The efficacy of the psychodrama technique of doubling in increasing self-acceptance

Eugene R. Dold
THE EFFICACY OF THE PSYCHODRAMA TECHNIQUE OF
DOUBLING IN INCREASING SELF-ACCEPTANCE

A Thesis
Presented to the
Faculty of
California State College
San Bernardino

In Partial Fulfillment
of the Requirements for the Degree
Master of Arts
in
Psychology

by
Eugene R. Dold
April 1975
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Chairperson

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ABSTRACT

The purpose of the present study was to assess the effectiveness of the psychodrama technique of doubling in increasing self-acceptance in undergraduates. Subjects for this study were 20 undergraduate psychology students (10 male and 10 female), ranging in ages from 18 to 48 years. A one-hour psychotherapy session with doubling and a one-hour psychotherapy session without doubling served as the experimental and control conditions, respectively. A Split-Plot Factorial design (SPF-2.3) was employed with a pretest, posttest and two-week follow-up. Self-acceptance was measured by a form of the Semantic Differential, the Eaton Self-Esteem Bar, and the Similies Preference Inventory. The hypothesis that subjects who receive the doubling condition will show an increase in self-acceptance at the time of the posttest and two-week follow-up was not substantiated. The results were discussed in terms of methodological problems, outcome versus process measures in assessing the effectiveness of the doubling technique and suggestions for future research. It was recommended that future research examining the doubling technique investigate doubling within the context of the psychodrama method and evaluate the
technique's effectiveness in terms of process measures rather than outcome measures.
# TABLE OF CONTENTS

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>LIST OF FIGURES</td>
<td>vii</td>
</tr>
<tr>
<td>LIST OF TABLES</td>
<td>viii</td>
</tr>
<tr>
<td>INTRODUCTION</td>
<td>1</td>
</tr>
<tr>
<td>Problem</td>
<td>1</td>
</tr>
<tr>
<td>Background</td>
<td>5</td>
</tr>
<tr>
<td>Review of Experimental Literature</td>
<td>6</td>
</tr>
<tr>
<td>Concerning Psychodrama</td>
<td>29</td>
</tr>
<tr>
<td>Doubling</td>
<td>29</td>
</tr>
<tr>
<td>Clinical Literature</td>
<td>34</td>
</tr>
<tr>
<td>Experimental Literature</td>
<td>39</td>
</tr>
<tr>
<td>Theoretical Rationale for the Hypothesis</td>
<td>40</td>
</tr>
<tr>
<td>DISCUSSION</td>
<td>41</td>
</tr>
<tr>
<td>Subjects</td>
<td>41</td>
</tr>
<tr>
<td>Measurement</td>
<td>42</td>
</tr>
<tr>
<td>Osgood Semantic Differential</td>
<td>43</td>
</tr>
<tr>
<td>Eaton Self-Esteem Bar</td>
<td>44</td>
</tr>
<tr>
<td>Similies Preference Inventory</td>
<td>44</td>
</tr>
<tr>
<td>Design</td>
<td>46</td>
</tr>
<tr>
<td>Procedure</td>
<td>47</td>
</tr>
<tr>
<td>Experimental Condition</td>
<td>48</td>
</tr>
<tr>
<td>Control Condition</td>
<td>48</td>
</tr>
<tr>
<td>RESULTS</td>
<td>50</td>
</tr>
<tr>
<td>Quantitative Results</td>
<td>50</td>
</tr>
<tr>
<td>Similies Preference Inventory</td>
<td>50</td>
</tr>
<tr>
<td>Eaton Self-Esteem Bar</td>
<td>54</td>
</tr>
<tr>
<td>Semantic Differential</td>
<td>55</td>
</tr>
<tr>
<td>Qualitative Results</td>
<td>55</td>
</tr>
<tr>
<td>DISCUSSION</td>
<td>61</td>
</tr>
</tbody>
</table>
APPENDIX

A. Semantic Differential.............................................. 69
B. Eaton Self-Esteem Bar............................................. 76
C. Similies Preference Inventory................................. 78
D. Subject Orientation Statement................................. 82
E. Interview Orientation Statement............................... 83

REFERENCE NOTE.......................................................... 84

REFERENCES.................................................................. 85
LIST OF FIGURES

1. Mean scores on the Similies Preference Inventory for the control and experimental groups at the pretest, posttest, and follow-up................ 53

2. Mean scores on the Eaton Self-Esteem Bar for the control and experimental groups at the pretest, posttest, and follow-up......................... 56

3. Mean scores on the Semantic Differential for the control and experimental groups at the pretest, posttest, and follow-up......................... 58
LIST OF TABLES

1. Overview of Outcome Research of Psychodrama...... 24
2. Outcome According to Measure...................... 25
3. Distribution of Subjects According to Age, Sex, Year in College, and Previous Counseling Experience.......................... 39
4. Mean Self-Acceptance Score of Control and Experimental Groups on Similies Preference Inventory, Eaton Self-Esteem Bar and Semantic Differential.................................... 51
5. Analysis of Variance for the Similies Preference Inventory.............................................. 52
6. Analysis of Variance for the Eaton-Self-Esteem Bar......................................................... 54
7. Analysis of Variance for the Semantic Differential.......................................................... 57
8. Content of Interviews for Experimental and Control Groups............................................. 59
INTRODUCTION

Problem

The purpose of the present study was to examine the effectiveness in psychotherapy of the specific psychodrama technique of doubling. The purpose of the present section is to provide a background on the formulation of this problem.

In order to understand the problem of the present study, it is necessary to review Moreno's psychodrama method of psychotherapy (Moreno, 1946, 1969). Psychodrama is an action method which employs role-playing by the format, process, and techniques of psychodrama. The psychodrama format includes: (a) the stage or specific area where the action or role-playing takes place, (b) the therapist-director who facilitates the psychodrama enactment, (c) the client-protagonist whose concerns are the focus of the psychodramatic enactment by the group members, (d) the auxiliary ego who play the roles of the significant parts of the protagonist's experience, and (e) the audience or other psychodrama group members (Blatner, 1973; Haskell, 1967; Moreno, 1946, 1969).

The process which is followed in the psychodrama method is: (a) warm-up, (b) action, and (c) sharing
(Blatner, 1973; Haskell, 1967; Moreno, 1946, 1969). The warm-up phase of the psychodrama has the purpose of both physically and psychologically preparing the group members for the enactment. The warm-up may include role-playing or other techniques to help the group members focus upon any present concerns. The warm-up usually culminates in the selection of the protagonist for the action phase. The action phase of the psychodrama is the actual role-playing where the protagonist explores significant concerns in the "here and now." The sharing phase of the psychodrama includes the sharing of similar concerns, experiences, or feelings by the group members with the protagonist.

Zerka Moreno (1965) outlined over 20 techniques that are used in the psychodrama method of psychotherapy. The most frequently used techniques are role reversal, in which the protagonist reverses roles or becomes the significant other person with whom the protagonist is interacting; mirror, in which an auxiliary ego takes the role of the protagonist while the protagonist looks on; soliloquy, in which the protagonist has the opportunity to "think and feel out loud" without having to interact with other persons; future projection, in which the protagonist projects himself in time and space beyond the problem at hand; and the double technique, in which an auxiliary ego plays the part of the protagonist while standing next to the protagonist. The double is considered a part of the
protagonist. However, the double has the opportunity to maximize or exaggerate the verbal and nonverbal messages of the protagonist, be supportive of the protagonist, and interact with the protagonist.

Thus, the psychodrama method of psychotherapy is a complex procedure composed of a variety of facets as outlined above. Most of the experimental research concerning psychodrama has made gross tests of the efficacy of the psychodrama method (Daly, 1961; Harrow, 1951; Haskell, 1957; Herman, 1968; Hubbell, 1973; Maas, 1964; Newburger & Schauer, 1953; Peters & Jones, 1951; Slawson, 1965). Bergin (1971), Kiesler (1971), and Paul (1967) suggest that there is a greater need for specificity in outcome research. This suggestion seems particularly appropriate for research in such a complex area as psychodrama.

In light of the need for specificity it is helpful to see psychodrama as a series of techniques put together in a particular format (stage, director, protagonist, auxiliary, and audience) which follows a standard process (warm-up, action, and sharing). Research on the efficacy of the psychodrama method should be simplified so that the effectiveness of particular techniques, format, and phases of the process can be assessed. The following is a partial list of the specific variables in psychodrama which can be assessed:
I. Techniques
   A. Double
   B. Role Reversal
   C. Future Projection
   D. Mirror
   E. Soliloquy

II. Format
   A. Stage
      1. Physical characteristics
      2. Lighting
   B. Therapist-Director
      1. Age, sex, background
      2. Training
      3. Therapeutic variables (warmth, empathy, genuineness, spontaneity)
   C. Client-Protagonist
      1. Age, sex, background
      2. Presenting problem
   D. Auxiliary Ego
      1. Age, sex, background
      2. Training
      3. Effects of roles played upon auxiliary ego
   E. Audience
      1. Group composition
      2. Size
      3. Effects of psychodrama upon group members

III. Process
   A. Warm-up
      1. Length of time
      2. Type of warm-up
   B. Action
      1. Length of time
      2. Number of scenes
   C. Sharing

It could be argued that to breakdown, isolate, and study specific variables underestimates the necessity for each technique, part of the format and phase of the process to be in the context of the total psychodrama method. A psychodramatist could ask, "How could I do a psychodrama without a warm-up?" Or another could state, "Psychodrama is not psychodrama without role reversal!" However, a full understanding of the effects of each aspect of the
psychodrama method and an understanding of the interaction between each aspect is necessary so that the psychodramatic therapist can have control and better utilize the complex "whole" which is the psychodrama method of psychotherapy.

With regard to the investigation of specific psychodrama techniques, it is possible that some techniques are successful while others are not, with the effect that the impact of the overall method is lessened. Again, to the problem of specificity, the important question is which technique, under which set of conditions, has what type of effect upon whom? Therefore, the problem under consideration in the present study is the isolation of a specific psychodrama technique so that the efficacy of that technique may be assessed.

The investigator's clinical experience and the literature (Blatner, 1973; Fine, 1967; Haskell, 1967; Goldstein, J., 1968; Goldstein, S., 1967; Moreno, 1940, 1952, 1958, 1969; Toeman, 1946, 1948) suggest that the double technique is one of the most frequently used psychodrama techniques. Blatner (1973) considers the double technique "the heart of psychodrama." Considering the importance the double technique has to psychodrama methodology of psychotherapy, the focus of the present study is to examine the effectiveness of the double technique.

**Background**

The purpose of this section is threefold: First, to
examine the experimental literature concerning Moreno's psychodrama (Moreno, 1946); second, to examine more specifically the literature concerning the psychodrama technique of doubling; and third, to present the theoretical rationale for the hypotheses of the present study.

Review of Experimental Literature Concerning Psychodrama

The experimental studies reviewed below are presented chronologically so that the manner in which research on psychodrama has been conceptualized may be seen.

Harrow (1951) studied the effectiveness of psychodrama in the treatment of schizophrenic patients. His rationale was derived from the theoretical position that the ability to take roles is essential to the development of the "social self" and, therefore, related to the total personality. Schizophrenia was considered a maladjustment in which the individual has a poorly developed "social self." Harrow expected that a technique such as psychodrama which emphasizes role-taking action should be effective in increasing the schizophrenic's ability to communicate socially. Therefore, it was hypothesized that (a) increased skills in role-taking behavior, as measured by a role test and Make-A-Picture-Story (MAPS) will be evidenced after 25 psychodrama sessions, and (b) no change in basic personality variables as measured by the Rorschach will occur.

Thirty male subjects, diagnosed schizophrenic, were
selected according to the criteria of inadequate social development, age, and length of stay in the hospital. The subjects were divided equally into two experimental groups and one control group. The experimental groups received 25 psychodrama sessions over a two-month period. The psychodramas were conducted by the experimenter. The control group received no special treatment. Ten subjects were dropped from the study due to administrative transfers and discharges. There was no information presented to determine if subject attrition affected the three groups differently. All subjects were given the Rorschach, the MAPS test, and a role test consisting of eight scales by which three judges rated subject behavior in a role-playing situation. Role-taking ability was inferred from the MAPS test and the Rorschach test. There was an average interjudge reliability correlation coefficient of .90 and .77 on the role test and Rorschach, respectively. Pre- and posttest difference scores were found and analyzed by a t test comparison between experimental and control groups.

The results from only three of the eight scales of the role test were reported. The three scales reported were the Realism scale, which measures realistic perception of the world; Interaction scale, which measures the degree to which the subject interacts with another person in a social situation; and the Spontaneity scale, which measures the subject's amount of spontaneity.
The results showed a statistically significant ($p < .05$) difference on the Realism scale of the Role test for the two combined experimental groups. The other two scales were in the expected direction, but did not reach significance. The MAPS test data dealt with the subject's choice of story figures. At the time of the posttest the experimental groups selected more outgoing story figures than the control group. This difference was at the .10 level of significance. Rorschach records were rated by three judges on the same three scales as the Role test. A significant difference ($p < .05$) was found between the experimental and control groups on the Realism scale.

Harrow reported that the quantitative findings were not conclusive, but suggested that the MAPS test indicated the experimental subjects showed an increase in role-taking ability. Further, it was concluded that psychodrama appeared to be effective in increasing the schizophrenic patient's realistic perceptions of the world and that psychodrama may affect some fundamental personality processes.

However, for several reasons, these conclusions do not seem entirely warranted. First, it is difficult to assess to what extent the Rorschach can validly be used to measure Realism, Interaction, and Spontaneity. The author provided no information concerning how the Rorschach records were
scored. Second, information concerning subject loss and the method of assigning subjects to experimental and control groups was not detailed. It is not known whether the three groups were comparable at the time of the pretest. Third, the author acted as the therapist in the research, which raises the possibility of experimenter bias. And, finally, Harrow used raw-change scores in his analysis. This practice has been questioned by Meltzoff and Kornreich (1970), Thomson (1925), and Thorndike (1924).

Overall, the results are only suggestive that psychodrama helped develop better role-taking skills and a more veridical view of the world in the subjects.

Jones and Peters (1951) studied the effectiveness of psychodrama with Black male subjects suspected of being schizophrenic. Their study was further a test of the validity of performance tests in measuring social adjustment; specifically, the Porteus Mazes and Mirror Tracing test.

Twenty-one hospital patients who were suspected of being schizophrenic and who were not clearly mentally defective were alternately assigned to an experimental and control group. There were ten experimental and eleven control subjects.

Prior to treatment, each subject was administered the Porteus Mazes, the Mirror Tracing test, the Rorschach, and the Draw-a-Person test. Further, four staff members
independently rated each subject on their adjustment to the social environment by use of the Gardner Behavior Chart. The experimental group attended a weekly group psychotherapy session which was conducted by Peters. Psychodrama was the most consistently used therapy in the group. The atmosphere of the group was permissive and spontaneity was encouraged. Most of the psychodrama work was aimed at interpersonal relations on the ward. The size of the psychotherapy group varied from 12-18 patients, all of whom were not in the experiment. The control subjects followed the regular hospital routine.

Three and a half to four months after the first examination each subject was posttested with the same battery of tests cited above. Jones and Peters report some subject loss due to early departures from the hospital and conflicts with hospital routine. There was no information provided to determine if subject attrition affected the two groups differently.

The results indicated no significant differences between the control and experimental groups at the time of the pretest for the mean Porteus Mazes test ages and the mean qualitative Maze scores. Qualitative errors on the Porteus Mazes consist of counting and weighting errors, such as lifting the pencil from the paper and cutting corners. This is in contrast to the quantitative score of the Porteus Mazes which yields a "test age." At the time of the post-
test there were no significant differences between the two groups on the mean Porteus Maze test age. However, there was a significant difference on the mean qualitative Maze scores ($p < .01$) with the experimental group showing a decrease in qualitative errors and the control group showing no change.

At the time of the pretest, six subjects from the experimental group and six subjects from the control group failed the Mirror Tracing test. A failure consisted of taking longer than ten minutes to complete the task or refusing to finish the task after three urgings from the examiner. At the posttesting the experimental group had only two failures, while the control group remained at six failures.

These results were primarily discussed in terms of the sensitivity of performance tests in measuring changes in social adjustment as a result of psychotherapy. Peters and Jones concluded that psychodrama brought about changes in the direction of improved social adjustment and the Porteus Mazes and Mirror Tracing tests were sensitive to these changes. To the extent the Porteus Mazes and Mirror Tracing tests do measure social adjustment, suggestive evidence has been offered that psychodrama increases social adjustment.

Because of an inadequate research design, Jones and Peters (1952) published a subsequent study using basically
the same subjects and data as reported before (Peters & Jones, 1951), but with a different analysis of the results. The authors recognized the weakness in the earlier design that the subjects were not matched on any relevant variables prior to allocation to experimental and control groups. As a result, the initial scores on the Gardner Behavior Chart were different for the experimental and control groups. In light of the fact that subjects were not matched, the authors decided to treat the results by an analysis of covariance which adjusts the variance at the posttest relative to the variance at the pretest. This latter analysis included two additional experimental subjects and one additional control subject.

The results of the Porteus Maze with the addition of three subjects and the new analysis yielded the same results as reported earlier. There was no significant difference on the Porteus in terms of quantitative test age, while a significant difference was found between the control and experimental group on the qualitative maze scores.

With the addition of the three subjects, the Mirror Tracing was analyzed in terms of chi-square. The data was placed in a 2 x 2 contingency table with an experimental-control group versus improved and unimproved scores. Results of the analysis yielded a significant difference with the experimental group showing marked improvement as compared to the control group.
The results of the Gardner Behavior Chart indicated improved ratings in the experimental group and unimproved ratings in the control group. Again, the analysis was performed by an analysis of covariance which yielded a significant F ratio (p < .05). Scores for the analysis of the Gardner Behavior Chart were derived for each subject by taking the average ratings of the four judges. No information was provided as to the consistency or reliability of ratings between judges. Analysis of the Rorschach indicated no reliable change in either group. The agreement between judges was low. Analysis of the Draw-a-Person test showed no significant differences.

The authors report that the difference in the positive and null results of the tests are accountable for in terms of the differences in the reliability of the measures and not in terms of the direction of change. This seems to be a reasonable conclusion since the two instruments that indicated no change were projective tests with fairly low interjudge reliabilities.

To the extent that the Porteus Maze test, Mirror Tracing test, and Gardner Behavior Chart indicate social adjustment, it appears that psychodrama, mixed with discussion, did improve the social adjustment of severely disturbed patients. It is not known whether this effect was carried over into earlier discharge or less recidivism for the experimental group. Follow-up on the lasting effects of
Newburger and Schauer (1953), and in a later publication (Newburger, 1963), report a study with the purpose of assessing the effectiveness of psychodrama and sociometric measurement. Specifically, the study sought to answer two questions: (a) What are the differences in effects of psychotherapy vs. no psychotherapy, and (b) What are the effects of immediate psychotherapy vs. the effects of delayed psychotherapy?

Sixty consecutive admissions to the New Jersey State Reformatory, between the ages 16-25, acted as subjects for this study. After a "get-acquainted" period the subjects were assigned to two groups on the basis of sociometric selection. The first group received group psychotherapy three times a week for a total of 60 sessions, while the other group met in the library and did not receive any psychotherapy. At the end of the 60 sessions, the procedure was reversed; i.e., the first group met in the library and did not receive group psychotherapy and the second group participated in group psychotherapy. The group psychotherapy was a mixture of psychodrama and "interview therapy." Psychodrama was used at periods of "great anxiety."

The measures used to assess change were a sociometric test, the Haggerty-Olson Behavior Rating Schedule, disciplinary reports, and work marks.

The analysis of the results from the sociometric test
was done by observing the sociometric structure of the groups under the various conditions. It was found that group psychotherapy for both groups, vis-a-vis psychodrama and "interview therapy," fostered group cohesion by increasing the number of mutual sociometric choices. However, the authors report an increase in isolation and rejection when therapy was introduced without delay when compared to the delayed psychotherapy group. The scores on the Haggerty-Olson Behavior Rating Schedule showed a "marked increase" for the immediate therapy group, while the delayed therapy group declined on this measure. The statistical significance of this difference was not reported. The disciplinary reports and work marks showed no differences between groups.

The above results suggest that psychodrama improves group cohesion. Also, if the Haggerty-Olson-Wickman Behavior Rating Schedule can be seen as a measure of social adjustment, then it appears that improved social adjustment can be facilitated by a combination of psychodrama and "interview therapy." However, the results of this measure were not assessed statistically. Furthermore, it is not known what is being evaluated in this study: Is it psychodrama or "interview therapy" which yielded these results? Also, the increased group cohesiveness in the group is what one would expect when any group of individuals meet three times per week. Thus, the effectiveness of psychodrama
was not demonstrated by the sociometric test as this type of measurement was confounded with the fact that the subjects met as a group. A placebo control group would have made this experiment a much better evaluation of psychodrama and sociometric procedures.

Haskell (1957) studied the effect of 15 psychodrama sessions upon inmates at Rikeers Island Penitentiary. The psychodrama sessions primarily focused upon role training, with the subjects being asked to play many different roles. The hypotheses tested in this study were that the experimental subjects will: (a) display greater ability to take roles, (b) display greater ability to play roles other than their own, (c) show a greater tendency towards social conformity, (d) show better judgment in social situations, and (e) be better observers of human behavior.

Sixty-six subjects were employed. The subjects were arranged alphabetically and alternately assigned to an experimental or control group. The experimental group was further divided into two psychodrama groups. Three subjects were lost in the experimental group due to one being transferred and two withdrawing on their own request.

A pre-post test design was used with the following instruments employed to measure change: The Human Relations Inventory, an empathy test, the "Judgment in Social Situations" portion of the Social Intelligence Test, the "Observations of Human Behavior" portion of the Social
Intelligenesty Test, and a role test. The role test consisted of three judges independently rating a subject's performance in a specific role-playing situation which was held constant for all subjects. No interjudge reliability was reported. The results showed no significant differences on the role test at the time of the pretest. However, at the time of the posttest there was a significant difference ($p < .02$) between the two groups in favor of the experimental group. None of the other tests showed any significant differences at the posttest. Haskell concluded that psychodramatic role-training sessions increased role-playing skills.

Daly (1961) assessed the effectiveness of psychodrama as a core technique in a milieu therapy program. Both patients and ward attendants participated in the psychodrama sessions. In order to test the effectiveness of psychodrama, four hypotheses were tested: (a) there will be an increase in the mean level of "healthy patient behavior," (b) there will be an increase in patient movement to a convalescent ward or discharge six months after treatment, (c) hospital attendants will show an increase in therapeutic role performance.

The subjects were patients and ward attendants at St. Louis State Hospital. The experimental group consisted of 69 subjects, including both patients and hospital attendants from one ward on the hospital, while the control
group consisted of 77 subjects, including both patients and hospital attendants, from another ward at the hospital. The two groups of subjects were matched on age, length of hospitalization, and diagnosis. The Fergus-Fall L-M Behavior Rating Scale was used to measure changes in "healthy patient behavior," and the Custodial Mental Illness Ideology Scale was employed to measure changes in therapeutic role performance on the part of the hospital attendants.

The results supported the first two hypotheses at the .01 level of confidence and the third hypothesis at the .05 level of confidence. The Custodial Mental Illness Ideology Scale showed no significant differences for the hospital attendants.

Daly concluded that psychodrama as a core technique in a milieu therapy program: (a) increased healthy patient behavior, and (b) increased the rate of discharge and movement to convalescent wards.

However, it is difficult to determine whether these results are due to the psychodrama treatment since the experimental and control groups were from different wards of the hospital. It is not known whether the subjects received the same treatment in their regular hospital routine, let alone whether bias was present in their ratings.

Maas (1964), as a part of a larger study concerned with the development of ego identity as opposed to ego diffusion,
studied the effects of 26 psychodrama sessions upon female inmates who were diagnosed "sociopathic." It was hypothesized that psychodrama would increase ego consolidation in women with behavioral disorders.

The subjects were 46 women with behavioral disorders at the California Institution for Women. Both the experimental and control groups consisted of 23 subjects. The experimental group received 26 psychodrama sessions, while the control group received no special treatment. Both groups were given an ego identity scale before and after treatment.

The results indicated no differences between groups at the time of the pretest. However, at the time of the posttest the experimental group increased the mean score level of the ego identity scale so that the difference between the two groups was significant. Maas concluded that these results indicated that the experimental subjects showed an increase in identity consolidation when compared to control subjects. However, Maas cautions that the conclusion that psychodrama is an effective therapeutic technique is only tentative due to the limited nature of the investigation's focus on psychodrama, and that the results deserve further investigation.

Slawson (1965) evaluated a psychodrama program at the UCLA Neuropsychiatric Institute. An experimental group and control group of 27 patients each were matched on MMPI profiles, age, and sex. Each patient was given the MMPI at
the time of admission and discharge. The experimental condition consisted of psychodrama and individual therapy, while the control condition consisted only of individual therapy. Over a two-year period, 60 subjects participated in the psychodrama program. However, only 27 of these had valid pretest and posttest MMPI's. No information was provided on the validity of control group's MMPIs. The results showed that the mean change for both groups was toward the "normal" or nondeviant levels. There were no significant differences between the experimental and control groups on any of the MMPI scales. Slawson concluded that psychodrama was ineffective. However, what the results really indicate is that psychodrama is no more effective than individual psychotherapy. In reference to previous claims in favor of psychodrama, Slawson (1965) states that enthusiasm, however well intended, cannot compensate for defective methodology and inadequate data.

In looking closely at this study, it appears that it, too, can be included as a study with defective methodology. Both groups were tested at the time of admission and at the time of discharge. When a patient is discharged it usually means that there is improvement or that the patient has changed toward a less deviant direction. This is exactly what the MMPI measured. Meltzoff and Kornreich (1970) summarize this point by saying, "The assessment of efficacy in this study was equivalent to comparing two drugs for treating
patients hospitalized for the flu and testing all patients at the time of discharge." The posttest should have been administered at a fixed interval of time or discharge rates compared.

Herman (1968) studied the effectiveness of psychodrama over a two-month period in a training school setting. Four groups of a dozen boys each were selected randomly out of 100 consecutive admissions. Membership in the groups was voluntary. The boys functioned as auxiliary egos and doubles which are roles normally assumed by professionals. The boys in the psychodrama group tended toward a shorter length of stay at the school than the control group subjects, but this difference was not statistically significant. Statistically significant results were found in the number of "honor role" students and the number of "serious infractions of the rules." Both results favored the psychodrama group.

Hubbell (1973) studied the effectiveness of group counseling and psychodrama at the prerelease center for men, Mississippi State Penitentiary. The purpose of the study was to determine if significant differences in personal characteristics,* as measured by the Kahn Test of Symbol Arrangement, occurred when groups of inmates

*This study is cited from a dissertation abstract. The full dissertation was not available; therefore, the term "personal characteristics" cannot be further defined.
received: (a) group counseling, (b) group counseling and psychodrama, and (c) no treatment. Also, recidivism rates were compared between the three groups after a 90-day follow-up period. Each group was tested immediately before (t1) and after (t2) the treatment, and 90 days (t3) after the end of the treatment.

An ANOVA design was employed to assess the changes on the Kahn Test between t1 and t2. The analysis of changes between t1 and t3 was performed by chi-square. The results indicated there were no changes on the Kahn Test at either t1 or t3 and that there were no differences in the recidivism rates between the three groups.

It can be concluded that neither psychodrama with group counseling or group counseling alone affected changes in personal characteristics or recidivism rate. However, this conclusion must be attenuated since the design does not offer an adequate evaluation of psychodrama. It is possible that psychodrama was effective while the interaction of psychodrama and group counseling was not effective with the overall effect of null results. Despite this limitation, this study did control for a factor not controlled for in the other research reviewed above. The control group consisted of group counseling which controlled for the effects of group membership. This is important since the nonspecific factors of being in a group may be therapeutic in itself and not the "treatment,"
i.e., psychodrama.

Table 1 summarizes the studies reviewed above concerning the experimental literature in psychodrama. The population, measures and results are presented for each study. There were 25 different measures used to assess the effects of psychodrama. In Table 2 these measures are organized into three categories: (a) personality measures, e.g., Rorschach, Draw-a-Person, MMPI, etc.; (b) interpersonal or social adjustment measures, e.g., sociometric measures, Human Relations Inventory, etc.; and (c) interpersonal or social adjustment as assessed by performance or observations, e.g., work marks, Role test, behavior ratings, etc.

Considering all of the above studies and measures employed, the outcome is mixed. The personality measures indicated more negative results concerning the effectiveness of psychodrama than positive results, while the behavioral measures indicated more positive than negative results. Overall, it can be concluded that only suggestive evidence, at best, has been offered concerning the efficacy of the psychodrama method of psychotherapy.

However, the above conclusion is tempered by serious methodological problems. There are three classes of problems: (a) problems in measurement, (b) problems in experimenter bias, and (c) problems in design.

The studies with personality measures such as the
<table>
<thead>
<tr>
<th>Authors</th>
<th>Date</th>
<th>Population</th>
<th>Measures</th>
<th>Outcome</th>
</tr>
</thead>
<tbody>
<tr>
<td>Harrow</td>
<td>1951</td>
<td>Schizophrenics</td>
<td>Role Test, MAPS Test, Rorschach</td>
<td>Pos.</td>
</tr>
<tr>
<td>Peters &amp; Jones</td>
<td>1951</td>
<td>Schizophrenics</td>
<td>Porteus Mazes, Mirror Tracing</td>
<td>Pos.</td>
</tr>
<tr>
<td></td>
<td>1952</td>
<td>&amp; Post-Lobotomy Patients</td>
<td>Rorschach, Draw-a-Person, Gardner Behavior Chart</td>
<td>Pos.</td>
</tr>
<tr>
<td>Newburger</td>
<td>1953</td>
<td>Inmates</td>
<td>Sociometric Test</td>
<td>Pos.</td>
</tr>
<tr>
<td>Haskell</td>
<td>1957</td>
<td>Inmates</td>
<td>Work Marks, Role Test, Human Relations Inventory, Empathy Test, Judgment in Social Situations, Observations of Human Behavior</td>
<td>Neg.</td>
</tr>
<tr>
<td>Daly</td>
<td>1961</td>
<td>Hospital Patients &amp; Attendants</td>
<td>Behavior Rating Scale, Movement to Convalescent Ward, Mental Illness Ideology Scale</td>
<td>Pos.</td>
</tr>
<tr>
<td>Maas</td>
<td>1964</td>
<td>Female Inmates</td>
<td>Ego Identity Scale</td>
<td>Pos.</td>
</tr>
<tr>
<td>Slawson</td>
<td>1965</td>
<td>Hospital Patients</td>
<td>MMPI</td>
<td>Neg.</td>
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</tbody>
</table>
Table 1, continued

<table>
<thead>
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<th>Authors</th>
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<th>Population</th>
<th>Measures</th>
<th>Outcome</th>
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<tbody>
<tr>
<td>Herman</td>
<td>1968</td>
<td>Training School Boys-Delinquent</td>
<td>Length of Stay, Honor Role, Serious Infractons</td>
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</tr>
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<td></td>
<td></td>
<td></td>
<td></td>
<td>Pos.</td>
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<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Pos.</td>
</tr>
<tr>
<td>Hubbell</td>
<td>1973</td>
<td>Inmates</td>
<td>Kahn Test of Symbol Arrangement, Recidivism Rate</td>
<td>Neg.</td>
</tr>
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Table 2
Outcome According to Measures

<table>
<thead>
<tr>
<th>Measures</th>
<th>Outcome</th>
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<tbody>
<tr>
<td></td>
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<tr>
<td>Social Adjustment Measures</td>
<td>3</td>
</tr>
<tr>
<td>Social Adjustment Measures (Behavioral)</td>
<td>8</td>
</tr>
</tbody>
</table>
Rorschach and MAPS (Harrow, 1951; Jones & Peters, 1952) reported low interjudge reliability for the ratings. Also, the studies which employed behavior ratings did not report whether or not the ratings were blind. Furthermore, the appropriateness of some of the measures can be questioned. Specifically, it is difficult to see how the Porteus Mazes and Mirror Tracing Test, despite the author's rationale, are appropriate measures of change due to psychotherapy. Finally, few of the studies reviewed clearly delineated the rationale for the expected changes and how the expected changes are related to the measures employed.

The possibility of experimenter bias in the studies reviewed exists due to the fact that the experimenter often acted as the therapist-director in the experimental groups. Furthermore, in the studies which did not explicitly mention the experimenter as the therapist, no mention was made of who the therapist was. This information is important so that the background, orientation, and experience of the therapist can be assessed. The issue of experimenter bias is important since there have been studies which indicate that the experimenter may unconsciously influence the results in the desired direction (Rosenthal, 1966).

The problems of design follow several lines. First, the treatment assessed in several studies combined
psychodrama with some other form of therapy, e.g., "interview therapy" (Newburger & Schauer, 1953), individual therapy (Slawson, 1965), group counseling (Hubbell, 1973). In these studies it is not known whether psychodrama or a combination of psychodrama with another form of therapy yielded the results. Second, several studies employed inappropriate or questionable data analysis (Harrow, 1951; Peters & Jones, 1952; Newburger & Schauer, 1953). Third, Slawson's (1965) study did not measure the effects of the treatment as a result of testing at the wrong times. Fourth, lack of follow-up measures is a serious shortcoming in the studies reviewed. Only two studies (Daly, 1961; Hubbell, 1973) had any type of follow-up after posttesting. Were the changes lasting or were the effects of the treatment apparent at a later time. Finally, only one study (Hubbell, 1973) controlled for such nonspecific effects or "Placebo effects" (Shapiro, 1971) as group membership, subjects believing that the treatment is supposed to be helpful.

The results reported in the studies reviewed and the conclusion that only suggestive evidence has been offered concerning the efficacy of the psychodrama method is similar to the conclusions of other reviews of the experimental literature of psychotherapy in general (Bergin, 1971; Truax & Carkhuff, 1967). However, these results and conclusions contradict the clinical literature (Moreno, 1946;
Parrish, 1959; Haskell, 1967; Blatner, 1973) which strongly suggest that psychodrama does, in fact, effect personality and behavior change. Further, filmed psychodrama sessions (Moreno, 1965, 1966) indicate that intense emotions arise during psychodrama sessions. Truax and Carkhuff note this seeming paradox of a "powerful clinical phenomenon lacking measurable consequences" (Truax & Carkhuff, 1967, p. 18).

For Truax and Carkhuff (1967), and Bergin (1971), the answer to this paradox is the inappropriateness of comparisons between psychotherapy and a control group consisting of no therapy. They argue that psychotherapy is hardly a unitary phenomenon. It is argued here that the psychodrama method, given its flexibility and complexity, is also not a unitary phenomenon. As employed, psychodrama and psychotherapy in general contain a variety of conditions which may have both negative and positive effects. Comparing an unspecified treatment containing numerous random variables with a control condition is hardly an appropriate way to assess the effects of psychotherapy or psychodrama.

Further, a "two-way effect of psychotherapy" has been suggested, i.e., psychotherapy can be harmful, as well as helpful. Bergin (1971) offers ample evidence of a deterioration effect as a result of therapy. This two-way effect obscures the fact that change does take place
as a result of psychotherapy. What has been found (Bergin, 1963, 1966) is that there are differences in the variability of outcome between psychotherapy and nonpsychotherapy subjects. This finding is important since it indicates that psychotherapy is powerful and that it can have both negative and positive effects. This opens the question, "Which aspect of psychotherapy causes positive changes for whom?"

With regard to the studies reviewed above concerning psychodrama, it is suggested that psychodrama is a nonunitary phenomenon, i.e., there is variability among therapists, subjects, and procedures employed, and that combing the results of all the studies does not answer the question, "Is psychodrama effective?" Further, there is no way to determine from the reports of these studies whether psychodrama was harmful for some subjects. It is possible that for the measures that indicated null results there were some subjects who improved and there were some subjects who deteriorated.

Doubling

Not only have investigators focused upon the global phenomenon of psychodrama; they have also investigated more specific techniques in the psychodrama method. The purpose of this section is to report the clinical and experimental literature concerning the technique of doubling.

Clinical literature. The double technique in
psychodrama consists of an auxiliary ego playing the inner self of the protagonist. The auxiliary ego is placed on the stage next to the protagonist and takes on the physical posture, manner, and attitude of the protagonist. The double then becomes the protagonist. The double is then in the position to represent and express all the feelings of the protagonist, if the situation warrants it. The protagonist may converse with the double, or actually interact with himself—in other words, the double. A trained auxiliary ego usually plays the part of the double, although in many cases a member of the audience may be the double (Blatner, 1973; Haskell, 1967; Moreno, 1958; Toeman, 1946, 1947).

Toeman (1946, 1947) reports that the main purpose of the double is to stimulate the protagonist so that the protagonist explores and confronts various feelings. However, it is important that the double does not challenge or push the protagonist to the point of endangering the relationship with the protagonist. Another function of doubling, according to Toeman, is supporting the protagonist. Since the double is the protagonist and can willingly express the fullest range of feelings, the protagonist does not feel alone, but rather supported knowing there is someone entirely like himself. According to Toeman, the relationship between the protagonist and the double is important. There must be a two-way mutual relationship
which may, in part, be characterized by unconditional acceptance and empathy. Toeman reports that this relationship is at times so close that the protagonist "loses the feeling that the double is another" (Toeman, 1947).

Haskell (1967) reports the main objectives of the double technique are: (a) to help the protagonist express thoughts or feelings which are unexpressed or distorted, (b) to stimulate the protagonist to review different attitudes and feelings held by the protagonist, and (c) to encourage the protagonist to review his relationships with others and explore alternative solutions to problems. One way the double may help clarify the protagonist's thoughts and feelings is to express the feeling of the protagonist, at first on a mild level; then escalate the feeling to an extreme level so that the protagonist can either accept or reject the full range of expression and better understand and experience the full intensity of the feeling.

The literature cited above and the investigator's clinical experience suggest that the characteristics of the double are as follows: Warmth and unconditional acceptance of the protagonist is shown by the double; there is a mutual two-way relationship which is characterized by a nonjudgmental attitude and empathic understanding of the protagonist's phenomenological field. Further, the double is willing to express all feelings of the
protagonist, both acceptable and unacceptable, verbally or nonverbally. The feelings expressed by the double are never pushed upon the protagonist, but rather the protagonist has the freedom to either accept or reject the double's message.

The actual behavior of the double primarily consists of "being with" and feeling along with the protagonist, as mentioned above. However, once the relationship between the protagonist and double has been established the double may do a number of things:

(a) **Amplification.** An example of this type of doubling occurred in a college psychodrama group when the protagonist told her mother, "You fouled me up." The double responded by saying, "Damn it, you really hurt me!" At this point, the protagonist began to express the more intense feelings.

(b) **Verbalizing the nonverbal message of the protagonist.** Example: The protagonist was talking to his employer about a raise in pay. The protagonist's posture was slouched, he was hesitant, and spoke in a shaky voice. The double responded by saying, "You're making me nervous. I'm afraid of you." The protagonist began to express these feelings verbally.

(c) **Support.** An example of this type of doubling is when the double reinforces the protagonist's right to express a feeling. This may involve the double repeating
what the protagonist has said, or perhaps even a simple, "Yeah, that's right!" With this type of doubling, the protagonist becomes aware that he is not alone in his feeling.

(d) **Divided and multiple doubles.** Many times in psychodrama and psychotherapy, in general, the protagonist experiences many different, perhaps contradictory, feelings at the same time. The divided double is one double representing a specific feeling, attitude, or part of the protagonist. The multiple double represents two or more specific feelings of the protagonist. In this case, there is a double for each feeling or attitude which is to be represented. This type of doubling helps the protagonist concretize and differentiate what is being experienced. This type of doubling is usually used with the reversed-roles technique. The protagonist reverses roles with the various parts of himself.

(e) **Opposition.** This type of doubling is used to help the protagonist more accurately symbolize a particular feeling. In this case, the double expresses the opposite of the protagonist's stated feeling. Example: The protagonist, a young male college student, was having difficulties with his girl friend. In one scene he was telling her, "I can do without you!" The double responded, "But I really love you and need you." At this, the protagonist began to cry and express these feelings. Although this
type of doubling can be very effective, it must be used with caution. There must be a good relationship between the protagonist and the double, and the opposite feeling must never be pushed upon the protagonist if it is rejected.

In summary, the psychodrama technique of doubling is considered to be a very important and useful technique. Specifically, the double is an auxiliary ego who plays the role of the unexpressed or inner part of the protagonist. The relationship between the double and the protagonist must not be perceived as being threatening by the protagonist. Rather, the relationship should be a mutual, two-way relationship based upon empathy, acceptance, and genuineness. The double technique has been found to be helpful in that the protagonist: (a) becomes more expressive, (b) becomes more aware of various feelings, (c) feels less alone and more self-acceptance, and (d) develops more accurate symbols for his feelings.

Experimental literature. The experimental studies concerning doubling (Fine, 1967; J. Goldstein, 1968; S. Goldstein, 1967) meet the requirements of specificity in psychotherapy outcome research as outlined previously. However, little attention has been shown in experimentally studying the effects of doubling.

Fine (1967) studied the difference in perception between two therapist positions in psychodrama: the
director and the double. The double in psychodrama has an experiencing perceptual set; in other words, the double in psychodrama experiences the protagonist's feelings and his phenomenological field. Further, the double exactly imitates the protagonist. On the other hand, the director in psychodrama is objective and attempts to evaluate the protagonist's position. Also, the director observes what is going on. These differences in perception were analyzed along two separate dimensions: Objectivity and Activity.

For the Objectivity dimension, the subjects were placed in either an evaluative-objective perceptual set, which corresponds to the set of the director, or an experiencing-subjective perceptual set, which corresponds to the set of the double. For the Activity dimension, the subjects were either passively observing, which corresponds to the activity of the director, or exactly imitating, which corresponds to the activity of the double. In this case, the subjects were either observing or imitating a model acting like an anxious patient.

A randomized block factorial design was used with Activity and Objectivity representing the two primary factors. One hundred and sixty psychology students from four different classes served as subjects and participated in the experiment by either observing or imitating a model acting like an anxious patient. Subsequently, they made up a story in response to ambiguous stick figures. Subjects
were scored on their stories according to the number of words, self references, references to other people, objective descriptions, and the use of emotional expressions.

The results indicated that the physical activity and perceptual set of the subjects influenced ($p < .05$) his perceptions as measured by the written responses to the stick figures. Specifically, it was found that the subjects who imitated attended to themselves, i.e., had more self references, than the subjects who observed. Furthermore, the perceptual set of the subjects determined the degree to which the subjects were able to use information from internal and external sources; that is, the subjects who were objective reported more objective act descriptions than the subjects who had a subjective perceptual set.

These results indicate that a greater band of perceptual information may be supplied in psychodrama when there is both a director who is objective and observing and a double who is subjective and imitating.

J. Goldstein (1968), and in a similar study (S. Goldstein, 1967), studied the verbal behavior of 30 extremely withdrawn psychiatric patients in response to doubling. It was believed that the technique of doubling facilitated a feeling of "belonging" for those patients who received doubling. It was predicted that doubling would increase both the frequency (Units) and duration (Action) of verbal behavior in subjects who were extremely withdrawn.
The study employed three groups of ten subjects each. Subjects were matched across groups according to age, sex, diagnosis, and education. The measures used to assess change in verbal behavior were frequency and duration of subject's verbal behavior. These measures were abstracted from tape recordings of the therapy sessions. S. Goldstein (1967) reports that these measures are both reliable and valid personality measures.

Each group received five therapy sessions without doubling to establish a baseline of verbal behavior. Beginning with the sixth session, two groups received doubling, and one group served as a control group and did not receive doubling. The data was considered under five conditions: (a) control group, (b) doubling for 35 sessions, experimental group 1, (c) doubling for 35 sessions with acquiescence and denial of the double excluded, i.e., the subjects conversation with the double was excluded, experimental group 2; (d) doubling for 15 sessions, experimental group 1; and (e) doubling for 15 sessions with acquiescence and denial excluded.

The analysis of variance showed significant results ($p < .01$) for both frequency and duration of subject's verbal behavior for conditions "d" and "e" above. There was also evidence of a further increase in verbal behavior when doubling was extended to 35 sessions, but the differences between the experimental and control groups were
not statistically significant. When doubling was discontinued, both frequency and duration showed an initial decrease. The decrease was followed by an increase in verbal behavior so that at the end of the study the experimental groups were still higher in verbal behavior than the control group.

It was concluded that doubling helped increase the verbal behavior of withdrawn psychiatric patients to the point that therapy may become effective.

Both of these studies reviewed above consider the effects of doubling under specific conditions. The results of Fine's study are important from the point of training psychodrama directors and doubles. The double is instructed to "get into the feelings of the protagonist." This usually allows the protagonist to either confirm or deny certain feelings in an atmosphere which is not threatening. The double technique then serves as a method to reinforce self-expression and self-exploratory behavior. Further, this study is relevant to the methodological question as to whether the director should serve as the double or if another person should play this role. It is clear from Fine's study that the perceptions of the director will be different than the double who has a different perceptual set.

Goldstein's investigation of doubling is also important from the point of view of training. The double is a
technique which is used a great deal by some practitioners and not at all by others. It appears that the results of this study favor the position that doubling should be used if an increase in verbal behavior is a goal of the therapy.

Theoretical Rationale for the Hypothesis

The basis for the expectations of this study that doubling will lead to positive outcome in psychotherapy is derived from Rogers' (1957, 1961) theory about the nature of the therapeutic relationship. For Rogers, the therapeutic relationship is characterized by warmth, acceptance, empathic understanding, and genuineness (Rogers, 1957). The nature of the doubling technique and the relationship between the double and the protagonist, as described previously, suggests that the technique of doubling does promote the conditions as described by Rogers.

Like Rogers, Moreno (1959) considers the therapeutic relationship to be an important element in positive outcome in psychotherapy. The therapeutic relationship for Moreno is characterized by "tele," a term coined by Moreno which indicates communication at a distance. "Tele" consists of mutual empathy, unconditional acceptance, and genuineness. The relationship between the double and protagonist in psychodrama is based upon "tele."

Rogers' theory (1961) predicts that when a person is in such a relationship, as described above, changes will
occur. It is when the double accepts all the protagonist's feelings that the protagonist is able to receive all the internal communications or feelings which may have been denied, repressed, or unaccepted. The protagonist begins to listen acceptantly to these feelings when the double unconditionally accepts the protagonist. In this manner, the protagonist slowly begins to take a more self-acceptant attitude. Rogers' concept of an empathic relationship and Moreno's concept of "tele" would lead one to predict that the doubling experience, like Rogers' empathic relationship and Moreno's "tele" relationship, would lead to positive outcome in psychotherapy.

**Hypothesis.** The nature of the doubling technique and the theoretical rationale presented above lend support for the following hypothesis: Subjects who receive the doubling technique will show an increase in self-acceptance following the doubling experience.
METHODOLOGY

Subjects

The subjects for the present study were volunteers from eight different undergraduate psychology classes at California State College, San Bernardino. Any student was allowed to participate in the study with the exception of those students who were involved in group or individual psychotherapy at the time of the study. A total of 20 students, half males and half females, participated in the study. Students were randomly assigned to either an experimental or control group, controlling for equal number of males and females in each group.

As can be seen in Table 3, the experimental group subjects were slightly older than the control group subjects. There were no substantial differences in the average year in college between the two groups. Both groups had two graduate students in psychology who were enrolled in undergraduate classes. There were more subjects in the experimental group who had previously participated in psychotherapy than in the control group. The ethnic composition of the two groups was primarily White, with only one Chicano student in each group. The implications of the above differences will be discussed later.
Table 3

Distribution of Subjects According to Age, Sex, Year in College, and Previous Counseling Experience

<table>
<thead>
<tr>
<th>Item</th>
<th>Groupa</th>
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<tr>
<td></td>
<td></td>
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<tr>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Age</strong></td>
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</tr>
<tr>
<td>Mean</td>
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<td><strong>Year in College (Mean)</strong></td>
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<tr>
<td><strong>No. Subjects with Previous Counseling</strong></td>
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</tr>
</tbody>
</table>

aEach group consists of ten subjects.

**Measurement**

Self-acceptance is defined in the present study in three ways: (a) the degree of congruity between the subject's perception of their ideal and actual self, as measured by the Semantic Differential (Osgood, Suci, & Tannenbaum, 1957), (see Appendix A), (b) the rating on the Eaton Self-Esteem Bar (Eaton, Note 1), (see Appendix B), and (c) the preference for variety and novelty, as measured by the Similies Preference Inventory (SPI), (Pearson & Maddi, 1966), (see Appendix C).
Osgood Semantic Differential

The subjects were asked to rate the concepts "Myself" and "Myself as I'd Like to be" on nine bipolar scales, using Osgood's Semantic Differential technique (Osgood et al., 1957). The subjects rated three additional concepts ("A Person," "A Man," "A Woman"), which were placed between the self and ideal self concepts so the subjects would not remember how they rated the first concept.

Through factor analytic studies by Osgood and Suci (1952), three factors have been isolated. The factors and scales used in the present study are as follows: An evaluative factor represented by the scales valuable-worthless, happy-sad, and important-unimportant; a potency factor represented by the scales shallow-deep, large-small, and strong-weak; an activity factor represented by the scales hot-cold, active-passive, and fast-slow.

Using the concept of a three dimensional semantic space (Osgood et al., 1957), the distance between the self and ideal self concepts was found for each subject. The distance was found by the D measure of profile similarity, where $D$ is the square root of the sum of the squared deviations between the same factors on the ratings of the two concepts (Cronbach & Gleser, 1953; Osgood & Suci, 1952). This $D$ measure was the measure of congruity between the self and ideal self. The smaller the distance, the greater is the congruity or self-acceptance. The
semantic differential technique has been used in psychotherapy research by Endler (1961) and Luria (1959).

**Eaton Self-Esteem Bar**

The Eaton Self-Esteem Bar (Eaton, Note 1) is a ten-inch vertical bar where the subject must draw a line across the bar to indicate how close he feels he is to being the type of person he wants to be, or would like to be. The top of the bar indicates the subject feels he is "100 percent similar" to the type of person he would like to be. The bottom of the bar indicates that the subject feels he is "100 percent opposite" to being the type of person he would like to be. The midpoint, five inches from the bottom, is marked "0%.'

The subject's mark across the bar is measured in inches (accurate to one-tenth of an inch) from the bottom of the bar up. In a study involving college students, Eaton found a correlation of $r = .84$ ($n = 30$) between the Eaton bar and the Butler-Haigh Q Sorts (Butler & Haigh, 1954).

**Similises Preference Inventory**

The Similises Preference Inventory (SPI) is a different type of measurement of self-acceptance, in that the SPI is a measure of preference for variety and novelty. The relationship between novelty and self-acceptance is inferred from Rogers' theory of creativity (Rogers, 1961).
By creativity, Rogers means novelty or newness of a product and the tendency to explore new and unusual stimuli. For Rogers (1959, 1961), this process implies the individual must be open to experience and have an internal locus of evaluation. That is, the individual must be open to, and accepting of, various feelings and thoughts which arise within the self. Therefore, the SPI was used in this study as an indirect, process measure of self-acceptance.

The SPI consists of 40 similies. The stem of each similie (e.g., Limp as ___) has five endings, one of which is to be endorsed by the subject. All of the similies have the same type of endings, in that each similie has the usual ending completing the familiar similie (e.g., Limp as a ___rag); the substitute ending, which is similar to the usual ending (e.g., Limp as a ___towel); the remote ending, which contains some of the meaning of the usual ending (e.g., Limp as a ___busted blimp); the opposite ending, which opposes the intended meaning (e.g., Limp as a ___dish); and the nonsense ending, which is not meaningful (e.g., Limp as a ___lump). The score assigned to each similie ranged from zero, if the usual ending was chosen; one to four, if the nonsense ending was chosen. The higher the total score for all the similies, the greater was the tendency for variety and more self-acceptance.
Design

A Split-Plot Factorial design (SPF-2,3) with the subjects acting as their own control (Kirk, 1968), was employed to analyze the results. Treatment A had two levels: \( a_1 \) = interview with doubling (experimental group), and \( a_2 \) = interview without doubling (control group). Treatment B had three levels corresponding to the three observations: \( b_1 \) = pretest, \( b_2 \) = posttest, and \( b_3 \) = two-week follow-up.

The theoretical hypothesis of the present study that doubling will increase self-acceptance was tested by the following research hypotheses:

1. There will be a greater increase in self-acceptance as measured by the: (a) Eaton Self-Esteem Bar, (b) Similies Preference Inventory, and (c) Semantic Differential immediately after \( b_2 \) a one-hour psychotherapy interview for subjects who receive doubling \( a_1 \) than for subjects who do not receive doubling \( a_2 \).

2. There will be a greater increase in self-acceptance as measured by: (a) the Eaton Self-Esteem Bar, (b) Similies Preference Inventory, and (c) Semantic Differential two weeks after \( b_3 \) a one-hour psychotherapy interview for subjects who receive doubling \( a_1 \) than for subjects who do not receive doubling \( a_2 \).

These hypotheses were evaluated by statistical tests (F test) of the null hypothesis of a significant interaction.
effect (AB) at \( b_2 \) and \( b_3 \) between the two treatments for each of the three measures. The level of significance adopted for these tests was .05.

**Procedure**

Twenty students from eight different undergraduate psychology classes at California State College, San Bernardino, were invited to participate in a one-hour interview in which they would have the opportunity to "explore any present concerns." It was explained to the volunteers that this was a part of a research project. Further, the volunteers were informed that they would be requested to take several psychological tests, and that the results of these tests and the interview would remain confidential.

The subjects were randomly assigned to either a control or experimental group, controlling for equal number of males and females in each group. All interviews were conducted within a two-week period, with five control subjects and five experimental subjects participating each week.

The investigator read an orientation statement (see Appendix D) to each subject before the pretesting. The order of the presentation of the tests was randomly determined to control for any carry-over effects from one test to another. The testing time ranged from 20 to 45
minutes. After the pretesting, the subjects were allowed a ten-minute break.

A first-year male graduate student in the Clinical Counseling program at California State College, San Bernardino, conducted all of the interviews. The interviewer characterized his approach to counseling as "basically Rogerian in nature." Audio tape recordings of the interviews tend to support this. The interviewer was aware of the hypothesis of the present study.

**Experimental Condition**

At the beginning of the interview the investigator read an interview orientation statement (see Appendix E), after which the interviewer stated, "We have an hour together where we can talk about anything which may be of concern to you." The investigator acted as the double for the experimental condition. The behavior and technique of the double was as described in Chapter 1 of this study. There were no deviations from the manner in which doubling is usually done in psychodrama.

**Control Condition**

At the beginning of the interview the investigator stated, "As a part of this research, I will be present during your interview." The interviewer then made the same statement as in the experimental condition. During the interview the investigator did not say anything, nor did
he do anything. At the end of the one-hour session, the interviewer thanked the subject for participating in the interview. Subjects from both groups were thanked for participating.

After the interviews both the experimental and control subjects took a ten-minute break, after which they did the posttesting. Again, the order of the presentation of the tests was randomly determined. When the posttesting was completed, the investigator asked each subject if he could return in two weeks. All of the subjects returned exactly two weeks later for the follow-up testing. The follow-up consisted of taking the three tests again. At this time, the investigator informed the subjects of the nature of the research.
RESULTS

A Split-Plot Factorial (SPF-2.3) analysis of variance, with treatment and time of testing as the main effects, was separately applied to the Similies Preference Inventory, Eaton Self-Esteem Bar, and Semantic Differential. None of the three analysis yielded significant F ratios (p > .05). There were no statistically significant differences between the experimental and control groups at any of the three testings for the three measures employed. The specific results are considered below in relation to the quantitative data collected from the three measures employed and qualitative results.

Quantitative Results

Table 4 shows the means, standard deviations and ranges for the three measures at the time of the pretest, posttest, and follow-up for the control and experimental groups.

Similies Preference Inventory

The analysis of variance for the Similies Preference Inventory did not yield significant F ratios (p > .05) for the type of treatment, period of time or interaction between treatment and time (see Table 5). The Fmax test
### Table 4

Mean Self-Acceptance Scores of Control and Experimental Groups on Simililies Preference Inventory, Eaton Self-Esteem Bar, and Semantic Differential

<table>
<thead>
<tr>
<th>Measure</th>
<th>Control Group</th>
<th>Experimental Group</th>
<th>Time of Testing&lt;sup&gt;a&lt;/sup&gt;</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>b1</td>
<td>b2</td>
<td>b3</td>
</tr>
<tr>
<td><strong>SPI</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>M</td>
<td>34.9</td>
<td>32.4</td>
<td>37.9</td>
</tr>
<tr>
<td>SD</td>
<td>32.1</td>
<td>31.4</td>
<td>32.4</td>
</tr>
<tr>
<td>Range</td>
<td>8-102</td>
<td>8-99</td>
<td>6-103</td>
</tr>
<tr>
<td><strong>ESEB</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>M</td>
<td>7.64</td>
<td>7.48</td>
<td>7.84</td>
</tr>
<tr>
<td>SD</td>
<td>1.74</td>
<td>1.75</td>
<td>1.29</td>
</tr>
<tr>
<td>Range</td>
<td>3.0-9.2</td>
<td>3.2-9.2</td>
<td>5.5-9.4</td>
</tr>
<tr>
<td><strong>Sem Dif</strong>&lt;sup&gt;b&lt;/sup&gt;</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>M</td>
<td>4.87</td>
<td>4.46</td>
<td>3.21</td>
</tr>
<tr>
<td>SD</td>
<td>2.60</td>
<td>3.10</td>
<td>2.33</td>
</tr>
<tr>
<td>Range</td>
<td>1.0-8.2</td>
<td>1.4-11.0</td>
<td>1.0-7.1</td>
</tr>
</tbody>
</table>

Note.  n = 10 for both experimental and control groups.

<sup>a</sup><sub>b1 = pretest, b2 = posttest, and b3 = follow-up.</sub>

<sup>b</sup><sub>Low score indicates more self-acceptance.</sub>
of the assumption of homogeneity of variances did not yield a significant $F_{max}$ ($p > .05$) for the Subject Within Group or $B \times \text{Subject Within Group}$ error terms.

Table 5

SPF-2.3 Analysis of Variance for the Similies Preference Inventory

<table>
<thead>
<tr>
<th>Source</th>
<th>SS</th>
<th>df</th>
<th>MS</th>
<th>F</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Between Subject</td>
<td>49488.31</td>
<td>19</td>
<td>2694.67</td>
<td>.365</td>
</tr>
<tr>
<td>2. A (Type of Treatment)</td>
<td>984.15</td>
<td>1</td>
<td>984.15</td>
<td>.365</td>
</tr>
<tr>
<td>3. Subject With-in Group</td>
<td>48504.16</td>
<td>18</td>
<td>2694.67</td>
<td>.365</td>
</tr>
<tr>
<td>4. Within Subject</td>
<td>1938.67</td>
<td>40</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. B (Period of Time)</td>
<td>101.23</td>
<td>2</td>
<td>50.62</td>
<td>1.050</td>
</tr>
<tr>
<td>6. AB</td>
<td>102.90</td>
<td>2</td>
<td>51.45</td>
<td>1.068</td>
</tr>
<tr>
<td>7. B x Subject With-in Group</td>
<td>1734.54</td>
<td>36</td>
<td>48.18</td>
<td></td>
</tr>
<tr>
<td>8. Total</td>
<td>51426.98</td>
<td>59</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

As shown in Figure 1, at the time of the pretest (b1), the control group showed a greater tendency toward variety, i.e., were more self-accepting, than the experimental group. Immediately after the one-hour interview (b2) the control group decreased in their tendency for variety, while the experimental group showed an increase towards a tendency for variety. At the time of the two-week follow-up (b3),
Figure 1. Mean scores on the Similies Preference Inventory for the control and experimental groups at the pretest (b1), posttest (b2), and follow-up (b3).
the control group showed a tendency for variety at a level higher than their pretest scores, while the experimental group showed little change from the posttest.

Eaton Self-Esteem Bar

The analysis of variance for the Eaton Self-Esteem Bar did not yield any significant $F$ ratios ($p > .05$), as shown in Table 6. The $F_{\text{max}}$ test was not significant for the Subject Within Group error term. However, the $F_{\text{max}}$ test yielded a significant $F_{\text{max}}$ ($p < .05$) for the $B \times$ Subject Within Group error term. The data was not subjected to a transformation since there was not a significant $F$ ratio.

Table 6

<table>
<thead>
<tr>
<th>Source</th>
<th>SS</th>
<th>df</th>
<th>MS</th>
<th>F</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Between Subject</td>
<td>154.93</td>
<td>19</td>
<td>.02</td>
<td>.002</td>
</tr>
<tr>
<td>2. A (Type of Treatment)</td>
<td>.02</td>
<td>1</td>
<td>.02</td>
<td>.002</td>
</tr>
<tr>
<td>3. Subject Within Group</td>
<td>154.91</td>
<td>18</td>
<td>8.61</td>
<td></td>
</tr>
<tr>
<td>4. Within Subjects</td>
<td>7.27</td>
<td>40</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. B (Period of Time)</td>
<td>.62</td>
<td>2</td>
<td>.31</td>
<td>1.761</td>
</tr>
<tr>
<td>6. AB</td>
<td>.32</td>
<td>2</td>
<td>.16</td>
<td>.899</td>
</tr>
<tr>
<td>7. B x Subject Within Group</td>
<td>6.34</td>
<td>36</td>
<td>.18</td>
<td></td>
</tr>
<tr>
<td>8. Total</td>
<td>162.20</td>
<td>59</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
As shown in Figure 2, at the time of the pretest the control group showed a slightly higher rating of self-acceptance than did the experimental group. Immediately after the treatment, the control group showed a slight decrease, while the experimental group showed a slight increase. The two-week follow-up showed the control group improving in self-acceptance by a slight margin and the experimental group gaining in self-acceptance.

**Semantic Differential**

The analysis of variance for the Semantic Differential did not yield significant $F$ ratios ($p > .05$) for the type of treatment, period of time, or interaction between time and treatment (see Table 7). The $F_{max}$ tests did not yield a significant $F_{max}$.

As shown in Figure 3, at the time of the pretest, the control group showed a lower D score, i.e., were more self-accepting than the experimental group. Immediately after the treatment, both groups showed an increase in self-acceptance as indicated by smaller D scores. However, at the time of the two-week follow-up, the control group showed a marked increase in self-acceptance, while the experimental group showed only a slight increase in self-acceptance.

**Qualitative Results**

Each one-hour interview for both the experimental and
Figure 2. Mean scores (inches) on the Eaton Self-Esteem Bar for the control and experimental groups at the pretest (b1), posttest (b2), and two week follow-up (b3).
### Table 7

SPF-2.3 Analysis of Variance for Semantic Differential

<table>
<thead>
<tr>
<th>Source</th>
<th>SS</th>
<th>df</th>
<th>MS</th>
<th>F</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Between Subject</td>
<td>476.13</td>
<td>19</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. A (Type of Treatment)</td>
<td>69.46</td>
<td>1</td>
<td>69.46</td>
<td>3.07*</td>
</tr>
<tr>
<td>3. Subject Within Group</td>
<td>406.67</td>
<td>18</td>
<td>22.59</td>
<td></td>
</tr>
<tr>
<td>4. Within Subjects</td>
<td>88.96</td>
<td>40</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. B (Period of Time)</td>
<td>12.63</td>
<td>2</td>
<td>6.32</td>
<td>3.13*</td>
</tr>
<tr>
<td>6. AB</td>
<td>3.69</td>
<td>2</td>
<td>1.84</td>
<td>.91</td>
</tr>
<tr>
<td>7. B x Subject Within Group</td>
<td>72.63</td>
<td>36</td>
<td>2.02</td>
<td></td>
</tr>
<tr>
<td>8. Total</td>
<td>656.09</td>
<td>59</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*p < .10
Figure 3. Mean D-scores on the Semantic Differential for experimental and control groups at the pretest (b1), posttest (b2), and follow-up (b3). (Low score indicates more self-acceptance.)
control groups was audio tape recorded. From these recordings, the content of the interviews, behavior towards the double, and spontaneous comments concerning the interview were analyzed.

Each interview was categorized in terms of the theme or content of the subject's interview (see Table 8). Four categories were found, which accounted for all the interviews.

Table 8

<table>
<thead>
<tr>
<th>Content</th>
<th>Number of Control Subjects</th>
<th>Number of Experimental Subjects</th>
</tr>
</thead>
<tbody>
<tr>
<td>Interpersonal Problems</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Feelings about Self</td>
<td>4</td>
<td>2</td>
</tr>
<tr>
<td>School or Job Related</td>
<td>3</td>
<td>2</td>
</tr>
<tr>
<td>About Interview or the Research</td>
<td>1</td>
<td>3</td>
</tr>
</tbody>
</table>

The control subjects appeared to be less interested or self-conscious about the interview or research situation than the experimental subjects. Further, there were more control subjects who appeared willing to talk about feelings concerning themselves than experimental subjects.
Three control subjects and no experimental subjects spontaneously stated that the interview "was of great help." Also, three experimental subjects and one control subject experienced a "catharsis" or cried during the interview.

The experimental subject's behavior and relationship with the double was analyzed. Six experimental subjects responded to the double and appeared to work well with the double. Two subjects ignored the presence of the double by not responding to the double at all. The last two subjects expressed open dislike for the double. The four subjects that ignored or disliked the double were males. None of the control subjects commented on the presence of the investigator in the interview.

In terms of Gendlin's criteria for rating the extent to which the client is focusing on his experience (Gendlin, 1964), it appeared to the investigator that six experimental subjects and two control subjects were focusing during portions of the interview. Although no formal rating by independent judges was performed, this observation may indicate some real differences between the two groups which deserves further analysis.
DISCUSSION

The hypothesis of the present study that subjects who receive the doubling technique in psychodrama will show a greater increase in self-acceptance than control subjects was not substantiated. The results did not show change in self-acceptance for the subjects who received doubling. Contrary to the hypothesis, the control subjects, or no-doubling group, tended to increase in self-acceptance at a greater rate than did the doubling subjects.

The most striking finding was the variability within and between the control and experimental groups at the time of the pretest and other testings. The control group appeared substantially, though not significantly, more self-acceptant throughout the three observations on the Simililies Preference Inventory and Semantic Differential. Further, differences in terms of age and previous experience in psychotherapy were found between the two groups.

The experimental group's mean age was six years greater than the mean age for the control group. It could be hypothesized that older subjects are more resistant to change as a result of psychotherapy. However, this explanation does not seem tenable in light of the research reviewed by Meltzoff and Kornreich (1970) correlating age and outcome in psychotherapy who concluded that there is no relationship
between age and outcome in psychotherapy.

A further difference between the two groups which may have affected the outcome of this study was the number of subjects with previous experience in psychotherapy or counseling. The experimental group had four more subjects with previous experience than did the control group. Although it is not known what type of therapy the subjects previously received, it is possible that these subjects had expectancies based upon their previous experience which were contrary to the actual interview and doubling situation, resulting in the net effect of disappointment with the interview and doubling experience. The interview situation for nine control subjects was a new situation where specific expectancies may not have been present.

An important finding in regard to the experimental group was the different behavior towards the double by male and female subjects. The four subjects that disliked or ignored the double were males. This is particularly interesting in light of the fact that there were no quantitative differences between males and females. Therefore, it appears to make no difference in terms of self-acceptance as measured in the present study whether the subject responded to, disliked, or ignored the double. The net effect was the same: No significant change. However, there were some qualitative differences between the male and female subjects. The three experimental subjects that
experienced a "catharsis" were female subjects who responded to the double. It appears that there may have been some sex differences in the experimental group in terms of behavior towards the double which was not reflected in the measures employed.

The procedure employed in the present study to assess the effectiveness of doubling appears to be less than adequate. Specifically, the short length of the one interview may have negatively biased the probability of substantial personality change as posited in the present study. It may be possible for change to occur in individuals who are in a crisis or for those who present themselves for psychotherapy. However, this was not the case for the subjects of this study.

The initial sessions in psychotherapy and psychodrama generally tend to focus upon the establishment of rapport between the client and therapist. The initial time of a psychodrama session consists of the client or protagonist "warming-up" to the group, director, and situation at hand (Moreno, 1946, 1969). The necessity of building rapport and "warming-up" appears particularly important when two individuals are involved as therapists, i.e., the interviewer and double. Therefore, it seems likely that the short treatment period would have more of a negative bias for the experimental group than for the control group.

Another problem concerning the procedure was the fact
that the investigator acted as the double in the research, thus creating a problem of experimenter bias (Rosenthal, 1966). Further, the interviewer was also aware of the hypothesis of the present study, thus creating even more probability of the presence of experimenter demand characteristics of the situation. However, it appears that if there was bias, it was negative in nature since the control group was substantially more self-acceptant throughout the study. Despite this fact, it is recommended that future research in this area avoid this problem by not having the investigator involved in the actual treatment and testing.

According to Rogers' theory of psychotherapy and the nature of the therapeutic relationship, the doubling experience should lead to positive change. When the client is in a relationship where the double accepts all the client's feelings, the client should, in time, begin to listen more acceptantly to feelings which may have been denied, repressed, or previously unaccepted. In this manner, the client slowly begins to take a more self-acceptant attitude. The important point in the above theoretical formulation is that the client slowly begins to take a more self-acceptant attitude. If the type of change outlined above were to occur as a result of a one-hour doubling experience or psychotherapy session, psychotherapy would be a very rapid process. However,
this is not the usual case.

The focus of the present study has been upon a specific outcome as a result of the doubling experience. The rationale for the predicted outcome is based upon the concept of the phenomenological self. The basis of the Semantic Differential used in the present study and the Eaton Self-Esteem Bar is the assumption that the more congruent a person's self and ideal self are, the more self-acceptant and adjusted the individual is. However, Shlien and Zimring (1970) suggest that "congruence of self and ideal does not represent congruence between Self-Structure and Experience, which Rogers... postulates as the basis of adjustment." It appears that objective measurement of the structure of the phenomenological self is a difficult task.

Rather than attempt to measure the effect of doubling upon the self-structure, it appears to be more achievable and fruitful to measure the effects of doubling upon the self process. This type of measure would not be an outcome measure, but rather a measure of the process within the therapy or doubling situation. Rogers' formulation of a process conception of psychotherapy (Rogers, 1958) subsumes his previous theory as outlined in the present study. According to Rogers, the process in psychotherapy can be described as a continuum which ranges from fixity to fluidity where internal communications are clear, fully
experienced, and self becomes subjective, reflecting awareness of experiencing.

The study and measure of the process and flow of the subject's experiencing is possible for the design and procedures used in the present study. Audio and/or video tape recordings could be made for each interview for both the experimental and control groups. The subject's behavior and process could be analyzed according to one or several process measures of psychotherapy (Gendlin, 1961, 1969; Gendlin, Beebe, Cassens, Klein, & Oberlander, 1968; Rogers, 1959; Walker, Rablen, & Rogers, 1960). This type of measure appears particularly appropriate for future research concerning doubling in light of the observation that more experimental (doubling) subjects appeared to be focusing during portions of the interview than control subjects.

Another issue which this study raises is whether research assessing the effectiveness of doubling and other psychodrama techniques should be in the context of the psychodrama method. It is necessary to isolate the technique of doubling in order to assess that technique's effectiveness. However, taking doubling out of the context of psychodrama may create more problems than assessing it within the context of psychodrama. For example, in the present study it is possible that the experimental subjects, faced with essentially two
therapists, may have become threatened, or at least in an uncomfortable situation. With the interviewer and the double, the subjects may have experienced being "pushed" or "over reflected" to the point where they were not comfortable in the situation.

In the psychodrama method, the relationship between the therapist-director and client is characterized by empathy, warmth, acceptance, and genuineness. However, unlike Rogers' theory of psychotherapy, the director, through listening to and working with the protagonist, helps the protagonist explore his experience through a series of psychodramatic scenes which employ role-playing and other techniques. The double technique is not used all the time. Rather, doubling is employed when the director or protagonist feels that the protagonist needs to explore and experience feelings which at the present time may be unexpressed, unaccepted, or unsymbolized.

In view of the manner in which the doubling technique is actually employed in the psychodrama method, it appears that its effectiveness should be assessed in that context. Therefore, it is recommended that future research assessing the effectiveness of doubling examine doubling within the context of the psychodrama method and determine the effectiveness of doubling in facilitating the experiential process of the protagonist.

The following is an outline of how a future study
may attempt to assess the effectiveness of the doubling technique: (a) an experimental and control group consisting of naive psychotherapy clients matched on relevant variables such as age, education, ethnic background, and presenting problem should be employed, (b) an experienced psychodrama director and double, naive about the intent of the research, should provide the treatment for an experimental group consisting of the psychodrama method with doubling and a control group consisting of the psychodrama method without doubling, (c) each group should have an equal number of two-hour psychodrama sessions where each subject is protagonist three times, (d) video and audio tape recordings of all sessions should be employed for both groups to examine the director's and double's behavior, attitudes, and technique, and to measure the particular process variables under investigation, (e) a Split-Plot Factorial design (SPF-2.3) could be employed with A corresponding to the two treatments, i.e., psychodrama with doubling and psychodrama without doubling, and B corresponding to the first, second, and third times each subject is protagonist.

It is believed that the design presented above should provide a sensitive and important measure of the assessment of the effectiveness of doubling, retain the context of doubling, while still isolating the technique and control for the problems which were a part of the present study.
APPENDIX A

SEMANTIC DIFFERENTIAL

Name: __________________________
Age: __________________________
Sex: __________________________

One of the purposes of this study is to measure the meanings of certain things to various people by having them judge them against a series of descriptive scales. In taking this test, please make your judgments on the basis of what these things mean to you. On each page of this booklet you will find a different concept to be judged and beneath it a set of scales. You are to rate the concept on each of these scales in order.

Here is how you are to use these scales:

If you feel the concept at the top of the page is very closely related to one end of the scale, you should place your checkmark as follows:


or


If you feel that the concept is quite closely related to one or the other end of the scale (but not extremely), you should place your checkmark as follows:


or
Strong____:____:____:____:____:____:____:____:____:X:Weak

If the concept seems only slightly related to one side as opposed to the other side (but not really neutral, then you should mark as follows:

Active____:____:____:____:____:____:____:____:____:Passive

or

Active____:____:____:____:____:____:____:____:____:Passive

The direction toward which you check, of course, depends upon which of the two ends of the scale seem most characteristic of the thing you are judging.

If you consider the concept to be neutral on the scale, both sides of the scale equally associated with the concept, or if the scale is completely irrelevant, unrelated to the concept, then you should place your check-mark in the middle space:

Safe____:____:____:____:____:____:____:____:____:Dangerous

IMPORTANT: (1) Place your check-mark in the middle of the spaces, not on the boundaries:

this not this

____:____:____:____:____:____:____:____:____:____:

(2) Be sure to check every scale for every concept—do not omit any.

(3) Never put more than one check-mark on a single scale.

Sometimes you may feel that you have had the same item before on the test. This will not be the case, so do not look back and forth through the items. Do not try to remember how you check similar items earlier in the test. Make each item a separate and independent judgment. Work at a fairly high speed through the test. Do not worry or puzzle over individual items. It is your first impression, the immediate "feelings" about the items, that we want. On the other hand, please do not be careless, because we want your true impressions.

The results of this test, as well as all information gathered as a part of this research, will be strictly confidential. Results will only be released in group form. Thank you.
MYSELF

<table>
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<th>Attribute</th>
<th>0</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
<th>7</th>
<th>8</th>
<th>9</th>
</tr>
</thead>
</table>
| Slow       |   |   |   |   |   |   |   |   |   |   | Fast
| Sad        |   |   |   |   |   |   |   |   |   |   | Happy
| Passive    |   |   |   |   |   |   |   |   |   |   | Active
| Weak       |   |   |   |   |   |   |   |   |   |   | Strong
| Large      |   |   |   |   |   |   |   |   |   |   | Small
| Valuable   |   |   |   |   |   |   |   |   |   |   | Worthless
| Deep       |   |   |   |   |   |   |   |   |   |   | Shallow
| Unimportant|   |   |   |   |   |   |   |   |   |   | Important
| Cold       |   |   |   |   |   |   |   |   |   |   | Hot
A WOMAN

Valuable: Worthless
Important: Unimportant
Passive: Active
Happy: Sad
Hot: Cold
Shallow: Deep
Large: Small
Strong: Weak
Slow: Fast
A PERSON

Slow: Fast
Worthless: Valuable
Passive: Active
Deep: Shallow
Small: Large
Weak: Strong
Unimportant: Important
Hot: Cold
Happy: Sad
A Man

Unimportant: ____________ Important
Active: ____________ Passive
Slow: ____________ Fast
Hot: ____________ Cold
Valuable: ____________ Worthless
Sad: ____________ Happy
Weak: ____________ Strong
Shallow: ____________ Deep
Large: ____________ Small
MYSELF AS I'D LIKE TO BE

Worthless _______ _______ _______ _______ _______ _______ _______ Valuable
Important _______ _______ _______ _______ _______ _______ _______ Unimportant
Passive _______ _______ _______ _______ _______ _______ _______ Active
Deep _______ _______ _______ _______ _______ _______ _______ Shallow
Weak _______ _______ _______ _______ _______ _______ _______ Strong
Fast _______ _______ _______ _______ _______ _______ _______ Slow
Happy _______ _______ _______ _______ _______ _______ _______ Sad
Large _______ _______ _______ _______ _______ _______ _______ Small
Hot _______ _______ _______ _______ _______ _______ _______ Cold
APPENDIX B

THE EATON BAR

We would like to know how satisfied and comfortable you feel with yourself. A person who is comfortable with himself tends to feel he is very close to being the kind of person he wants to be, or would like to be, while a person who feels uncomfortable with himself tends to feel he is very different, even opposite, from the kind of person he would like to be.

Please indicate how close you feel you are to being the kind of person you would like to be in terms of the bar you will find on the attached page. Draw a line across the bar to indicate how close you feel you are being the kind of person you would like to be. Note that there is an upper and lower segment to the bar. If you feel somewhat similar to the kind of person you would like to be, you would draw a line across the bar somewhere above the line marked 0. If you feel somewhat opposite to the kind of person you would like to be, you would draw a line across the bar somewhere below the line marked 0. The closer you draw your line to the top of the bar, the more similar you feel you are to being the kind of person you want to be; the closer you draw your line to the bottom of the bar, the more opposite you feel you are to being the kind of person you want to be.
Try not to spend too long thinking about where to draw your line. Your first, initial tendency is best. Thank you.

Draw a line across the bar to indicate how close you feel you are to being the kind of person you want to be, or would like to be.

100% SIMILAR — I feel I am 100% similar to the kind of person I would like to be.

0%

I feel I am 100% opposite to the kind of person I would like to be.

100% OPPOSITE

(The above bar is drawn on a 1/2 scale)
APPENDIX C

SIMILIES PREFERENCE INVENTORY

Instructions. Listed below are many familiar expressions. There are five endings for each one. For every item, choose the one ending that you LIKE the best, the one you prefer better than all the others. Indicate the letter that corresponds to your choice on the separate answer sheet. There are no right and wrong answers on this test. We are interested in your preference. So be sure to mark the ending that YOU LIKE THE BEST. Work rapidly and do not spend too much time on any one item. Be sure to complete all of the expressions.

1. Limp as
   a. a dish
   b. a lump
   c. a busted blimp
   d. a towel
   e. a rag

2. Sharp as
   a. a pin
   b. a swordfish
   c. a ball
   d. a harp
   e. a tack

3. Snug as
   a. a bird in the nest
   b. a bow in the snow
   c. a fish in a dish
   d. a crook in a nook
   e. a bug in a rug

4. Straight as
   a. a ruler
   b. a stickpin
   c. a pig's tail
   d. an arrow
   e. a freight

5. Slippery as
   a. slumber
   b. soup
   c. mud
   d. tar
   e. an eel

6. Busy as
   a. a bee
   b. a beam
   c. an ant
   d. a siesta
   e. a tizzy

7. Slow as
   a. a greyhound
   b. a slipper
   c. a turtle
   d. a slug
   e. a caterpillar

8. Sweet as
   a. starch
   b. sherbet
   c. a lemon
   d. ice cream
   e. sugar
9. Green as  a. a ghost    b. a gremlin's grin  
c. leaves  d. grass  e. a golf green 

10. Hot as  a. an oven  b. Hades  
c. Alaska  d. a botfly  e. hotcakes 

11. Wise as  a. a wizard  b. a sage  
c. an owl  d. a size  e. a mole 

12. Brown as  a. a bear  b. brine  
c. a beacon  d. bark  e. bat bristle 

13. White as  a. fight  b. snow  
c. whip  d. soot  e. flour 

14. Quick like  a. a turtle  b. a cloud  
c. a bunny  d. quicksand  e. a rabbit 

15. Cool as  a. a curtain rod  b. a cucumber  
c. a pool  d. crushed ice  e. cooked onions 

16. Light as  a. a feather  b. a boulder  
c. a lizard's lick  d. a lever  e. foam 

17. Black as  a. a vulture  b. coal  
c. tar  d. a beetle's blink  e. bleach 

18. Sloppy as  a. a pig  b. a poppy  
c. a hog  d. a slob  e. a cat 

19. Swim like  a. a stone  b. a swan  
c. a fish  d. a tadpole  e. a sickle 

20. Cuddly as  a. a lamb  b. a wasp  
c. a puppy  d. a cocoon  e. a fuddy duddy
21. Solid as
   a. a sole
   b. a slab
   c. a rock
   d. a boulder
   e. a fluff

22. Silent as
   a. a ghost
   b. a mouse
   c. the CIA
   d. a silo
   e. the surf

23. Thin as
   a. a tight rope
   b. a cane
   c. a beanpole
   d. a thicket
   e. a thumb

24. Tight as
   a. a knot
   b. a miser
   c. a tax collector
   d. a loop
   e. tiddleywinks

25. Tough as
   a. nails
   b. a brick
   c. a teamster
   d. a noodle
   e. a tulip

26. Smooth as
   a. a slipper
   b. glass
   c. silk
   d. a steamer
   e. gravel

27. Blue as
   a. the sea
   b. a blush
   c. a blotter
   d. a blast
   e. the sky

28. Happy as
   a. a harp
   b. a hiccup
   c. a bird
   d. a lark
   e. a loss

29. Dead as
   a. a duffel bag
   b. a dirge
   c. the twist
   d. a doorknob
   e. a doornail

30. Red as
   a. a ripple
   b. milk
   c. a rose
   d. blood
   e. a ripe raspberry

31. Stubborn as
   a. a donkey
   b. a mule
   c. stubble
   d. a stovepipe
   e. putty

32. Contented as
   a. a calf
   b. a calcified cat
   c. a caboose
   d. a core
   e. a cow
33. Brave as
   a. a bunny
   b. a beet
   c. the brazen
   d. a tiger
   e. a lion

34. Poor as
   a. a pauper
   b. church mice
   c. a bum
   d. a pickle
   e. Fort Knox

35. Hungry as
   a. an ant
   b. a hunter
   c. a hat
   d. a pig
   e. a horse

36. Speed like
   a. a jet
   b. Sputnik
   c. a spud
   d. a snail
   e. the devil

37. Crazy as
   a. a loon
   b. a daisy
   c. a kook
   d. a cop
   e. a nut

38. Roar like
   a. a lion
   b. the rapids
   c. a bore
   d. a beast
   e. a rabbit

39. Loud as
   a. a cloud
   b. a lute
   c. a lion
   d. a foghorn
   e. a pin

40. Sour as
   a. a lemon
   b. a grapefruit
   c. ice cream
   d. sauerkraut
   e. a tower

END
APPENDIX D

SUBJECT ORIENTATION STATEMENT

You've been invited to attend a one-hour interview session where you are able to explore any concerns you may have at the present time. The interview will be conducted by a graduate student here at the college. Your interview will be tape recorded for research purposes. If at the end of the interview you wish to have the tape erased, you may.

Since this is a part of a research project, you will be asked to take several psychological tests. The results of your test will remain confidential as will your interview. The results of your tests will in no way affect you academically, professionally, or otherwise.

You should allow two hours for the interview and testing. First, I'd like to ask you some questions:

1. What is your marital status?
2. What year are you in college?
3. Your major?
4. Have you ever been in therapy or counseling?
   a. How long ago?
   b. How long were you in counseling?
APPENDIX E

INTERVIEW ORIENTATION

As a part of this research I will be present during your interview. Also, I will act as your double. That is, I will mirror your actions and your feelings, those said or unsaid. If your double says something which fits with how you think or feel, repeat what I say. If I say something which does not fit with how you think or feel, then correct your double and make it right.
REFERENCE NOTE

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85


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