant elements. (p. 18)

Cognitive dissonance theory has generated substantial research and has applicability in diverse settings. Four traditional areas of research have focused on postdecisional dissonance, forced compliance, exposure to information, and social support. These four research paradigms have the same basic principle in common: When a cognition and action, or two cognitions, are incompatible, the individual is in a state of dissonance. The dissonance may be reduced by changing one's action, changing one's attitude, seeking support for one's cognition, or rejecting as unimportant any dissonant cognition (Arkes & Garske, 1977).

The theory of cognitive dissonance makes it possible to predict some of the conditions under which persuasive attempts to change attitudes may be successful as well as makes possible the prediction of the direction of the change. Generally, attitudes will change in a direction such that discrepancies between overt actions and attitudes, or between different attitudes, are minimized.

Strong (1968) developed his interpersonal influence process to counseling based on Festinger's cognitive dissonance theory.

Strong describes counseling for behavior and attitude change as an interpersonal influence process. He states that the arousal of client cognitive dissonance is a function of the psychological discrepancy between the individual's cognitive constructs and the content of the counselor's communication. Strong asserts that the variables of perceived expertness, trustworthiness, attractiveness, and involvement are important in interpersonal communication. These variables have a controlling force in reducing the dissonance raised by a discrepant communication. Strong and his followers generated much of the research on trustworthiness, particularly perceived counselor trustworthiness, utilizing Festinger's cognitive dissonance theory as their theoretical rationale. The theory of cognitive dissonance provides a general, theoretical framework in which to investigate the effects of breach of confidentiality on level of trust and to assess the impact of justification on changing cognitions and/or behavior to reduce dissonance. The counselor's breach of confidentiality can be considered a dissonance arousing condition. If the theory of cognitive dissonance holds true for the "exposure" to information paradigm, it is anticipated that those subjects who receive advance information and full explanation on the conditions under which breach of confidentiality might occur, would show less change in their trust scores than those unprepared subjects who received only a minimal statement concerning breach of confidentiality.

Definition of Terms

Trust:

In general, trust is a belief by a person in the integrity of another person. For the purpose of the present study, trust was defined in accordance with Rotter's (1967) definition, i.e., "an expectancy held by an individual or a group that the word, promise, verbal or written statement of another individual or group can be relied upon." (p. 651)

Confidentiality:

Confidentiality, in the most general sense, refers to the trust and faith an individual indicates when confiding in others (Trachtman, 1972). More specifically, confidentiality is an ethical practice and, as such, is defined as a moral promise given by the professional that protects a client from unauthorized disclosure of information given by the client in confidence (except in unusual circumstances, i.e., harm to self or others) without the informed consent of the client (Shah, 1970).

Breach of Confidentiality:

Disclosure of information given in confidence without the consent of the client.

Level of Justification:

Depth of explanation given by the counselor for breach of confidentiality.

Full Justification:

Complete explanation of confidentiality and its limitations given to the student at the beginning of the counseling session. "Everything we say in this room is confidential. It will not go outside of this room. There are two exceptions to that rule: (1) if I feel you are a danger to yourself and (2) if I feel you are a danger to others. In that case, I would need to break confidentiality and I would ask your permission to do so. But, in any case, I would have to break confidentiality." Student then repeats back to the counselor the conditions of confidentiality just described to her.

Minimal Justification:

"I have real concerns about you and for ethical reasons I feel I must breach confidentiality in this situation."

Self-Disclosure:

Disclosure of information about oneself to another party.

"Average" Classes:

A term used by the Hampton School Division to place regular education students of similar ability for instructional purposes. Based on their scores from annually group-administered, standardized testing (ITBS scores), students are assigned to "basic," "average," or "advanced" classes in order to provide relatively homogeneous ability grouping.

Sample Description and General Data Gathering Procedures

The sample for this study was drawn from an urban school system in southeastern Virginia with a total population of 21,329

students. The experimentally accessible population consisted of approximately 1,500 eight grade students in the five middle schools. Five hundred students and their parents and/or guardians (100 from each of the middle schools) were randomly selected to receive a packet of information explaining the general purpose of the study and consent form for participation in the study. The study required that each student meet for thirty-minute sessions twice per week for five weeks during Home Base period to avoid loss of formal instructional time.

Students returning the signed consent forms were interviewed using a brief personal data questionnaire in order to screen out potentially "at-risk" subjects. The remaining students were administered Rotter's Interpersonal Trust Scale and their scores were used to differentiate high and low trusters. Subjects were randomly assigned to one of three groups, and the groups were randomly assigned to one of three treatment conditions, with high and low trusters equally distributed. Four weeks after the pretest questionnaires were completed, the treatment conditions were implemented. The dependent variables of trust and self-disclosure were measured by the Interpersonal Trust Scale, Jourard's Self-Disclosure Questionnaire, and the High School Personality Questionnaire using a pretest-posttest control group research design.

Limitations of the Study

There are several limitations of this study related to the issues of internal and external validity. Internal validity refers most specifically to the extent to which the research design controls for extraneous variables that may affect the independent variable and confound the results. Subjects were randomly selected from the accessible middle school population, with random assignment of subjects to groups, and groups to treatment conditions.

External validity refers to the extent to which the results of this study can be generalized to settings and populations other than the ones under investigation. Although subjects were chosen from a fairly representative sample of urban middle school students, including minorities and a sizable military representation, in southeastern Virginia, the generalizability of this study's results, nevertheless, is limited by its geographical location and therefore may not be applicable to other cities or states. A further limitation of this study is related to the volunteer status of participating subjects, which may bring into question just how representative is the volunteer sample to the population as a whole. There is a specific limitation related to pretest sensitization which could have occurred since the pretest assessment instruments were self-report measures of attitude and personality. In an effort to control for this threat, the pretest data was collected four weeks prior to the experimental treatment being implemented to minimize the chance of associating the pretest questionnaires with the treatment phase

of the research. The pretest-posttest control group experimental design to some degree can guard against the threats to external validity.

The counselor and student portrayed in each of the videotapes for both treatment groups were the same. The counselor used techniques based on a Rogerian theoretical orientation and the student appeared as a high school girl experiencing some significant problems. The counseling sessions focused on two serious problems--suicide and drug abuse--encountered in the high school setting in working with adolescents. The sessions took place in a setting resembling a counselor's office, were in color, and professionally taped and edited. Administration of the pretest and posttest measures, as well as supervision of the treatment sessions, were conducted by the same persons for each of the groups at each of the schools to standardize the course of the study as much as possible.

Chapter 2

Review of the Literature

Rationale and Its Relationship to the Problem

Since its inception, cognitive dissonance theory has generated substantial research and has been influential in the field of social psychology. The theory has application for research in areas such as attitude and opinion change, persuasive communication, and counseling as evidenced by Strong's work (1968) on interpersonal influence in counseling.

Trust and confidentiality can be viewed as cornerstones of a successful counseling relationship. The expectation of confidentiality is an important factor in being able to trust and self-disclose. Everstine et al. (1980) assert that the establishment of a relationship of trust between a client and therapist is a hallmark of psychotherapy and that this relationship must be protected carefully. Confidentiality implies trust, and trust in an individual implies a willingness to confide in or to self-disclose.

There is evidence from studies by Kobocow, McGuire, and Blau (1983) and by Woods and McNamara (1980) to suggest that stated or implied guarantees of confidentiality facilitate self-disclosure of personal or sensitive information. Further, according to results of a study by McGuire, Toal, and Blau (1985), clients in a therapy relationship have come not only to value confidentiality but also to

expect it. Trust can be defined as a responsibility between two people--a feeling of respect, assurance, faith or confidence in. There is an atmosphere of congruence created between a counselor and client, and trust is perceived as a major component.

Adolescents are particularly vulnerable to issues of trust and confidentiality. They are confronted with many dilemmas--physical, social, cognitive, emotional, as well as moral--as they attempt to negotiate the growing years. In fact, it is during adolescence that their concern is most focused on the development and continual reappraisal of moral values and standards of conduct (Mussen, Conger, & Kagen, 1980). The concepts of self and values are in the process of being integrated. Also implied is that the way one views oneself in this context has an influence on how one views others. Adolescents typically are sensitive to the opinions and expectations of significant others as related to themselves. Therefore, if adolescents trust and respect themselves, they, then, will also trust and respect others. Early studies by Mahrer (1956) and Mischel (1961) strongly suggest that children who have experienced a higher proportion of promises kept in the past by parents and authority figures have a higher generalized expectancy for interpersonal trust from other authority figures.

Since counseling can be viewed as a persuasive endeavor, but one lacking in coercive power, interpersonal influence has to be relied upon. The theory of cognitive dissonance potentially can predict when a particular persuasive attempt will be successful and

thus has implications for the counseling relationship. This study will examine the critical issues of trust and confidentiality, so important to adolescents, in a framework designed to assess what effect breach of confidentiality has on adolescents' level of trust and whether level of justification for breach of confidentiality is an important factor in reducing dissonance and restoring trust.

Historical and Theoretical Development

Historically, three types of investigations employing different paradigms generally have been used to explore cognitive dissonance: (1) "Free-choice" situations in which a choice between attractive alternatives varying on a continuum of attractiveness or some other dimension must be made by the subjects, (2) "forced-compliance" situations usually involving a choice between engaging in or not engaging in a discrepant act, and (3) "exposure" to information situations in which subjects are presented with information that is inconsistent with their existing attitudes (Brehm & Cohen, 1962).

An early study by Brehm (1956) used the "free-choice" paradigm to investigate the effects of dissonance following a decision. Female undergraduate students were requested to rate the desirability of eight small appliances, then choose a gift for themselves between two of the appliances previously evaluated, and subsequently rate the items again. Half of the subjects were offered a choice between two items they had rated as equally desirable (high dissonance condition) and the other group of

subjects were offered a choice between two items they had rated differently (low dissonance condition). Brehm's results supported the prediction that choosing between alternatives would create dissonance. Dissonance reduction occurred by making the chosen alternative more desirable and the unchosen alternative less desirable as evidenced in the pre- to postchoice ratings.

A classic study by Aronson and Mills (1959) tested postchoice dissonance in a different manner. Female undergraduate students who volunteered to participate in discussion groups were randomly assigned to one of three experimental conditions: (1) a severe initiation condition in which subjects were required to read aloud some embarrassing sexually oriented materials such as obscene words and vivid description of sexual activity from contemporary novels before joining the group, (2) a mild initiation condition in which subjects had to read aloud five sex-related but not obscene words, and (3) a control condition. Both the severe and mild condition subjects were told that they had performed satisfactorily and could join the group already in progress. Each subject then listened to a tape recording of the discussion group they ostensibly had joined and subsequently evaluated the discussion via questionnaire. Results confirmed the hypothesis that those who had undergone a severe initiation procedure perceived the discussion group as being significantly more attractive than those who had undergone mild initiation or no initiation procedure.

Typical of the "forced-compliance" investigations is a study by Festinger and Carlsmith (1959). College students were requested to perform an extremely boring and tedious task. Upon completion, the subject was asked to tell the "next subject," a confederate of the experimenter, that the task was interesting and fun. Monetary compensation (\$1.00 or \$20.00) was offered to the subjects for making the false statement. Festinger and Carlsmith found that the subjects given \$1.00 to carry out the instructions had a greater positive change in their evaluation of the experiment than did those who were paid \$20.00 to make the false statement.

Such "forced-compliance" investigations, particularly Festinger and Carlsmith's study, immediately incurred attack and criticism because of possible alternative explanations for the results. Cohen (1962) conducted a similar experiment to counter the criticism. Yale college students were asked to write essays in support of the New Haven police and were given monetary compensation (\$.50, \$1.00, or \$5.00). His results showed that the less they were paid the more favorable they became in their attitude toward the police. Cohen's results found the predicted inverse relationship between magnitude of monetary compensation and amount of attitude change.

Allyn and Festinger (1961) utilized the "exposure" to information paradigm to investigate the effectiveness of unanticipated persuasive communications on attitude change. One group of teenage high school subjects was given an orientation to

attend to the speaker's opinions and was informed of his topic and point of view in advance of hearing his speech on teenage driving. The other group was given an orientation to evaluate the speaker's personality and was not given advance information on the topic of the speech or the speaker's point of view. The authors found that those subjects who had advance information showed less opinion change than those unprepared subjects. Differences in the amount of opinion change between those having advance information and unprepared subjects were greater among those having initially extreme opinions.

Research on the theory of cognitive dissonance has expanded into areas somewhat unrelated to its original social-psychological domain. Recent applications of the theory have extended to counseling and psychotherapy as well as consultation. Cooper (1980) investigated the reduction of fears and increase of assertiveness through an effort justification paradigm exploring cognitive dissonance and psychotherapy. A study by Hughes (1983) addressed the applicability of cognitive dissonance as a model for consultation. She reported that the concepts of choice, justification and effort are three important elements which are relevant in consultation.

Axsom and Cooper (1985) explored the role of effort justification in psychotherapy. They hypothesized that the effort involved in therapy plus the conscious decision to undergo that effort leads to positive therapeutic change via the reduction of

dissonance. As the effort required by a behavioral commitment increases, dissonance reduction thereby increases.

The theory of cognitive dissonance makes it possible to predict some of the conditions under which persuasive attempts to change attitudes may be successful as well as the prediction of the direction of the change. Generally, attitudes will change in a direction such that discrepancies between overt actions and attitudes, or between different attitudes, are minimized. The tendency in the studies reported suggest that the attitude change is toward consonance by the reduction of the dissonance. Recent applications of the theory suggest that cognitive dissonance has promise in the areas of consultation and psychotherapy. However, the theory is not without criticism. Alternative theories such as attribution theory and self-perception theory have been espoused to explain the research findings of cognitive dissonance. For example, Bem (1972) has argued that the results of cognitive dissonance experiments can be explained by self-perception theory. According to Bem, the \$1.00 subjects in the classic Festinger and Carlsmith study (1959) reported more favorable attitudes toward the dull experiment simply because there was nothing in the external environment that explained their willingness to describe a dull experiment as enjoyable. Self-perception theory and cognitive dissonance can make the same predictions but offer different explanations for what they have predicted. Dissonance reduction even can be explained as

essentially equivalent to Freud's defense mechanism of rationalization (Gleitman, 1986). Conflicting research studies purporting to affirm cognitive dissonance theory suggest that further exploration in this area is needed. The prolific research generated by cognitive dissonance theory over the past thirty years suggests that the theory has some basic consistency. Aronson (1968) attributes the popularity of cognitive dissonance theory to the heuristic value of its simplicity and its generality. Despite methodical shortcomings and alternative explanations, cognitive dissonance remains a viable theory.

Relevant Research on Trust

A review of related research yields only limited studies in the area of trust per se. Generally, the studies have focused on trust in close, intimate relationships. Larzelere and Huston (1980) explored interpersonal trust in close relationships in their development and validation of the Dyadic Trust Scale as a tool for research. As they, and other researchers, cite, one of the major deficiencies of the empirical studies relating to trust, is the failure to operationalize the concept of trust and provide a satisfactory measure. Thus, Larzelere and Huston concentrated their efforts to address this problem.

For the purpose of their investigation, dyadic trust referred to the extent that a person believes another person (or persons) to be benevolent and honest. They hypothesized that dyadic trust would be associated with intimacy of the relationship in regard to such

characteristics as love, self-disclosure and commitment. It was predicted that trust in one's partners would be correlated with that partner's love, self-disclosure to an intimate partner would correlate positively with dyadic trust, and also that higher levels of trust are necessary for higher levels of commitment, thus married couples would be more highly correlated than dating couples in this regard. Subjects in the dating sample included 195 persons (120 females and 75 males, aged 18 to 30 years) in various stages of dating, i.e., classified as casually dating, exclusively dating or engaged, while subjects in the married sample included 127 persons classified as newlyweds (aged 19-35, married less as 2 months), longer married (aged 19-67, married an average of 13.2 years), and divorced or separated (aged 22-77, separated from 3 to 60 months). All subjects completed the dyadic trust item pool and the Marlowe-Crowne Social Desirability Scale plus additional questionnaires.

The results of their study were as predicted. Dyadic trust proved to be associated with love and intimacy of self-disclosure, particularly for longer married couples, as it varied with level of commitment. Additionally, it was reported that partners reciprocated trust more than either self-disclosure or love. In terms of their developed Dyadic Trust Scale, the researchers report that it is unidimensional, relatively free from response bias, reliable, and consistent with the conceptualization of trust from

various perspectives. It, however, is operationally distinct from generalized trust.

Rotter's work (1967, 1971) on generalized expectancies for interpersonal trust is based in the context of social learning theory. In terms of social learning theory, expectancies in a situation are determined by specific experiences in that situation as well as experiences, to varying degrees, in other situations perceived as similar by the individual. A determinant of the relative importance of generalized expectancies is the amount of experience the individual has had in that particular situation. Therefore, Rotter states that the generalized other of most interest to the study of interpersonal trust is an individual or group with whom one has not had much personal contact (Rotter, 1980).

Unpublished doctoral research by Geller in 1966 (cited in Rotter, 1971) demonstrated a strong relationship between high trust and trustworthiness whether the criterion was a behavior in a controlled experiment or a self-report questionnaire. Geller reported that individuals were less likely to lie if they acted more trustworthy or said they were more trusting.

Trust and trustworthiness were investigated by Wright and Kirmani (1977) by surveying 214 high school students at a university high school in northeastern United States to see whether high and low trusters differed on shoplifting and attitudes relating to shoplifting. Subjects completed a questionnaire including Rotter's trust scale, and self-reports of shoplifting and anti-social

behaviors, and attitudes toward shoplifting, peer and family pressure. A median split of 68 on the Interpersonal Trust Scale divided subjects into high and low trusters. Wright and Kirmani found that a greater proportion of males reported shoplifting than females, that there was no significant difference between the proportion of male low trusters and male high trusters who reported shoplifting but, among the females, a greater proportion of low trusters admitted to shoplifting than did high trusters. Additionally, the researchers included one item with particular relevance to trust to determine whether students felt that people in the two surrounding communities distrusted students. They reported that a greater proportion of low trusters perceived distrust of students than did high trusters.

Bevett, Alagna, and Mednick (1983), in a paper entitled "Interpersonal Trust in Black and White University Students" presented at the Annual Meeting of the Eastern Psychological Association, raised the question of generalizability of findings to the black population from past research on interpersonal trust. They reported that most of the studies have been conducted exclusively on white samples. The authors assert that because of discrimination and prejudice endured by the black population, it may have implications for the development of interpersonal trust and/or for the relationship of trust to behavior. In their study exploring the relationship of trust to attitudes and behaviors among black and white college students, using a sample of 100

black (26 males, 74 females) and 131 white (100 males, 31 females) students from two local universities (names and location not specified in their article), the authors reported significant differences between the racial groups based on their responses to questionnaire packets containing the Rotter Interpersonal Trust Scale and several additional measures designed to assess trust levels, trustworthy responses, etc. Specifically, they found that black males and black females evidenced lower trust, although there was little difference between the two groups in their general orientation toward others. There were additional findings reported, although some variables were assessed only in the black sample, thus making comparisons and definitive conclusions difficult.

In a recent study, Rempel, Holmes, and Zanna (1985) presented a theoretical model describing interpersonal trust in close relationships. Based on the type of attributions discerned about a partner's motives, they identified three dimensions of trust: predictability, dependability and faith. From a survey of a heterogeneous sample of firmly established couples, the authors found that all three forms of trust were strongly related and represented coherent and distinct dimensions.

An earlier study by Johnson and Noonan (1972) employed a laboratory experiment to manipulate the variable of trust and found that subjects' ratings of their trust for another person in a brief discussion were higher on a 7-point Likert Scale when the

other person accepted rather than rejected their self-disclosures, and also when the other person was self-disclosing rather than non-disclosing in return. They stated that the development of trust is essential for the productive work and the cooperative interaction involved in effective counseling relationships.

Williams (1974) investigated two models of counseling, professional counselors and minimally trained peer counselors, to assess which model best facilitated trust and self-disclosure in black college students. She hypothesized that those students participating in a peer counseling experience would trust and self-disclose at a higher level than those students participating in a professional counseling experience. A total of 18 undergraduate black students completed the study. The 9 professional counselors were white males (6 were experienced counselors at the doctoral level and 3 were completing doctoral work in counseling psychology). The 9 peer counselors were black (4 female and 5 male) upperclass, undergraduate students. Each received 10 hours of group training using a modification of Carkhuff's peer training model. Jourard's Self-Disclosure Questionnaire and Rotter's Trust Scale were administered before and after treatment. Pretest data from the disclosure questionnaire served to develop 2 matched groups. Each subject met for five 60-minute counseling sessions. The treatments were identical except for counselor variables. The results did not support their hypothesis. There were no statistically significant differences for disclosure or trust between

the two groups. However, the author did find that both groups disclosed and trusted at a significantly higher level after treatment. Williams reported that the levels of measured self-disclosure and trust achieved in the white counselor-black client situation were no lower than those achieved in the peer counselor-black client situation.

Tinsley and Harris (1976) investigated client expectations in counseling in a sample of 287 undergraduate students. Each subject completed a questionnaire about their expectations of counseling including nine items concerning specific counseling procedures, and 73 items divided into 7 scales relating to expertise, genuineness, trust, acceptance, understanding, outcome, and directiveness. The results of their study showed that the scales for which the students had the strongest expectations in counseling were observed to be trust, genuineness, acceptance and expertise.

During the late sixties, Strong (1968) published his research on the interpersonal influence process approach to counseling. He postulated that the variables of perceived trustworthiness, expertness, attractiveness, and involvement were important in interpersonal communication. As a result of his work, numerous studies were generated in an effort to verify the efficacy of Strong's variables. Strong and Dixon (1971) asserted that proponents of the social influence model have verified that the higher the levels of perceived counselor expertness, attractiveness, and trustworthiness, the more likely it is that the clients will

engage in self-disclosure and allow themselves to be influenced toward positive attitudes and/or behavior.

Two comprehensive reviews of the major studies related to Strong's social influence theory in counseling subsequently appeared in the literature. Corrigan, Dell, Lewis, and Schmidt (1980) assessed the pertinent studies pre-1981, while Heppner and Claiborn (1988) reviewed the studies from 1981 to mid-1988. The variable most pertinent to this study, perceived counselor trustworthiness, had been least studied of all, according to Corrigan et al. But Heppner and Claiborn reported at least 21 studies in the 1980s which investigated the effects of various behaviors on perceived counselor trustworthiness, suggesting rising interest.

Strong and Schmidt (1970) successfully manipulated counselor's perceived trustworthiness via both introductions and behaviors in a one-interview counseling analogue design. Other studies (Kaul & Schmidt, 1971; Roll, Schmidt, & Kaul, 1972) utilized videotape analogue presentations of counseling sessions and also successfully manipulated the variable of perceived trustworthiness.

Rothmeier and Dixon (1980) continued to investigate the variables reported by Strong as important in interpersonal communication. They specifically explored trustworthiness and influence in the counseling situation by employing an extended analogue interview procedure to investigate the effects of counselor trustworthiness on counselor influence. Thirty-four male undergraduate students rated their achievement motivation (using

the Achievement Motivation Scale) at three intervals: one week prior, immediately following, and one week after the second of two 20-minute individual interviews in which they explored achievement motivation. Both interviews ended with an attempt by the counselor to influence the client's achievement motivation ratings. A 5-point Trustworthiness Likert Scale (TLS) was used to assess perceived counselor trustworthiness at both posttest and the one-week follow-up. Four conditions were defined: (a) two male interviewers varying in competence to assess achievement motivation and (b) trustworthy and untrustworthy interviewer role performance. Rothmeier and Dixon reported that results of the role manipulation were successful in that role discrimination persisted at the one-week follow-up. They stated that interviewer trustworthiness was related to interpersonal influence and that their findings followed a pattern of outcomes as predicted by cognitive dissonance theory.

Subsequent research by LaFromboise and Dixon (1981) extended Rothmeier and Dixon's (1980) study by exploring the effects of perceived trustworthiness and counselor ethnicity with a unique population--American Indian students. Forty-four American Indian high school students viewed a two-segment videotape analogue of two counseling sessions in which future educational plans were the presenting problem. Four conditions were described: (a) two male interviewers (Indian and non-Indian); and (b) trustworthy and untrustworthy interviewer

performance. Subjects then rated the counselor's perceived level of trustworthiness using the Counselor Effectiveness Rating Scale and the Counselor Rating Form. Results clearly indicated that American Indian students rated the trustworthy counselor role more positively. Additionally, it was found that ethnicity (Indians, non-Indians) may not be important as long as the counselors are perceived as trustworthy.

Breach of confidentiality and perceived trustworthiness of counselors was investigated by Merluzzi and Brischetto (1983) using an audiotaped counselor-client interaction that would result in a decision by the counselor to maintain or breach confidentiality. Two-hundred undergraduate male students were randomly assigned to one of 48 conditions with no less than four subjects in each condition. The study was a 3 (confidential, non-confidential, or control) X 2 (problem seriousness: highly serious or moderately serious) X 2 (counselor experience: expert or non-expert) X 2 (presenting problems: suicide or drug abuse) X 2 (counselor A or counselor B) between-subjects factorial design. The subjects were reported to be no more sophisticated regarding confidentiality than any other sample in their age group. The results of the procedure Confidentiality X Problem-Seriousness interaction on trustworthiness suggested that the counselors who breached confidentiality with the highly serious problems were perceived as less trustworthy. With the less serious problems, the counselors' trustworthiness was not significantly compromised. They reported

that trustworthiness, however, was compromised even in circumstances in which the counselors were empathic and caring, as well as deliberate, in their decision to breach confidentiality. Their results suggested that confidentiality alone may be a key component in perceived counselor trustworthiness.

In an expository article, Taylor and Adelman (1989) reported that no matter what the anticipated benefits, disclosing confidential information could be expected to have costs for the client and for others. They outlined three essential steps for counselors to take in order to minimize the negative consequences of disclosure whenever legal and/or ethical considerations necessitated the breach of confidentiality: (1) explain to the client the reason for disclosure, (2) explore the possible impact both in and outside of the counseling situation, and (3) discuss how to maximize any possible benefits and minimize any negative consequences. Minimizing the effects of breach of confidentiality is particularly critical for counselors in the school setting and for other mental health professionals working with clients who are minors. As Taylor and Adelman pointed out, neither privacy nor confidentiality are absolute rights. There are always fundamental exceptions, some involving legal restraints and others involving ethical considerations.

Relevant Research on Confidentiality and Self-Disclosure

Several recent studies have focused on the influence of confidentiality conditions on self-disclosure. Woods and McNamara

(1980) studied the effects of confidentiality conditions on interviewee behavior in an analogue interview counseling situation. Undergraduates were administered a standardized interview composed of items requiring various levels of self-disclosure under conditions that promised confidentiality, non-confidentiality or no expectation of confidentiality. Their results indicated that individuals receiving the promise of confidentiality were more open in their self-disclosures than those who had been given non-confidentiality instructions. It was also found that the interview conditions, whether by tape recorder or in the presence of the interviewer, had an effect on anxiety level. In general, interviewees appeared more anxious when they were in the tape recorder condition rather than when they were in the face-to-face interview condition. They reported that when clients were assured of the confidentiality of their communications, they appeared less anxious and more open about themselves. Additionally, females were reported to disclose significantly more than males in the face-to-face interview rather than in the tape recorded interview. Other studies (e.g., McGuire, Toal, & Blau, 1985; Merluzzi & Brischetto, 1983; VandeCreek, Miars, & Herzog, 1987) support their conclusion that stated or implied guarantees of confidentiality facilitate self-disclosure.

Contrary to Woods and McNamara's findings, Kokocow, McGuire, and Blau (1983) found that frequency of self-disclosure was not significantly affected by assurances of confidentiality.

Other studies (e.g., Muehlman, Pickens, & Robinson, 1985; Shuman & Weiner, 1987) found similar results in terms of assurances of confidentiality and concluded that there was little evidence to support that providing more detailed information about the limits of confidentiality had a significant effect on willingness to self-disclose.

Recognition of rights in counseling, inclusive of the concept of confidentiality, and competency of adolescents to make informed consent decisions regarding treatment have been investigated by Belter and Grisso (1984), and by Wiethorn and Campbell (1982), with comparable results. They reported that the older average adolescents (aged 14-15 years and above) were fully capable of comprehending the concept of confidentiality and of fully exercising his or her rights in the counseling session. Kaser-Boyd, Adelman, and Taylor (1985) extended this type of investigation to include adolescents with behavior and learning problems. They, too, reported that the adolescents were capable of discerning the potential benefits and risks of therapy in terms of giving informed consent.

Sinha (1972) reported on a population of females from India and found that the early adolescents (aged 12-14 years) were the most disclosing and the mid-adolescents (aged 15-16 years) were the least disclosing. She attributed her findings to the fact that the mid-teen years was the period of most inhibitions and therefore the adolescent was more self-conscious. A study by Kraft and Vraa

(1975) on disclosure levels of high school girls in same-sex versus mixed-sex groups found that the girls in the same-sex group were more disclosing than those in the mixed-sex group, suggesting that the presence of the opposite sex in adolescent peer groups inhibited self-disclosure.

Messenger and McGuire (1981) reported that young adolescents between the ages of 12 to 15 years old seemed to hold particularly conservative and negative attitudes regarding the necessity to break confidentiality under any circumstances. They reported specifically that verbal explanations of confidentiality were deemed not as important to the adolescent population as real-life experiences with it. Adolescents' attitudes about confidentiality suggested that early adolescents respond more to interpersonal/behavioral, as well as visual, cues provided by the interviewer than to just verbal assurances of confidentiality in regard to gauging their degree of self-disclosure.

A follow-up study in this same vein by Kobocow, McGuire and Blau (1983) investigated the effects of varying degrees of assurances of confidentiality on frequency of self-disclosure in a junior high school population. They administered a self-disclosure questionnaire to male and female subjects who were randomly divided into one of three treatment conditions: confidentiality explicitly assured, no instructions regarding confidentiality, and confidentiality explicitly not assured. Across conditions, males were found to disclose significantly more than females. However,

the results did not support their main hypothesis that mean disclosure scores would be higher under conditions of assured confidentiality and lowest under conditions of non-assured confidentiality.

While specific studies in the literature are relatively few in regard to willingness to disclose and trust scores, discrepant results have been reported. For example, Gilbert (1967) studied subjects' willingness to disclose personal and uncomplimentary information about themselves. He found that willingness to disclose such information did relate to trust scores. On the other hand, MacDonald, Kessel, and Fuller (1970) failed to obtain any relationship between willingness to self-disclose using the Jourard Self-Disclosure Scale and interpersonal trust scores.

Although it is apparent that studies have investigated confidentiality and willingness to self-disclose, as well as focused on depth of self-disclosure, the issue of trust and its relationship to explanations and assurances of confidentiality has not been specifically explored. Indeed, Kobocow, McGuire, and Blau (1983) address this topic as an area for future research.

Relevant Research on Comparable Populations

Adolescence--the period of transition between childhood and adulthood--clearly is a time of profound change. Biologically, growth is rapid and dramatic. During this period, height and weight changes occur, secondary sex characteristics develop, and the capacity to create children is acquired. Cognitively, the

adolescent thinking becomes more sophisticated and individuals gain the capacity to reason more logically, reflect on their own thought processes and to deal with abstractions, thereby allowing for the capacity to make moral and ethical decisions. Emotionally, adolescents attempt to function more on their own and gain independence from their families. Adolescence is a time when individuals are confronted with crucial decisions about values, behavior, and relations to others (Dryfoos, 1990). Perhaps because of this, adolescents have been, and continue to be, a target for investigation spanning all areas of development and interest. The literature is replete with studies utilizing the adolescent population.

A recent study by Thornburg, Thornburg, and Ellis-Schwabe (1984) investigated the assignment of personal values among adolescents using the Rokeach Value Survey. Two groups of adolescents consisting of 9th and 10th grade students were administered the Rokeach Value Survey to determine how they identify with traditional values and with those values containing more abstract or concrete components. The terms employed by Rokeach were divided into four types and then rank ordered by the adolescents. The four categories of values were: (1) concrete values that can be experienced in the immediate time frame of adolescents, (2) concrete values that are idealized by adolescents but functional only for adults, (3) abstract values that may or may not be experienced by individuals, whether adolescents or not, and (4) abstract values that are social constructs that one realizes but

rarely has a chance to truly experience. Results of their study showed that of the concrete values that can be experienced to some extent by adolescents, freedom, true friendship, and happiness ranked in the top three positions for both the 9th and 10th grade groups. Values dealing with the inner self, such values as mature love, wisdom, self-respect and inner harmony, were ranked higher by 10th grade subjects than by 9th grade subjects. In general, social values that seemed abstract or impersonal to the adolescents tended to be ranked lower by both adolescent groups.

Hunter (1985) examined adolescents' perceptions of discussions with parents and friends with reference to several domains: academic/vocational, social/ethical, family, and peer. Three groups of subjects were selected: early adolescents aged 12 to 13 years, mid-adolescents aged 14 to 15 years, and late adolescents aged 18 to 20 years. Males and females were equally divided and all participants were from middle income, Caucasian backgrounds and lived with both natural parents in the suburbs of Washington, D.C. All subjects completed a paper-and-pencil questionnaire that contained three identical sections, each referring to a friend, mother, or father. The subjects were requested to rate how often each of the stimulus figures explained reasons for their ideas and how often the stimulus figure tried to understand their ideas. The explanation and the understanding dimensions of discussion were rated separately. Hunter found that discussion levels for parents remained substantial across the age groups in the

academic/vocational, social/ethical, and family domains. Discussion with friends about these same domains increased with age, and peer relationship issues were discussed more with friends than with parents in all age groups. Hunter also reported that parents tended to explain their views more than they tried to understand the adolescents' views in all the specified domains. Additionally, friends' efforts to explain and to understand did not differ significantly across most domains.

Attitude development in pre-, early and late adolescent samples was investigated in a longitudinal study by Prawat, Jones, and Hampton (1979). They examined changes in attitudes over a one-year period in regard to self-esteem, locus of control, and achievement motivation. Results did not support their hypothesis that early adolescence is a time of dramatic change in reference to important attitudes and perceptions. Rather, the amount of attitudinal change reported by subjects at all age levels varied with the kind of attitude being assessed. They reported that changes in internal-external locus of control were more marked for the younger adolescent group while changes in achievement motivation were more significant for the older group.

A recent study by Hall and Gloyer (1985) surveyed adolescents' attitudes towards sexual assault treatment centers. Their results indicated that adolescents, in general, had favorable attitudes towards such treatment centers but that the center's affiliation, staff and policies regarding confidentiality would

influence the adolescent's willingness to use this service.

Confidentiality was viewed as extremely important to the young people who were interviewed. Almost all of the adolescents said that they would go to a treatment center if they were sure no one would be told against their wishes.

Klenowski (1983) addressed the continuing issue of adolescents' right to accept or reject counseling, limiting his discussion specifically to adolescent minors from the ages of 15 to 18. He stated that the major difficulty appears to focus on the meaning of consent and the adolescents' competency to give such consent. Additionally, Klenowski discussed the problem of informed forced consent where the adolescent is informed why he or she is being seen for counseling but is not given a choice to accept or reject participation. He pointed out that a problematic issue confronting the counselor is the balance of rights of the parents as opposed to the rights of the adolescents, stressing the issues of trust, respect, and guarantee of privacy for them. Klenowski strongly advocated that a starting point for dealing with these issues is for the counselors to have a knowledge of the legal perspective. He cited information from a survey that reported 40% of personnel in clinics in Virginia were unaware that Virginia had a state law permitting minors to consent to psychotherapy. His suggestions regarding an awareness of the legal perspective are well taken for counselors.

A review of the literature suggests that adolescents as an experimental population are amenable to research. Attitudes, values, self-disclosure and confidentiality specifically have been addressed in numerous studies regarding adolescents. Self-report measures are popular techniques and frequently employed in the adolescent studies.

Summary of Previous Research

The theory of cognitive dissonance has been extensively empirically researched over the last three decades. While studies may produce conflicting results because of alternative explanations for attitude change and dissonance reduction, the theory continues to provide a theoretical framework for the exploration of varied problems. Interestingly, studies utilizing a cognitive dissonance framework have used almost exclusively college age students or adults. It would appear that a study using adolescents might provide some new and/or additional information in the exploration of dissonance reduction as it relates to the counseling relationship with this population.

The reported studies lend support to the feasibility of using adolescents as an experimental population to investigate the effect of breach of confidentiality on level of trust. Confidentiality in relation to willingness to self-disclose has been specifically explored but breach of confidentiality and its effect on trust has not.

A review of the literature pertaining to trust, confidentiality, and self-disclosure lends support to the need for further investigation. Trust, in particular, is deemed worthy of exploration as it surfaces in the literature repeatedly as an area for future research. The efforts of investigators such as Rotter in the 1960s and 1970s, and Larzelere and Huston, and Rempel, Holmes, and Zanna in the 1980s, to name a few, attest to the fact that trust is viewed as a researchable area.

While there is some evidence (Altman & Taylor, 1973) to suggest that trust is necessary for self-disclosure in on-going relationships, other studies (MacDonald, Kessel, & Fuller, 1972; McAllister & Kiesler, 1975; Vondracek & Marshall, 1971) report no correlation between trust and self-disclosure. These studies, however, failed to use measures of trust and disclosure with respect to a particular other person, and remain unsupported by empirical data. Discrepant results are also reported in the literature in terms of confidentiality conditions and their effect on self-disclosure. The present study attempted to add to the body of existing knowledge in the areas of trust, confidentiality, and self-disclosure by investigating the effect of breach of confidentiality on adolescents' level of trust.

Chapter 3

Methodology

Population and Selection of Sample

The population for this study was drawn from the five middle schools (including one fundamental middle school) within the Hampton public school system, Hampton, Virginia. The school system is a heavily populated urban system with 21,329 students. The socioeconomic levels and racial composition of the city were represented within the schools, as they comprised the total public school facilities for grades 6, 7 and 8 within the system. The middle school population consisted of 4,866 students, with 1,572 of which were enrolled as eighth graders. The population of the city of Hampton as of the 1990 census was 133,793, with a racial proportion of 58.5% (White), 38.8% (Black), 2.7% (Oriental), and 1.0% (Hispanic). The racial breakdown of the school population was somewhat different, a phenomenon noted by Dr. C. A. Eggleston (Office of Pupil Accountability, Hampton City Schools) since the 1960s. As of September, 1990, the racial breakdown of the school population was: 49.2% (White), 47.5% (Black), 2.3% (Oriental), and 1.0% (Hispanic). This difference in percentages might be accounted for by a larger number of older, established residents in the city of Hampton remaining within the city, while many of the middle-class

white families with children of school age are moving into suburbs of the surrounding communities.

The sample for this study was randomly selected from the experimentally accessible population, i.e., all eighth grade middle school students enrolled in average classes and/or reading on grade level. A roster of the names of such students was obtained from the Director of Guidance at each of the middle schools. A total of 500 students, approximately 100 from each of the middle schools, were randomly selected (each third name on the list) to receive an information packet containing a letter explaining the general purpose of the research study, requirements and consent forms for participation.

Of the 500 packets prepared and delivered to the schools for dissemination to the students, 465 were deliverable, as 35 of the students had transferred to another school within the system, not enrolled, or had moved. The return rate was much better than anticipated. Fifty percent (234) of the letters were returned, with 43.8% (199) giving permission for participation in the study, 7.5% (35) responding no, and 49.7% (231) not responding at all.

The 199 students returning the signed consent form were interviewed using a brief personal data questionnaire in order to screen out potentially at risk subjects, i.e., defined as those students having frequent (once a week or more) contact with the school guidance personnel for personal problems or those students involved in professional counseling with someone outside the

school during the previous year for six weeks in a row or longer. A total of 28 students met the exclusionary criteria outlined above and were thanked individually for their time and interest, and informed that their participation might be requested in future studies. An additional 9 students dropped out of the study after the first meeting due to previous commitments or not wanting to participate, yielding a total sample of 162 subjects. The students involved were 50 (31%) males and 112 (69%) females who ranged in age from twelve to fifteen years, with a racial representation of 45% (white), 52.5% (black), and 2.5% (other minorities) which generally paralleled the racial breakdown of the school division's population.

These students were administered Rotter's Interpersonal Trust Scale and their scores used to differentiate high and low trusters (high trusters designated with scores of 73 and above which was 1/2 standard deviation above the mean, and low trusters designated with scores of 66 and below which was 1/2 standard deviation below the mean). Subjects were randomly assigned to one of three groups with high and low trusters equally distributed with 54 subjects constituting each group, and the groups were randomly assigned to one of three treatment conditions. Due to the logistical and time constraints imposed by having to conduct the study only during Home Base period (8:45 - 9:15 a.m.) to avoid loss of formal instructional time, it was necessary to have the three groups represented at each of the five

middle schools. Conflicting activities scheduled during home base period and absenteeism created a high mortality rate, yielding only 123 subjects (39 males and 84 females) who completed the entire study: Group 1--Full Justification (44 subjects: 15 males and 29 females), Group 2--Minimal Justification (39 subjects: 10 males and 29 females), and Group 3--Control (40 subjects: 14 males and 26 females).

Procedures

Data Gathering

One week after the selection process and random assignment to groups was completed, subjects met in the cafeteria of their respective schools and completed a packet of materials containing the pretest instruments, Jourard's Self-Disclosure Questionnaire (JSDQ) and the High School Personality Questionnaire (HSPQ), according to the printed instructions. This was accomplished in four 30-minute sessions during the Home Base periods.

Treatment

Four weeks later, based on their assigned group, subjects met at different locations within their respective schools. Subjects in Group 1 (Full Justification) and Group 2 (Minimal Justification) viewed the same videotape of a simulated counseling session between a white, female counselor and a white, female student. The session focused on suicide--a highly serious problem on which most experts in the field agree that confidentiality must be breached. In the session, the student presented herself as

extremely depressed in demeanor, having experienced the loss of significant others in her life, feeling generally helpless and hopeless about life, and confiding suicidal intentions to the counselor. At the conclusion of the counseling interchange but prior to the counselor breaching confidentiality, the videotape was stopped. Subjects then responded in writing to a brief questionnaire which was designed to assess their understanding of the material presented. The videotapes were resumed and subjects in Group 1 (Full Justification) received the counselor's full justification and rationalization for the necessity to breach confidentiality in this situation. This full justification included an explanation that the student was fully informed prior to the session beginning as to the limits of confidentiality, i.e., if the counselor determined that the student appeared to be a danger to herself and/or others. Subjects in Group 2 (Minimal Justification) received a brief statement by the counselor indicating that she ethically was obligated to breach confidentiality in this situation because of her concerns for the student.

At their next meeting, Groups 1 and 2 again viewed a videotape of a simulated counseling session between the same student and counselor. The session focused on drug abuse--a moderately serious problem and more ambiguous in terms of whether breach of confidentiality should occur. The student portrayed herself as new to the school, having fallen in with the wrong crowd who used drugs and alcohol, feeling pressured to go

along in order to fit in, seeing no way out of the situation, and wanting help. The same sequence was followed for this part of the intervention as noted in session one.

Subjects in Group 3 (Control) viewed a videotape entitled Choices which depicted a high school boy dealing with the problem of wanting to drop out of school to earn money to buy a car. Upon conclusion of the tape, subjects responded in writing to a brief questionnaire in order to assess their understanding of the material presented and make the control group conditions as similar as possible to the treatment conditions.

During the following sessions and according to the instructions contained in their packet of materials, subjects completed the posttest assessments: Rotter's Interpersonal Trust Scale, Jourard's Self-Disclosure Questionnaire and the High School Personality Questionnaire. Once all materials were completed, subjects were fully debriefed. The general purpose and details of the study were discussed, assurances of anonymity of responses reiterated, and all questions and concerns were addressed.

Instrumentation

The dependent variables of trust and self-disclosure were measured by three methods of instrumentation to assess pretest and posttest changes.

The Interpersonal Trust Scale (ITS), entitled General Opinion Survey for purposes of disguise in administration, was developed by Julian Rotter in 1967. It is constructed as an additive scale

which samples a wide range of situations and potential groups that one might trust, e.g., parents, teachers, politicians, physicians, friends, and classmates. Rotter (1971) points out some specific characteristics of importance regarding additive tests. He reports that generally they may be expected to provide lower prediction in a particular situation than a power test devised to measure in that situation, but that the additive test would be able to predict to a greater range of situations. Rotter further makes note that additive tests may not be able to predict at all in some situations in which the subjects have had consistent exposure to the experience. He reports that internal consistency of additive tests also would be lower than that of power tests.

The ITS is a Likert-type scale consisting of 25 trust items and 15 filler items to partially disguise the purpose of the scale. Rotter reports, based on data from his 1967 and 1971 studies, that the questionnaire has shown construct validity in predicting attitudinal, sociometric, behavioral, and unobtrusive criteria in a diverse number of situations. Validity of the ITS has been documented in a variety of laboratory settings with questionnaires, self-reports, and peer ratings. Good construct and discriminant validity, and satisfactory internal consistency and test-retest reliability coefficients are reported by Rotter. Most reported correlations are in the .30s and .40s.

The ITS has been used effectively to measure trust and discriminate between high and low trusters. The majority of the

studies using the ITS do make note of the fact that generally the administration of the ITS was separated in time from the criterion situation by periods ranging from one to four months and was administered by someone other than the experimenter.

The validity of the ITS was tested by Rotter (1967) by using a sociometric technique involving two sororities ($n = 41$, $n = 42$) and two fraternities ($n = 35$, $n = 38$) at the University of Connecticut. All members who had lived together for a period of at least six months were included in the study. Subjects were asked to nominate members of the group who were highest and lowest in interpersonal trust, in addition to the related variables of gullibility, dependency, and trustworthiness. Control variables of humor, popularity, and friendship were included. Subjects also completed a self-rating of trust on a four-point scale. Rotter reports the correlations in the four groups ranged from .23 to .55, with the overall correlation of .37 being significantly higher than that for the control variables, thus indicating that the sociometric rating of trust was measuring an independent variable.

Based on his research, Rotter reports that the ITS has an internal consistency of .76, and test-retest reliabilities of .69 for five weeks, .68 for three months, and .56 for seven months.

Unpublished dissertation and master's thesis research by Geller in 1966 and Roberts in 1967, respectively, (cited in Rotter, 1971) supports the construct validity of the ITS. Both studies employed deception in a laboratory setting to assess the validity of

the ITS under experimental conditions with a behavioral criterion. Geller demonstrated that the ITS could significantly predict individual differences in trust of an experimenter in a laboratory setting, and Roberts found that high trusters continued to trust an untrustworthy experimenter longer than low trusters.

Katz and Rotter (1969) investigated the relationship of trust attitudes of college-age children and their parents using the ITS. They hypothesized a direct relationship between the two as well as an interaction between sex of the parent and sex of the child. Results demonstrated a significant main effect between fathers of high trusting students and fathers of low trusting students ($F = 7.16$; $p < .01$) as well as a significant main interaction effect between sex of the students and their trust group ($F = 3.92$; $p < .05$). The means for mothers' scores were reported in the hypothesized direction but not significant. These results added support to the construct validity of the ITS and demonstrated the relative stability of a generalized expectancy for trust, as measured by the ITS.

Hamsher, Geller, and Rotter (1968) used the Interpersonal Trust Scale and the Internal-External Locus of Control Scale to predict acceptance of the Warren Commission Report (the President's Commission on the Assassination of President John F. Kennedy) among college students. As with many other studies employing the Interpersonal Trust Scale, undergraduate psychology students were the subjects and the Scale was completed

by subjects 4 weeks prior to the experimental questionnaire (Warren Commission Questionnaire) being administered, and the Internal-External Locus of Control Scale was completed 6 weeks prior, with administration of both being by someone other than the experimenter. Hamsher et al. noted that no connection was established among the three questionnaires. Results showed that high trusters were more willing to accept the findings of the Warren Commission Report than low trusters. Those subjects expressing consistent disbelief of the Warren Commission Report were reported to be significantly less trusting and more external. Trust was a predictor for males and females, but internal-external control only for males. Further, the authors stated that the data were seen as extending the validity of the Interpersonal Trust Scale.

Wright and Tedeschi (1975) performed separate factor analyses on four large samples of respondents to the ITS. Subjects were introductory psychology students at the University of Connecticut and Ohio University between 1969 and 1974. The University of Connecticut sample included 560 males and 679 females (1969-1970) and 381 males and 312 females (1970-1971). The Ohio University sample included 494 males and 514 females (1972-1973) and 282 males and 411 females (1973-1974). The study was designed to provide for cross-validation of factors over large samples within and between university populations in an effort to develop subscales on the ITS that would allow better

predictions than the general scale in certain classes of situations involving interpersonal trust. Results demonstrated that each analysis produced four factors, three of which, Political Trust, Paternal Trust, and Trust of Strangers, cross-validated over the subjects in the four samples. According to a comparison of mean item response scores, subjects, in each sample, reported the greatest trust on the Paternal Trust factor, an intermediate level with Political Trust, and least on the Trust of Strangers factor.

Jourard's Self-Disclosure Questionnaire (JSDQ) was employed in this study to assess the additional dependent variable of self-disclosure. The JSDQ, constructed by Jourard and Lasakow in 1958, is one of the earliest self-report questionnaires developed to assess individual differences in self-disclosure. The literature is replete with studies that have employed the JSDQ, or variations thereof, as a measure to assess self-disclosure (e.g., Dimond & Hellkamp, 1969; Dimond & Munz, 1967; Jourard, 1964; Melikian, 1962; Pedersen & Breglio, 1973; Sousa-Poza, Shulman, & Roherberg, 1973). There are several versions of the questionnaire cited in the literature, a 60-item, a 40-item, and a 25-item questionnaire. The shorter 40-item self-report questionnaire was used in this study.

The JSDQ purports to measure the amount and content of self-disclosure to selected "target persons," with self-disclosure referring to the process of making the self known to other persons, and "target person" referring to the person to whom information

about the self is communicated (Jourard, 1964). Subjects are instructed to rate each of the items on the questionnaire using a 4-point rating scale:

- 0 Would tell the other person nothing about this aspect of me
- 1 Would talk in general terms about this item
- 2 Would talk in full and complete detail about this item
- X Would lie or misrepresent myself to the other person

The 40 items are related to six content areas: (1) attitudes and opinions, (2) tastes and interests, (3) work (or studies), (4) money, (5) personality, and (6) body. The purpose of the questionnaire is to have subjects reveal measurements of their future willingness to self-disclose to a target person within a specified situation. For the purpose of the present study, it was the subjects' willingness to self-disclose to a counselor in a counseling session. The JSDQ is scored by summing the numerical entries, with "X" being assigned a value of zero. The highest obtainable score is 80, and a higher score indicates a greater willingness to self-disclose to the target person.

The reliability of the JSDQ is considered quite good as reported by Jourard and Lasakow (1958) who established an overall odd-even split-half reliability coefficient of .94. Fitzgerald (1963) reported split-half coefficients ranging from .78 to .99 for the JSDQ when broken down into its topic areas. Himmelstein and Kimbrough (1963) also reported reliability coefficients in the .90s.

Evidence for convergent and discriminant validity of the 60-item and 25-item JSDQ was obtained by Pederson and Higbee (1968) by means of a multitrait-multimethod matrices, although there also was supporting evidence for variation between the two methods for measuring self-disclosure. Jourard (1961) provided evidence, using nursing students and grade-point averages in nursing courses, that the JSDQ appears to be independent of intelligence, lending support to the discriminant validity of the JSDQ. Jourard (1961) again provided further evidence for the validity of the JSDQ in finding a significant correlation ($.37, p = < .05$) between scores on the JSDQ and Rorschach productivity. Other validity measures have been reported in the literature by Panyard (1973) at .61, Pedersen and Higbee (1968) at .84, and by Simonson (1976) at .82. Support for construct validity of the JSDQ has been reported by Jourard (1971) and by Jourard and Resnick (1970). Bunza and Simonson (1973) reported that responses on the JSDQ have been found to be highly predictive of actual subject disclosure.

Rivenbark (1971) assessed the self-disclosure patterns of adolescents in Grades 4, 6, 8, 10, and 12 using the 40 item version of the JSDQ, modified by the author to accommodate the reading level of the lower grade students. The subjects were 149 elementary and high school students (76 boys and 73 girls) from a school system in Milledge, Georgia. The sample was chosen so that the subjects were as homogeneous as possible in terms of general

intelligence and socioeconomic level. Results indicated, as the author had hypothesized, that girls disclosed more than boys, that disclosure to peer targets increased with age, that mothers were favored over fathers as disclosure targets, and that same-sex peers disclosed more to each other than to those of the opposite sex. An additional finding reported was that disclosure differences between boys and girls increased with age but only for disclosure to parents.

Littlefield (1974) used Rivenbark's revision of Jourard's Self-Disclosure Questionnaire (40 item version) to assess self-disclosure among 300 ninth grade students in the rural South and Southwest. Subjects included 100 blacks, 100 whites, and 100 Mexican-Americans, with each group composed of an equal number of males and females. Results paralleled Rivenbark's (1971) findings, with females reported to disclose more than males. The males were reported to favor the mother as the target of disclosure, while all groups reported the least favored target of self-disclosure was the father. When sexes were pooled, the white subjects were reported to disclose the most, with the Mexican-American subjects reported to disclose the least.

The studies of Rivenbark (1971) and Littlefield (1974) support the findings of earlier studies exploring racial, cultural, class, and national differences in self-disclosure (Jourard, 1961; Melikian, 1962; Plog, 1965). Results of these studies indicated that in general Americans are higher disclosers than other nationalities

to all targets and under practically all conditions, and also that white Americans are higher disclosers than blacks.

More recent studies reported in the literature using the JSDQ include a study by Grigsby and Weatherley (1983) who found distinct differences in the level of intimacy of self-disclosure between men and women, with women reported as higher disclosers to strangers. Hatch and Leighton (1986) also reported differences of self-disclosure of strengths and weaknesses by males and females.

While there appears to be sound evidence to support the reliability and discriminant validity, there is controversy in the literature and little support for the predictive validity of the JSDQ. Validity studies of the JSDQ by Himmelstein and Lubin (1965) and Pedersen and Breglio (1968) failed to confirm the validity of the instrument. Information from both studies suggested that reported self-disclosure and actual self-disclosure may be sufficiently different behaviors requiring different measurement instruments. While the few reported studies, among many cited in the literature, indicate discrepant results regarding the JSDQ, it does appear to possess some validity as a measure of self-disclosure to a specific target person. Jourard (1964) cautions that there are always fundamental flaws in any personality measure based on self-report but that the JSDQ has demonstrated some validity up to now.

The third instrument used to assess changes in the dependent variables was The High School Personality Questionnaire (Cattell,

1968). The HSPQ is a self-report inventory for adolescents ranging in age from 12 to 18 years. It requires approximately a sixth grade reading comprehension level and consists of 14 factorially, independent scales, composed of 10 items each, for which the student selects one of three choices. The test booklets are designated as Form A through D, and according to Cattell, Cattell, and Johns (1984) should be considered as extensions rather than parallel forms. Note is made that if a test-retest strategy is employed for research purposes, the form used on the first occasion should be used at retest. Form A was selected for this study and was used for both pre- and posttest assessment.

The set of factorially independent dimensions of personality purported to be measured by the HSPQ are called source traits by Cattell and each is identified by a letter of the alphabet from A through Q. Each has both a popular and technical name. For purposes of this study, the popular name will be designated. The 14 factors are:

- Factor A: Warmth
- Factor B: Intelligence
- Factor C: Emotional Stability
- Factor D: Excitability
- Factor E: Dominance
- Factor F: Cheerfulness
- Factor G: Conformity
- Factor H: Boldness

Factor I: Sensitivity
Factor J: Withdrawal
Factor O: Apprehension
Factor Q2: Self-Sufficiency
Factor Q3: Self-Discipline
Factor Q4: Tension

The average, short-interval scale reliability (from immediate retest to a delay of a week or more) is reported at .79 for Form A alone. The average long-term scale reliability (from several months to several years) drops to .56 for the single form alone. Cattell et al. (1984) report for the 14 personality factors test-retest reliability coefficients ranging from .74 to .91 for immediate retest and from .74 to .88 for readministration after one day.

Both construct and criterion validation procedures have been conducted on the HSPQ. In terms of construct validity, there have been at least 12 independent factor analyses conducted on the HSPQ which replicated its personality structure. The HSPQ has been widely researched, and according to Buross (1978), by 1978, it was ranked 74th among 1,184 published tests in terms of published research. Numerous studies using the HSPQ have focused on the prediction of academic achievement from the HSPQ scales, with grade point averages or standardized test battery scores being the dependent variable, to studies investigating achievement in a specific subject such as math (e.g., Koul, 1969). Other studies have addressed special populations such as dropouts

with high ability (Cardon & Zurick, 1967) or students in accelerated classes as compared to mainstream classes (Dezelle, 1967), while Porter (1974) and Pearce (1968) compared the HSPQ profiles of identified gifted students.

The HSPQ has applicability in studies with clinical applications, ranging from assessing classroom adjustment, looking at anxiety and anxiety disorders, speech impairments, to chemical dependency in adolescents and delinquency patterns. A recent study by Rauste-von-Wright and von-Wright (1981) looked at personality as related to self-reports of psychosomatic symptoms. They found that the frequency of self-reported symptoms was unrelated to variables on medical examination, but was related positively to scores on the HSPQ second-order anxiety factor.

Another recent study by Foreman and Foreman (1981) investigated the relationship between family social climate characteristics and adolescent personality functioning. Subjects were 80 high school students (22 males and 58 females, of whom 76 were white and 4 were black) ranging in age from 16 to 18, who completed the HSPQ and their parents completed the Family Environment Scale (FES). Using a stepwise multiple regression analysis, the authors found that one or more of the HSPQ scales had significant association with each FES scale. They concluded that child behavior varies with the total system functioning, more than with separate system factors.

While the reported reliabilities of the Interpersonal Trust Scale and Jourard's Self-Disclosure Questionnaire are less than desirable for experimental purposes, these instruments best met the requirements of the present study. There are drawbacks with the instrumentation in terms of the median split in analysis. A major criticism of the median split technique of classification is that no normative data have been compiled. The HSPQ, on the other hand, is reported to be quite reliable and valid for the purpose of this study and may provide corroborating evidence in terms of the dependent variable of trust.

Research Design

A pretest/posttest control group experimental design, as described by Campbell and Stanley (1963), was used in this study to investigate the effects of breach of confidentiality on adolescents' level of trust. A symbolic representation of the design is as follows, with "G" representing the different groups; "R" reflecting randomization of the accessible population; "O" representing pre/post testing; and "X" representing treatment.

G1:	R	0 1	X (Full)	0 2
G2:	R	0 3	X (Min)	0 4
G3:	R	0 5		0 6

Research Hypotheses

For statistical analysis, the following specific hypotheses are provided to assess if there are significant differences among groups

(Full Justification, Minimal Justification, Control) at the .05 level of significance:

1. Subjects receiving full justification for breach of confidentiality will achieve higher post-treatment trust scores on Rotter's Interpersonal Trust Scale than will subjects receiving minimal justification for breach of confidentiality.
2. Subjects receiving full justification for breach of confidentiality will achieve higher post-treatment self-disclosure scores on Jourard's Self-Disclosure Questionnaire than will subjects receiving minimal justification for breach of confidentiality.
3. Subjects receiving full justification for breach of confidentiality will show greater differences in post-treatment scores on the 14 separate dimensions of personality functioning on the High School Personality Questionnaire than will subjects receiving minimal justification for breach of confidentiality.
4. Subjects classified as HIGH TRUSTERS in both treatment groups will show a more significant drop in their post-treatment trust scores on the Interpersonal Trust Scale than will subjects classified as LOW TRUSTERS in both treatment groups.
5. Subjects classified as HIGH TRUSTERS in both treatment groups will show a more significant drop in their post-treatment scores on the 14 separate dimensions of

personality functioning on the High School Personality Questionnaire than will subjects classified as LOW TRUSTERS in both treatment groups.

Statistical Analysis Technique

Multivariate analysis of variance (MANOVA) was the statistical technique employed to analyze the collected data to determine statistically significant differences at the .05 level among groups. Haase and Ellis (1987) report that MANOVA models are suitable for the analysis of data from experimental studies that use more than one dependent variable. Additionally, multivariate analysis controls for the escalation of experimentwise Type I and Type II error rates.

Summary of Methodology

The purpose of this study was to investigate the effect of breach of confidentiality on adolescents' level of trust using a pretest/posttest control group experimental design. The sample for the present study was drawn from an accessible population of eighth grade middle school students in the Hampton School Division. Dependent variables of trust and self-disclosure were used and were measured by Rotter's Interpersonal Trust Scale, the High School Personality Questionnaire (HSPQ), and Jourard's Self-Disclosure Questionnaire. The collected data was analyzed using multivariate analysis of variance (MANOVA). Five research hypotheses were used as the basis for assessing whether or not

there would be significant differences at the .05 level among groups (Full Justification, Minimal Justification, Control).

Ethical Safeguards and Considerations

In addition to adhering strictly to the ethical guidelines set forth by the American Psychological Association and the National Association of School Psychologists to protect human research subjects, this research study was approved by the Human Subjects Research Committee of the College of William and Mary, and the Research Committee of the Hampton School Division and appropriate administrative personnel involved. The present study used a normal population of subjects and extra caution was taken to screen out potentially "at risk" volunteers. The intervention procedure was of a short duration and not alarmingly emotionally arousing to reduce the minimal risk, if any, of psychological harm to participating subjects. The need to know what effect breach of confidentiality had on trust outweighed the short-term deception in this study. Further ethical safeguards were employed in terms of acquiring appropriate informed, written consent of subjects and their parents prior to participation in the study, guaranteeing the anonymity of responses by group analysis of the collected data, and explaining that the data was to be used for research purposes only. As there was an element of deception involved in this study, a general debriefing session was held with all participating subjects at the conclusion of the study. Procedures also were in place for individual counseling and assistance should any of the subjects

believe they had experienced any discomfort or anxiety as a result of their participation.

The topics of suicide and drug abuse were selected for the videotape counseling sessions because of the mounting concern among school personnel regarding the sharp increase of both problems in the adolescent population. For purposes of the treatment conditions in terms of breach of confidentiality, two levels of problem seriousness were required. For the problem of suicide, it was believed that most experts in the field working with adolescents, would agree that confidentiality must be breached. For drug abuse, deemed the less serious problem, it was determined to be more ambiguous in terms of the necessity to breach confidentiality.

The investigator developed the general outline of the script and presentation of the sessions. The videotape participants of the simulated counseling sessions were a school social worker (with credentialing of M.S.W., LCSW) from the Hampton School Division and a school psychology intern from the College of William and Mary. The actors in the videotape followed the script but used their own style and specific wording during the professionally taped and edited counseling analogue sessions. Those persons involved in the administration of the pretest-posttest assessment instruments, and those persons involved in the supervision of the

treatment phase of the study were professionals trained in psychology, social work, and/or guidance, and employed by the Hampton School Division.

Chapter 4

Analysis of Results

The purpose of this study was to investigate the effect of breach of confidentiality on adolescents' level of trust and to determine to what extent the type of justification given by the counselor for breach of confidentiality may have effected the adolescents' level of trust.

There were 16 variables assessed, both pre- and posttest, for each of the 123 eighth grade middle school students participating in the study:

1. Raw scores on Rotter's Interpersonal Trust Scale.
2. Raw scores on Jourard's Self-Disclosure Questionnaire.
3. Raw scores on each of the 14 scales of the High School Personality Questionnaire.

Multivariate analysis of variance (MANOVA) was the statistical technique employed for determining whether the three groups (Full Justification, Minimal Justification, and Control) differed significantly on the variables. The .05 level of significance was used to accept or reject the hypotheses.

The assumptions required for the use of analysis of variance hold true for multivariate analysis of variance. Haase and Ellis (1987) state that in order for the F test to be considered valid, the following assumptions must be met: (1) the sample is randomly

drawn from the population of interest, (2) the observations are independent, (3) the observations follow a normal distribution, and (4) that the variances within-groups of the dependent variables are relatively homogeneous and the correlations between the dependent variables are similar across groups. In the present study the assumptions for use of MANOVA were met as follows: (1) the sample was randomly drawn from the experimentally accessible population of eighth grade middle school students; (2) subjects were randomly assigned to groups, and the groups randomly assigned to treatment conditions and therefore were independent; (3) the population from which the sample was drawn was considered to be normally distributed; and (4) homogeneity of variances within groups was assumed because of an initial equal number of subjects within each group.

An analysis of the descriptive statistics presented in Table 4.1 showed no significant preexistent group differences for the criterion variable of age broken down by group. The means and standard deviations for pretest and posttest scores were computed for the 16 variables and are presented in the Appendix in Tables 4.2 (Entire population), Table 4.3 (Group 1 - Full Justification), Table 4.4 (Group 2 - Minimal Justification), and Table 4.5 (Group 3 - Control).

TABLE 4.1

Means and Standard Deviations of Age by Group			
Variable	<u>M</u>	<u>SD</u>	Cases
Entire Population	13.163	.564	123
Group 1 (Full Justification)	13.182	.620	44
Group 2 (Minimal Justification)	13.205	.570	39
Group 3 (Control)	13.100	.496	40

The first series of analyses examined whether there were significant differences among groups in post-treatment scores on the Interpersonal Trust Scale, Jourard's Self-Disclosure Questionnaire, and the 14 scales of the High School Personality Questionnaire. Secondly, the analyses looked at whether there were significant differential effects between High and Low Trusters in both treatment groups. Multivariate analysis of variance (MANOVA) was performed to assess the differences among groups. The MANOVA results revealed that there were no significant overall multivariate effects among the groups so no post hoc analyses were performed. There are five hypotheses that will be discussed separately in the analysis of results.

Hypothesis 1:

Subjects receiving full justification for breach of confidentiality will achieve higher post-treatment trust scores on Rotter's Interpersonal Trust Scale than will subjects receiving minimal justification for breach of confidentiality.

The results of the ANOVA analysis are reported in Table 4.6. No significant differences were found among groups in post-treatment trust scores, $F(2,120) = .35$, $p < .706$. With F not significant at the .05 level of probability, the level of justification for breach of confidentiality had no apparent effect on level of trust for subjects in the Full Justification or Minimal Justification groups. In comparing whether there was a significant within subject effect across time, the ANOVA results indicated no significant differences, $F(1,120) = .01$, $p < .909$. Additionally, no significant group by time interaction effect was found, $F(2,1) = 2.85$, $p < .061$. In summary, no significant differences were found in terms of trust whether looking at the effect among groups, a time effect, or group by time interaction effect. Therefore, the research hypothesis could not be supported.

TABLE 4.6

Results of ANOVA Analysis for Group and Time Effects on Scores of the Interpersonal Trust Scale						
<u>Source of Variation</u>						
Between-Subject	Effect	<u>SS</u>	<u>df</u>	<u>MS</u>	<u>F</u>	Sig. of <u>F</u>
Group		61.88	2	30.94	.35	.706
Error		10631.86	120	88.60		
Within/Subject Effect						
Time		.28	1	.28	.01	.909
Group By Time		122.91	2	61.46	2.85	.061
Error		2583.09	120	21.53		

Hypothesis 2:

Subjects receiving full justification for breach of confidentiality will achieve higher post-treatment self-disclosure scores on Jourard's Self-Disclosure Questionnaire than will subjects receiving minimal justification for breach of confidentiality.

The results of the ANOVA analysis are reported in Table 4.7. The data show no significant group differences, $F(2,120) = .25$, $p < .781$ nor significant group by time interaction effects, $F(1,2) = 1.52$, $p < .223$. With F values not significant at the .05 level of probability for groups, and group by time interaction effects, the level of justification for breach of confidentiality had no significant impact on level of self-disclosure among groups. However, the analysis did show a significant time effect which remained constant across groups, $F(1,2) = 1.52$, $p < .001$. As can be seen from the descriptive statistics reported in Table 4.2 in the Appendix, the average self-disclosure posttest mean for the entire population (49.37) was higher than the pretest mean (45.02), indicating that subjects, regardless of group, were more disclosing at posttest.

TABLE 4.7

Results of ANOVA Analysis for Group and Time Effects on Scores
of Jourard's Self-Disclosure Questionnaire

Source of Variation

Between-Subject Effect	<u>SS</u>	<u>df</u>	<u>MS</u>	<u>F</u>	<u>Sig. of F</u>
Group	227.06	2	113.53	.25	.781
Error	54903.58	120	457.53		
<u>Within/Subject Effect</u>					
Time	1225.33	1	1225.33	11.43	.001*
Group By Time	325.32	2	162.66	1.52	.223
Error	12864.81	120	107.21		

* $p < .05$

Hypothesis 3:

Subjects receiving full justification for breach of confidentiality will show greater differences in post-treatment scores on the 14 dimensions of personality functioning on the High School Personality Questionnaire than will subjects receiving minimal justification for breach of confidentiality.

This hypothesis was tested by Wilks Lambda, a multivariate test of significance. The data from the multivariate test analysis are reported in Table 4.8. No significant differences were found in terms of group effects, Wilks Lambda(28,214) = 1.258, $p < .184$; group by time interaction effects, Wilks Lambda(28,214) = .748, $p < .818$; or time effects (Wilks Lambda(14,107) = 1.722, $p < .062$. The multivariate test of significance (Wilks Lambda) tested all of the 14 factors of the HSPQ and found no significant multivariate effects, thus indicating no further post hoc analyses should be pursued and the research hypothesis could not be supported.

TABLE 4.8

Results of Multivariate Test of Significance (Wilks Lambda) for the 14 Scales of the HSPQ					
Effect	Wilks Value	<u>F</u>	Hypoth. <u>df</u>	Error <u>df</u>	Sig. of <u>F</u>
Group	.737	1.258	28.00	214.00	.184
Group By Time	.830	.748	28.00	214.00	.818
Time	.816	1.722	14.00	107.00	.062

Hypothesis 4:

Subjects classified as HIGH TRUSTERS in both treatment groups will show a more significant drop in their post-treatment trust scores on the Interpersonal Trust Scale than will subjects classified as LOW TRUSTERS in both treatment groups.

The results of the ANOVA analysis are reported in Table 4.9. The data show statistically significant differences between the scores of High and Low Trusters among groups, $F(2,69) = 5.24$, $p < .008$ and between High and Low Trusters overall $F(1,69) = 23.38$, $p < 0.00$. No significant interaction effect, $F(2,1) = .01$, $p < .990$ was found. The research hypothesis was therefore supported indicating that there were significant differences in how High and Low Trusters among groups responded and that High and Low Trusters overall responded in a statistically different manner.

TABLE 4.9

Results of ANOVA Analysis for Group and Time Effects of High and Low Trusters

<u>Source of Variation</u>	<u>SS</u>	<u>df</u>	<u>MS</u>	<u>F</u>	<u>Sig. of F</u>
Group	356.51	2	178.26	5.24	.008*
TG (Trust Group)	791.74	1	791.74	23.28	.000*
Group by TG	.71	2	.35	.01	.990
Error	2346.72	69	34.01		

* $p < .05$

The means and standard deviations for High and Low Trusters are presented in Table 4.10. To assess which group showed the most change, the average mean change was calculated for each group which yielded the following results:

Group 1 (Full Justification) 2.536

Group 2 (Minimal Justification) -1.523

Group 3 (Control) 2.077

The reported data show that Group 1 evidenced the most change with respect to High and Low Trusters, followed by Group 3. High and Low Trusters in Group 2 approached the average change evidenced by Group 1 but in a negative direction.

To assess which group, whether High Trusters or Low Trusters, showed a more significant drop in their post-treatment trust scores on the Interpersonal Trust Scale, the average mean change for both High and Low Trusters was calculated which yielded the following results:

Low Trusters (TG-1) 3.000

High Trusters (TG-2) -3.486

It was found that the High Trusters as a group evidenced a decrease (average change of -3.49) in their post-treatment trust scores while the Low Trusters as a group showed an increase (average change of 3.00) in a positive direction. As a group, the Low Trusters went up in their trust scores, while the High Trusters went down.

TABLE 4.10

Means and Standard Deviations for High and Low Trusters						
Factor	Code	<u>M</u>	<u>SD</u>	<u>n</u>	95 percent Conf.	Interval
Group	1					
TG	1	5.786	5.522	14	2.598	8.974
TG	2	- .714	5.384	14	- 3.823	2.394
Group	2					
TG	1	1.800	3.706	10	- .851	4.451
TG	2	- 4.545	4.525	11	- 7.585	- 1.506
Group	3					
TG	1	1.071	7.498	14	- 3.258	5.401
TG	2	- 5.750	6.837	12	-10.094	- 1.406

Hypothesis 5:

Subjects classified as HIGH TRUSTERS in both treatment groups will show a more significant drop in their scores on the 14 dimensions of personality functioning on the High School Personality Questionnaire than will subjects classified as LOW TRUSTERS in both treatment groups.

This hypothesis was tested by Wilks Lambda, a multivariate test of significance. The data from the multivariate test are reported in Table 4.11. No significant differences were found in terms of group effects for HIGH and LOW TRUSTERS, Wilks Lambda(.583) = 1.241, $p < .213$ or group by TG (High or Low Truster group) effects, Wilks Lambda(.624) = 1.065, $p < .394$. The analysis did show a significant differential effect for TG--High and Low Trusters, Wilks Lambda(.616) = 2.494, $p < .008$.

TABLE 4.11

**Results of Multivariate Test of Significance (Wilks Lambda) for
the 14 Scales of the HSPQ for HIGH and LOW TRUSTERS**

Effect	Wilks Value	<u>F</u>	Hypoth. <u>df</u>	Error <u>df</u>	Sig. of <u>F</u>
Group	.583	1.241	28	112	.213
Group By TG	.624	1.065	28	112	.394
TG (Trust Gr)	.616	2.494	14	56	.008*

* $p < .05$

Since there was a significant differential effect for High and Low Trusters, a univariate test of significance was conducted. The results of the ANOVA analysis are reported in Table 4.12.

TABLE 4.12

Results of ANOVA Analysis for Differential Effects of HIGH and LOW TRUSTERS for the 14 Scales of the HSPQ						
Effect	Hypoth. <u>SS</u>	Error <u>SS</u>	Hypoth. <u>MS</u>	Error <u>MS</u>	<u>F</u>	Sig. of <u>F</u>
DIF A	3.238	520.824	3.238	7.548	.429	.515
DIF B	.110	281.272	.110	4.076	.027	.870
DIF C	.480	570.153	.480	8.263	.058	.810
DIF D	.499	563.617	.499	8.168	.061	.806
DIF E	24.346	669.689	24.346	9.706	2.508	.118
DIF F	791.738	2346.720	791.738	34.010	23.279	.000*
DIF G	13.458	496.208	13.458	7.191	1.871	.176
DIF H	9.560	525.236	9.560	7.612	1.256	.266
DIF I	14.668	790.719	14.668	11.460	1.280	.262
DIF J	32.592	642.120	32.592	9.306	3.502	.066*
DIF O	8.719	634.469	8.719	9.195	.948	.334
DIF Q2	11.653	578.330	11.653	8.382	1.390	.242
DIF Q3	1.310	706.171	1.310	10.234	.128	.722
DIF Q4	.085	685.344	.085	9.933	.009	.927

* $p < .05$

The data show that there was a statistically significant differential effect between High and Low Trusters on Factor F (Cheerfulness), $F(1,69) = 23.28, p < .000$. On Factor J (Withdrawal), the differential effect between High and Low Trusters approached significance, $F(1,69) = 3.50, p < .066$.

For Factor F, the entire population mean difference for High and Low Trusters was $-.2000$ with a standard deviation of 6.869 ($N = 75$). The mean difference for TG1 (Low Trusters) was 3.000 with a standard deviation of 6.208 ($n = 38$) which means the Low Trusters as a group showed a statistically significant positive change in their scores on Factor F which is purported to measure the personality characteristic of cheerfulness, a reliable component of extraversion. High Trusters, TG2, as a group obtained a mean difference of -3.487 with a standard deviation of 5.956 ($n = 37$) indicating a statistically significant drop in their scores on this scale.

For Factor J, purported to measure the personality characteristic of withdrawal, the entire population mean difference for High and Low Trusters was $-.573$, with a standard deviation of 3.068 ($N = 75$). While the difference between High and Low Trusters only approached significance on this Factor, the Low Trusters as a group showed an increase ($M = .079, SD = 3.088$) while the High Trusters as a group showed a decrease ($M = -1.243, SD = 2.938$). The other 12 HSPQ Factors proved not significant in terms of differences between High and Low Trusters.

Summary

Multivariate analysis of variance was employed to determine if breach of confidentiality had a significant effect on adolescents' level of trust. The results of the statistical analysis revealed no significant differences among the Full Justification, Minimal Justification, and Control groups on the variables of trust, self-disclosure and the 14 factors assessing personality functioning on the High School Personality Questionnaire. The analyses showed, however, that there was a significant time effect across groups in terms of self-disclosure, with students disclosing more at post-testing. Additionally, there were statistically significant differential effects between High and Low Trusters on the trust measure, with Low Trusters increasing in level of trust and High Trusters decreasing in their level of trust. The same pattern of statistically significant differential effects for High and Low Trusters was also evidenced for Factor F (Cheerfulness) and Factor J (Withdrawal) on the High School Personality Questionnaire, with Low Trusters increasing and High Trusters decreasing in their scores.

Chapter 5

Summary, Conclusions, and Recommendations

This chapter is organized into three major sections. A summary of this study is presented, followed by conclusions based upon interpretation of the data analysis. The implications of the study are discussed and recommendations for future research are proposed.

Summary

The issue of confidentiality, particularly as applied to the educational setting, has become a topic of increasing focus because of emerging legal and ethical trends over the past fifteen years. Confidentiality generally is viewed as an ethical concept relating to the professional's obligation not to disclose information given in confidence by an individual except under conditions agreed to by the individual, or without substantial justification or legal cause. The components of confidentiality are embodied in ethical standards (APA, 1989). However, historical legal developments have imposed requirements regarding the limits of confidentiality as documented by the nationwide legal mandates requiring the reporting of child abuse. Further, the precedent setting court decision of Tarasoff v. Regents of the University of California (1976) has resulted in some states incorporating the duty to warn provision within state statute which mandates that psychologists,

counselors and other mental health providers are required to breach confidentiality and warn the intended victim when the client is determined to be a threat to another party.

The expectation of confidentiality in a counseling session is well documented in the literature as an important factor in the development of trust and in the facilitation of self-disclosure (McGuire, Toal, & Blau, 1985; Messinger & McGuire, 1981; Muehlman, Pickens, & Robinson, 1985; Woods & McNamara, 1980). Within the context of a counseling session, breach of confidentiality may be viewed as an ethical/moral dilemma for both the counselor as well as the client. Nothing alters the fact that breach of confidentiality, whether for ethical or legal cause, is a breach of moral contract which may modify the trust component and create cognitive dissonance within the individuals. Reduction of this dissonance is essential for the therapeutic process to continue.

Most research efforts (Kaul & Schmidt, 1971; LaFromboise & Dixon, 1981; Merluzzi & Brischetto, 1983; Rothmeier & Dixon, 1980) primarily have focused on perceived counselor trustworthiness, one of the critical variables Strong (1968) postulated as important in interpersonal influence for behavior and attitude change in counseling. Trustworthiness repeatedly was reported to be an essential component of the counseling process and of the counselor's influence in the counseling relationship.

While confidentiality and self-disclosure have been a target of research, there has been little attempt to focus on the impact of

breach of confidentiality on the individual's level of trust. A need for further research in the areas of trust, confidentiality and self-disclosure with the adolescent population is documented in the literature. Consequently, the present study was designed to determine what effects breach of confidentiality in a counseling session may have on adolescents' level of trust.

The sample for this study was drawn from the five middle schools in the Hampton School Division, an urban school system in southeastern Virginia. A total of 500 students enrolled in average classes and/or reading on grade level, approximately 100 from each of the middle schools, were randomly selected to be considered for participation in the study. A total of 199 students returned the signed consent form, and of these, 28 met the exclusionary criteria instituted to screen out potentially "at risk" students. An additional 9 students dropped out of the study at the first meeting because of previous commitments or not wanting to participate, yielding a total sample of 162 students. The students were 50 males and 112 females who ranged in age from twelve to fifteen years, with a racial representation of 45% white, 52.5% black, and 2.5% other minorities which approximated the racial breakdown of the school population.

Based on their scores on Rotter's Interpersonal Trust Scale, the students were designated as High or Low Trusters and randomly assigned to one of three groups, and the groups randomly assigned to one of three treatment conditions (Full

Justification, Minimal Justification or Control), with high and low trusters equally distributed. Scheduling conflicts resulted in a high mortality rate, yielding only 123 students (39 males and 84 females) who completed the entire study.

A pretest-posttest control group experimental design was used to investigate the effects of breach of confidentiality on adolescents' level of trust. The dependent variables of trust, self-disclosure, and the 14 dimensions of personality functioning on the HSPQ were assessed at both pretest and posttest. Multivariate analysis of variance (MANOVA) was the statistical technique used to analyze the data. Five research hypotheses provided the basis for testing whether or not there would be significant differences among the groups at the .05 level on the designated variables.

The results of the statistical analysis of the data revealed no significant differences among the Full Justification, Minimal Justification and Control groups on the dependent variables. Therefore, the first three research hypotheses could not be supported, indicating that breach of confidentiality and level of justification for breach of confidentiality had no apparent effect on adolescents' level of trust. However, the analyses showed a significant time effect for self-disclosure, with students reporting a higher level of self-disclosure, regardless of group, at posttest. Additionally, the data analyses showed that there was a significant differential effect between High and Low Trusters, on the trust measure and on two factors of the HSPQ (Cheerfulness and

Withdrawal), with High Trusters showing a decrease in their scores and Low Trusters showing an increase in their scores, thus supporting the fourth and fifth research hypotheses.

Conclusions

The purpose of the present study was to determine if breach of confidentiality in a counseling session had an effect on adolescents' level of trust. The major findings of the research provided no empirical support for the hypothesis that level of trust would be significantly affected by breach of confidentiality. Further, the findings revealed that there was no significant impact on adolescents' level of trust whether the counselor provided them with a full justification or minimal justification for breach of confidentiality.

The finding that breach of confidentiality had no significant effect on adolescents' level of trust has several possible interpretations. First, and the most obvious, is that for adolescents, trust simply is not affected to a significant degree by breach of confidentiality in a counseling session. However, this interpretation runs counter to commonsense reasoning and practical experience since it is during the period of adolescence that trust particularly becomes important. According to Piagetian principles, adolescence is accompanied by an increased capacity to assume other people's perspectives and to behave less egocentrically. Thus, adolescents increasingly focus on and come to value such qualities as trust,

loyalty and empathy in their relationships with others (Nielsen, 1987).

Secondly, although level of justification for breach of confidentiality similarly had no significant effect on level of trust, perhaps the empathic, caring nature of the counselor in the videotape vitiated the effect of breach of confidentiality on trust. Thirdly, an alternative interpretation might be that because of past experience adolescents perhaps are familiar with a counselor having to breach confidentiality in such situations in the school setting when a student is determined to be a danger to self and/or others, and therefore are not unduly affected by it. One would like to accept the interpretation that breach of confidentiality has no effect on level of trust because then counselors would not be put in the position of having to agonize over the ethical dilemma of breaching confidentiality in such situations. No matter which interpretation appears most plausible, the findings of the present study empirically did not support the hypothesis.

In addressing the variable of self-disclosure in the same manner, the present research showed no significant effect on level of self-disclosure among groups in terms of level of justification for breach of confidentiality which support the findings of previous research (Kobocow, McGuire, & Blau, 1983; Muehleman, Pickens, & Robinson, 1985). Their results revealed that there was little evidence to support the fact that providing more detailed

information about the limits of confidentiality had any effect on willingness to disclose.

However, in terms of self-disclosure, the results of the present study showed a significant time effect from pretest to posttest that was constant across groups. Students, regardless of group, reported a higher level of willingness to self-disclose at posttest. One possible interpretation of this finding is that the participating students, deemed relatively naive in terms of counseling experiences, were exposed to positive interactions with "counselor" figures in terms of the persons supervising the sessions--all were trained in the helping professions.

The fourth and fifth research hypotheses addressed differential effects between High and Low Trusters. Hypothesis four predicted that High Trusters would show a more significant drop in their post-treatment trust scores than Low Trusters. This hypothesis was supported. It was expected that High Trusters as a group would be more affected by breach of confidentiality (viewed as a dissonance arousing condition) and, therefore, would report lower overall scores on the post-treatment trust measure, i.e., ostensibly become less trusting in order to realign their cognitions to comply with the situation. In part, this finding supports Roberts' research (cited by Rotter, 1971) which showed that high trusters generally would allow a mistake or two and still trust providing the mistake was admitted and an apology made. A comparison, albeit weak, can be made to the counselor's justification for breach of

confidentiality in terms of supplying an apology. Although the High Trusters showed a significant drop in their trust scores (average change of -3.486 points), they still were viewed as trusting.

However, an additional finding related to hypothesis four was that Low Trusters, as a group, also showed a change in their post-treatment trust scores--an increase (3.000)--which was not anticipated. Since only those students classified as High Trusters or Low Trusters on the Interpersonal Trust Scale (scores of 73 and above designated as HT and scores of 66 and below designated as LT) were included in the analysis, a more plausible and perhaps more accurate interpretation of the finding might be explained by the phenomenon of regression to the mean since both High and Low Trusters showed movement in that direction. High and Low Trusters initially had extreme scores, therefore upon post-test, their scores tended to gravitate more closely to the mean.

Previous research with Rotter's Interpersonal Trust Scale primarily used college-age students (Bevett, et al., 1983; Katz & Rotter, 1969; Rotter, 1967; Vondracek & Marshall, 1971; Williams, 1974; Wright & Tedeschi, 1975). An interesting finding related to this study using an adolescent population is that the obtained mean on the Interpersonal Trust Scale for the 162 eighth grade students was 69. If the means for the above cited studies were averaged, an approximate mean of 67 would have been obtained for the college age students suggesting that the Interpersonal Trust Scale provides

an applicable and relatively stable measure of interpersonal trust as defined by Rotter for both populations. Additionally, the relatively close mean scores for both populations might be interpreted as suggesting that the level of interpersonal trust for both age ranges is relatively constant. However, this interpretation must be taken with caution because of the various methodological differences among the studies.

Fitzgerald, Pasewark, and Noah (1970) used Rotter's Interpersonal Trust Scale with delinquent adolescents as their population of study but constructed an alternate form of the Interpersonal Trust Scale using less complex language. Their results failed to support Rotter's contention that delinquents are less trusting than non-delinquents, thus forcing them to question whether the Interpersonal Trust Scale was measuring the construct it was purporting to measure. As was often found with Jourard's Self-Disclosure Questionnaire, it frequently was altered from the original form to match the needs of a particular study. It is difficult to document whether the specific changes in the wording of the instruments made a difference in failing to support previous research. Trust and self-disclosure both are hypothetical constructs and difficult to operationally define. Perhaps what is required in future studies are actual behavioral correlates in specific situations to assess both areas more accurately.

The fifth and final hypothesis partly was supported in that there was a significant differential effect between High and Low

Trusters on 2 factors of the HSPQ--Factor F (Cheerfulness) and Factor J (Withdrawal). It is difficult to discern why these particular factors showed a significant change while others did not. Factor F, purported by Cattell to be one of the most important components of extraversion, represents a fairly fixed trait, that of seriousness, caution and subduedness at the lower extreme, and cheerfulness and talkativeness at the higher extreme. In attempting to analyze this particular finding, Factor F might be interpreted in light of its descriptors. Since the High Trusters as a group showed a decrease in their post-treatment scores on Factor F, breach of confidentiality in a counseling session may have caused them to be more cautious in their view of others. Factor J (Withdrawal) at the lower end of the scale represents vigorousness, going along with the crowd and given to action. At the upper end of the scale, Factor F descriptors are guarded, internally restrained and prone to individualism. A similar pattern of analysis for Factor F might be applied in terms of descriptors for interpretation. Since no studies were found relating to these specific factors to support or disconfirm these interpretations, they must be taken with caution.

Recommendations for Future Research

There are several recommendations offered for consideration in future research based on the findings of the present study. The first recommendation is to replicate this study using the same general design with special populations of adolescents, e.g., unmotivated gifted students, potential dropouts due to truancy or

academic underachievement, children of divorce or adoptive children. Another focus of potential future research is to replicate and extend the study to incorporate pre-adolescent, mid-adolescent and late adolescent-aged students to ascertain if breach of confidentiality has a differential effect on level of trust according to age. A further recommendation is to expand the sample size of the study to further verify the efficacy of using Rotter's Interpersonal Trust Scale with this age population.

Based on the course of the present study, an additional recommendation is to use students who actually seek help with personal problems in the school setting rather than rely on volunteer students. It may be that the tolerance level of such students is significantly different from volunteer students. They might respond in a completely different manner to a similarly designed study to investigate the effects of breach of confidentiality on level of trust. Also, extend the time frame of the study and use a variety of student problems and provide the opportunity for actual discussion at the conclusion of the tapes in order to better assess their understanding of the presented material.

Another suggestion for future research focuses on the sex and theoretical orientation of the counselor as well as sex of the student depicted in the videotape. Adolescents may respond differently to a male counselor using a more directive and didactic approach such

as behavior therapy, rational emotive therapy or reality therapy as opposed to the person-centered, empathic Rogerian approach.

A final recommendation, not necessarily for future research but for practical implementation with the school setting, addresses the use of videotapes as a focus of group counseling sessions for "at-risk" adolescents or those transitioning to the high-school setting (a time of intense stress for many adolescents) to generate problem-solving strategies, develop interpersonal and communication skills, and enhance self-esteem in an effort to prevent the development of debilitating problems.

APPENDIX A

September 10, 1990

Dear Parent,

Our students often are not aware of the support services available to them within the school system. Counselors, school psychologists, and school social workers provide short-term counseling services during the school day for students who experience problems related to a variety of concerns. As a school system, we want to improve the quality of our support services as much as possible in an effort to better meet our students' needs and that is why I am contacting you.

I would like your permission to include your child's name for consideration to participate in a study that I am conducting to explore confidentiality issues in counseling with adolescents as part of my doctoral degree requirements in the Counseling/School Psychology Program at the College of William and Mary. I am a school psychologist with the Hampton City Schools and have been given permission by the Hampton School Division and the College of William and Mary to carry out this study with student volunteers in our middle schools.

The study will require that your child meet for thirty minutes twice per week for 5 weeks during Home Base period. During the session, conducted by school psychologists and school social workers, your child will respond in written form to several questionnaires concerning general opinions about people, values, and interests; view a videotape of simulated counseling sessions related to drug abuse and suicide issues--two very serious problems that confront school personnel in working with adolescents; and discuss the material presented.

Participation in the study is completely voluntary and your child may withdraw from the study at any time without penalty. The information obtained will remain anonymous and be used for research purposes only. Your child's responses will be grouped with others so that no individual answers will be available or

recognizable. The name of your child will not appear. Upon completion of the study, I will be happy to provide you a written summary of the results by contacting me at the address below.

Thank you for taking the time to read this letter. I hope you will decide to have your child considered for participation in the study. If you give permission, would you and your child please sign the consent form stapled to this letter. Return it in the envelope provided to the Guidance Office at your child's school no later than Friday, September 14, 1990. If I can answer any questions you might have, contact me at 850-5353, or you may contact my advisor, Roger R. Ries, Ph.D. (221-2345) or P. Michael Politano, Ph.D. (221-2343) at the College of William and Mary.

Sincerely yours,

Carolyn Warrick
Hampton Schools
Administrative Center
1819 Nickerson Boulevard
Hampton, VA 23663

APPENDIX B

CONSENT FORM

I, the parent of _____, give permission for
(STUDENT NAME)

my child to participate in the research study on confidentiality issues in counseling with adolescents by Carolyn Warrick. I have read the accompanying letter and am aware that this study will involve the written completion of several questionnaires, the viewing of a videotape of simulated counseling sessions related to drug abuse and suicide issues, and discussion of the material presented. I have been assured that the information obtained will remain anonymous and be used for research purposes only, and that I may request a written summary of the results upon conclusion of the study. I have explained to my child the requirements of the study.

I give permission.

I do not give permission.

Parent Signature

Date

Parent Signature

Date

If your child would like to participate in the study, please have him or her read the paragraph below, then sign, date the consent form, and fill in the name of his or her school on the appropriate lines.

I, _____, voluntarily agree to participate
(STUDENT NAME)

in the research study on confidentiality issues in counseling with adolescents by Carolyn Warrick. I understand that I will be expected to meet for thirty minute sessions twice a week for 5 weeks during Home Base period at which time I will complete several written questionnaires, view a videotape of simulated counseling sessions related to drug abuse and suicide issues, and discuss the material presented. I have been assured that my responses to the questionnaires and tape will be completely

anonymous and used for research purposes only, and that I may withdraw from the study at any time. I also understand that all responses will be grouped with others so that individual answers will not be available or recognizable.

(STUDENT SIGNATURE)

(DATE)

(SCHOOL)

PLEASE HAVE YOUR CHILD RETURN THIS SIGNED FORM IN THE ENVELOPE PROVIDED TO THE GUIDANCE OFFICE AT YOUR CHILD'S SCHOOL NO LATER THAN SEPTEMBER 14, 1990.

I WILL CONTACT YOUR CHILD AT SCHOOL TO ARRANGE THE SPECIFIC TIMES AND MEETING PLACE. THANK YOU FOR YOUR INTEREST AND COOPERATION.

APPENDIX C

PERSONAL DATA INTERVIEW

Name: _____

Sex: Male _____ Female _____

Birthdate: _____

INSTRUCTIONS: Please answer the following questions.

1. What school did you attend last year? _____

2. What do you like best about school? _____

3. What is your favorite school subject? _____

4. Do you know the name of your grade level counselor?

Yes _____ No _____

5. Have you had the opportunity to talk one-to-one with any adults at school during the last year about your problems or anything that you were worried about?

Yes _____ No _____

6. If the answer to question #5 is yes, how often did you talk to that person?

_____ OFTEN _____ SOMETIMES _____ RARELY
(e.g., once a week)

7. Are you now seeing a counselor who does not work at your school?

Yes _____ No _____

8. Have you seen a counselor (who does not work at your school) for six weeks in a row or longer during the last year?

Yes ____ No ____

9. Do you know the name of your school nurse?

Yes ____ No ____

10. How often have you felt sick enough to go to the clinic?

____ OFTEN ____ SOMETIMES ____ RARELY
(e.g., once a week)

APPENDIX D

Name: _____

VIDEOTAPE QUESTIONNAIRE - SESSION I

1. What was the student's problem in the videotape?
2. What does the word confidentiality mean to you?
3. What did the counselor say about confidentiality in the videotape?
4. What would you do in this situation if your friend had come to you with the same problem?
5. What do you think the counselor should do?
6. Would you go to a counselor if you had a problem like this?
YES ____ NO ____

If your answer to question #6 is YES, what is your reason?

If your answer to question #6 is NO, what is your reason?

Name: _____

VIDEOTAPE QUESTIONNAIRE - SESSION II

1. What was the student's problem in the videotape?
2. What does the word confidentiality mean to you?
3. What did the counselor say about confidentiality in the videotape?
4. What would you do in this situation if your friend had come to you with the same problem?
5. What do you think the counselor should do?
6. Would you go to a counselor if you had a problem like this?
YES ____ NO ____

If your answer to question #6 is YES, what is your reason?

If your answer to question #6 is NO, what is your reason?

APPENDIX E

VIDEOTAPE QUESTIONNAIRE - GROUP 3

1. What was the student's problem in the videotape?
2. What choices did David have?
3. What would you do in this situation if your friend had come to you with the same problem?
4. What did you think of the conversation between David and his teacher?
5. What did you think of the conversation between David and his father?
6. Who would you go talk to if you had a problem like this?

APPENDIX F

DEBRIEFING SIGNATURE FORM

I, _____, have been told the true purpose of the
(STUDENT NAME)
study on confidentiality issues in counseling with adolescents in
which I have just participated. I understand that the actual
purpose of the study was to assess what effect breaking
confidentiality in a counseling session has on adolescents' level of
trust. I understand the reasons why I had to be partially deceived
as to the true purpose of the study while in process. I also
understand that I have the opportunity to contact you at the
address below for an individual exit interview if I feel the need to
discuss any aspect of the study further.

SUBJECT SIGNATURE

DATE

EXPERIMENTER SIGNATURE

Hampton Schools Administrative Center
Phone: 850-5353

DATE

APPENDIX G

PLEASE NOTE

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Definitions

- Hypocrisy** - the act or practice of pretending to be what one is not or to have principles or beliefs that one does not have.
- Judiciary** - a system of courts of law in an area (as a nation or state).
- Unbiased** - free from bias; characterized by complete absence of prejudice, favoritism, undue or unwarranted preference, or personal interest.
- Idealist** - one whose conduct is influenced or guided by ideals, especially one that places ideals before practical considerations.
- Horde** - an unorganized or loosely organized mass of individuals; a vast number.

APPENDIX H

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APPENDIX I

TABLE 4.2

Pretest/Posttest Means and Standard Deviations Entire Population (<u>N</u> = 123)				
		<u>Pretest</u>		<u>Posttest</u>
Variables		<u>M</u>	<u>SD</u>	<u>M</u> <u>SD</u>
ITS		69.033	7.241	69.033 7.577
JSDQ		45.016	17.588	49.374 15.833
HSPQ:	Factor A	10.488	2.690	11.114 2.747
	Factor B	6.407	1.881	6.691 1.959
	Factor C	9.610	2.556	9.935 2.452
	Factor D	11.024	2.830	10.846 2.770
	Factor E	10.463	2.771	10.293 2.673
	Factor F	10.585	2.942	10.285 2.786
	Factor G	9.797	2.577	10.171 2.825
	Factor H	10.236	2.634	10.342 2.880
	Factor I	11.155	3.565	11.512 3.895
	Factor J	9.553	2.723	8.968 2.416
	Factor O	8.781	3.098	9.000 3.008
	Factor Q2	8.707	2.412	9.179 2.840
	Factor Q3	9.504	2.628	9.244 2.390
	Factor Q4	10.163	2.520	10.447 2.558

APPENDIX J

TABLE 4.3

Pretest/Posttest Means and Standard Deviations					
Group 1 - Full Justification (<u>n</u> = 44)					
		<u>Pretest</u>		<u>Posttest</u>	
Variables		<u>M</u>	<u>SD</u>	<u>M</u>	<u>SD</u>
ITS		68.70	6.90	70.57	7.06
JSDQ		46.34	18.84	48.09	18.93
HSPQ:	Factor A	9.93	1.97	10.52	2.54
	Factor B	6.64	1.77	6.68	1.51
	Factor C	9.16	2.46	10.05	2.50
	Factor D	11.41	2.55	10.82	2.55
	Factor E	11.00	2.71	10.59	2.50
	Factor F	10.57	2.84	10.61	2.22
	Factor G	9.70	2.52	10.20	3.14
	Factor H	10.11	2.55	10.30	2.60
	Factor I	10.48	3.28	11.05	3.97
	Factor J	9.48	2.28	8.39	2.07
	Factor O	8.70	2.81	8.80	2.91
	Factor Q2	8.73	2.53	9.36	2.87
	Factor Q3	9.86	2.94	9.05	2.30
	Factor Q4	10.43	2.29	10.27	2.19

APPENDIX K

TABLE 4.4

Pretest/Posttest Means and Standard Deviations					
Group 2 - Minimal Justification (n = 39)					
		<u>Pretest</u>		<u>Posttest</u>	
Variables		<u>M</u>	<u>SD</u>	<u>M</u>	<u>SD</u>
ITS		69.33	7.14	68.62	7.81
JSDQ		44.72	17.02	52.08	14.69
HSPQ:	Factor A	11.08	2.89	11.38	2.81
	Factor B	5.95	1.50	6.39	1.91
	Factor C	9.77	2.80	10.21	1.91
	Factor D	10.74	2.85	10.67	2.57
	Factor E	9.77	3.19	9.82	2.96
	Factor F	11.31	2.93	10.41	2.75
	Factor G	9.51	2.42	10.00	2.70
	Factor H	10.56	2.84	10.67	2.99
	Factor I	12.10	3.74	12.59	3.75
	Factor J	9.36	3.00	9.13	2.39
	Factor O	8.77	3.09	8.83	2.88
	Factor Q2	8.41	2.14	9.15	2.69
	Factor Q3	8.82	2.75	9.08	2.48
	Factor Q4	10.03	2.71	10.74	2.67

APPENDIX L

TABLE 4.5

Pretest/Posttest Means and Standard Deviations					
Group 3 - Control (<u>n</u> = 40)					
		<u>Pretest</u>		<u>Posttest</u>	
Variables		<u>M</u>	<u>SD</u>	<u>M</u>	<u>SD</u>
ITS		69.10	7.85	69.75	7.79
JSDQ		43.85	17.05	48.15	12.96
HSPQ:	Factor A	10.53	3.09	11.50	2.86
	Factor B	6.60	2.26	7.00	2.40
	Factor C	9.95	2.41	9.55	2.86
	Factor D	10.88	3.11	11.05	3.21
	Factor E	10.55	2.29	10.41	2.56
	Factor F	9.90	2.97	9.80	3.33
	Factor G	10.18	2.80	10.30	2.63
	Factor H	10.05	2.55	10.08	3.09
	Factor I	10.98	3.36	10.98	3.83
	Factor J	9.81	2.93	9.45	2.71
	Factor O	8.88	3.47	9.40	3.26
	Factor Q2	8.98	2.56	9.00	3.00
	Factor Q3	9.78	2.01	9.63	2.42
	Factor Q4	10.00	2.61	10.35	2.84

APPENDIX M



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November 12, 1986

Carolyn B. Warrick
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Hampton City Schools
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Dear Ms. Warrick:

You have my permission to reproduce the Interpersonal
Trust Scale. A key copy of the scale is enclosed.

Very truly yours,

Julian B. Rotter
Julian B. Rotter
Professor of Psychology

JBR/isw
Encl.



An Equal Opportunity Employer

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