The present study is a preliminary effort to delineate areas in which male and female clients in a university counseling center are viewed and/or treated differently. Ratings of 565 female and 645 male clients at the University of Maryland Counseling Center were made by 13 Ph.D. level counselors (9 male and 4 female) on 16 evaluation questions. Five of the 16 items showed significant differences between ratings of male and female clients. The main difference seemed to be that females were more often judged to have social-emotional problems and males were more often seen as having vocational-educational problems. No large differences were apparent between male and female counselors in their client ratings, but clients of both sexes seemed more likely not to show up for their first interview with a female counselor than for the first interview with a male counselor. The opposite tended to be true, however, of client no-show behavior for other than the first interview. The results of this study are discussed in terms of sexual stereotypes and future directions for research. (Author/HS)
COUNSELING CENTER
Office of Vice Chancellor for Student Affairs
UNIVERSITY OF MARYLAND
College Park, Maryland
COUNSELOR RATINGS OF MALE AND FEMALE CLIENTS

Anne M. Collins and William E. Sedlacek

Research Report # 8-72
Summary

The role of women in American society is becoming a topic of heated discussion in offices, homes, schools and even legislative bodies. Many organizations dedicated to women's rights focus their concerns on providing equal educational and occupational opportunities for women, while others attend to areas such as the availability of day care facilities or the influence of sex stereotyping on the socialization of the young. But perusal of even the most basic documents of the women's movement indicates that the problems experienced by American women in achieving equal status with men are only partially imposed by educational, occupational or practical barriers. The biggest impediments to women achieving equality seem to center on women's emotional and psychological hesitation to seek independent lives of their own.

An overview of the literature on women and mental health suggests that professionals have sometimes been more a part of the problem than of the solution. In view of the number of women who need assistance and support in working through the limitations of sex-role stereotyping, it seems particularly important that mental health professionals carefully scrutinize their own biases and cultural conditioning on sex-related dimensions.

The present study is a preliminary effort to delineate areas in which male and female clients in a university counseling center are viewed and/or treated differently. From the results of this study, the writers hope to develop further research strategies to specify the reasons for and the consequences of differential treatment of males and females.

Ratings of 565 female and 645 male clients at the University of Maryland (College Park) Counseling Center were made by 13 Ph.D. level counselors (nine male and four female) on 16 evaluation questions.
Five of the 16 items showed significant differences between ratings of male and female clients ($\chi^2$.05 level). The main difference seemed to be that females were more often judged to have social-emotional problems and males were more often seen as having vocational-educational problems.

No large differences were apparent between male and female counselors in their client ratings. However some differences by sex of counselor were apparent on the nature of termination item. Clients of both sexes seemed more likely not to show up for their first interview with a female counselor than for the first interview with a male counselor. The opposite tended to be true, however, of client no-show behavior for other than the first interview. In that situation, clients more frequently miss their appointments with male counselors than with female counselors. This finding might suggest that some prior client reluctance to see a female counselor exists, but that this reluctance dissipates if the client actually meets the female counselor at the first interview.

The results were discussed in terms of sexual stereotypes and future directions for research.
The role of women in American society is becoming a topic of heated discussion in offices, homes, schools and even legislative bodies. Many organizations dedicated to women's rights focus their concern on providing equal educational and occupational opportunities for women, while others attend to areas such as the availability of day care facilities or the influence of sex stereotyping on the socialization of the young. But perusal of even the most basic documents of the women's movement (Friedan, 1963; Bird and Briller, 1968; Millet, 1970; Greer, 1971) indicates that the problems experienced by American women in achieving equal status with males are only partially imposed by educational, occupational, or practical barriers. The biggest impediments to women achieving equality seem to center on women's emotional and psychological hesitation to seek independent lives of their own.

The fact that much of this hesitation - problems of role concept, self-esteem, dependence on males for identity, fear of the consequences of success and achievement - stems from earlier socialization seems obvious and is supported by research (Kagan, 1964; Steinman, Levi and Fox, 1964; Tukey, 1964; Rossi, 1967; Rosenkrantz, Bee, Vogel, Broverman and Broverman, 1968; Horner, 1969). Analysis of the barriers to women acquiring more autonomy in their lives seems to highlight the importance of skilled psychotherapeutic assistance in overcoming these barriers. Horner's research on the emotional conflicts experienced by superior, career-oriented women is strong evidence of the need for support and help to women who are struggling to work out their identities both as women and as persons. However, there are data to suggest that mental health professionals are not as well prepared to help women as might be hoped. A study of 79 mental health clinicians ranging from psychiatrists to social workers (Broverman, Broverman, Clarkson, Rosenkrantz and Vogel, 1970) showed that these clinicians held a double standard of concepts of mental health for males and females. The authors noted: "... the general standard of health is
actually applied only to men, while healthy women are perceived as significantly less healthy by adult standards." The study found little difference between concepts of health for adults when sex was unspecified and concepts of health for males, but found significant differences between the clinicians' concepts of healthy adults and healthy females. Moreover, the differences found in standards of health applied to males and females directly parallel sex role stereotypes common in our culture. These findings provide clear evidence that clinicians do accept the sex-role stereotypes in our culture, and by doing so, help perpetuate these stereotypes. The authors suggest that therapists need to examine their attitudes in this area and question whether the influence of these stereotypes actually reinforces social and intrapsychic conflicts in their clients.

An overview of the literature on women and mental health suggests that professionals have sometimes been more a part of the problem than of the solution. In view of the number of women who need assistance and support in working through the limitations of sex-role stereotyping, it seems particularly important that mental health professionals carefully scrutinize their own biases and cultural conditioning on sex-related dimensions.

This activity seems especially crucial for professionals working with college women who are often making far-reaching decisions about their future lives. Apparently no data specifically deal with how mental health professionals in university settings feel about sex role stereotypes or on whether they hold different standards of mental health for male and female students. Meltzoff and Kornreich (1970) reviewed studies which included data on the effects of sex of client and therapist on psychotherapy and found little evidence to support any particular hypothesis about the effects of sex of client or therapist. They concluded that sex does not seem to be a crucial variable, but noted that few studies have investigated the effects of sex as the main focus of the study.
The present study is a preliminary effort to delineate areas in which male and female clients in a university counseling center are viewed and/or treated differently. From the results of the study, the writers hope to develop further research strategies to specify the reasons for and the consequences of differential treatment of males and females.

Method

Ratings of 565 female and 645 male clients at the Counseling Center, University of Maryland, College Park comprised the data for the study. The sample studied included all clients seen from June, 1970 to June, 1971. The instrument used was the Codebook of Counseling Categories, an in-house data sheet kept on all clients. Reliability on this instrument has been investigated and found to be satisfactory (Bienen et al, 1966). Ratings were made by 13 Ph.D. level counselors (nine male and four female). Sixteen of the items on the instrument were used in the study. Item content included demographic variables, intake assessments, process judgments and termination ratings.

Frequency and percentage distributions were examined for all male and female clients and for eight additional subgroups. The subgroups were: Married female clients; married male clients; single female clients; single male clients; female clients with male counselors; male clients with male counselors; female clients with female counselors; male clients with female counselors. The small number of persons in many of the subgroups cells made chi-square tests impossible for those groupings.

Results

Five of the 16 items showed significant differences between ratings of male and female clients at the .05 level of significance. Table 1 shows that male clients in general are more likely to be seen as having vocational-educational problems or problems related to inadequate achievement than female clients.
Females are more frequently viewed as having emotional-social conflicts. This finding holds true for all subgroups, but married clients of both sexes are much more frequently rated as having emotional-social conflicts than as having vocational-educational problems.

Table 2 shows that females were more apt to be given an appointment or placed on a waiting list than males. Also 45% of married females received an appointment after screening as did 39% of married males, 36% of single females, and 34% of single males. However, since both married and female clients are seen as having more emotional-social conflicts and are less likely to have been terminated in screening, this finding is somewhat predictable.

Table 3 shows that females tended to learn about the Counseling Center from friends, other students, faculty members or advisors more often than males. Males cited more impersonal sources such as university catalogues and newspapers and announcements more often than females.

Table 4 shows that male clients appear to terminate by mutual agreement with their counselors more often than do female clients, but this difference is reversed for married clients. Also, male and female clients who had male counselors seemed more likely to terminate by mutual agreement with their counselors than did male and female clients who had female counselors. Clients who had female counselors seemed more likely not to show up for the first interview than clients of male counselors, but the latter group seemed to terminate by not showing up for other than the first interview more often than did clients who had female counselors.

Table 5 shows that female clients were rated more frequently as having made some improvement in overall adjustment than were male clients, and this difference was particularly sharp for married clients. In general, married clients and clients of male counselors were rated as having made increments in adjustment more often than were single clients and clients seen by female counselors.
Discussion

The results of this study indicate that systematic differences in the way counselors perceive male and female clients do occur in a university setting. The main difference seems to be that males are more likely to be rated as having vocational-educational problems than are females, while females more often are rated as having emotional-social problems.

Several systematic differences in counselor ratings of clients existed in the area of marital status. Married females were most frequently seen as having emotional-social conflicts in screening (73%), followed by single females (63%), married males (56%), and single males (44%).

No large differences were apparent between male and female counselors in their client ratings. However, some differences by sex of counselor were apparent on the nature of termination item (Table 4). Clients of both sexes seemed more likely not to show up for their first interview with a female counselor than for the first interview with a male counselor. The opposite tends to be true, however, of client no-show behavior for other than the first interview. In that situation, clients more frequently miss their appointments with male counselors than with female counselors. This finding might suggest that some prior client reluctance to see a female counselor exists, but that this reluctance dissipates if the client actually meets the female counselor at the first interview.

The differences found between counselor ratings of male and female clients may be explained in several ways. One could say, for example, that the differences in ratings reflect "real" differences in male and female clients. Or, taking a radical stance, one might suggest that the differences are a reflection of the counselors' expectations and sexual stereotypes about differences between male and female students' problems and do not actually relate to "real" differences. A third explanation might suggest some interaction of the first two, that is, that clients have a tendency to differ according to sex and that counselors have a
tendency to respond differentially to male and female clients. The data do not offer any sound rationale for explaining the differences, nor do they preclude any particular explanation.

The results do offer sound evidence that some systematic differences exist and suggest many directions for investigating these more fully. The findings on rating differences according to marital status, for example, should be examined more directly. A future study might control for problem type and then look at differences between emotional-social clients by sex of client, sex of counselor and client marital status. Another study might focus on length of counseling using matched samples of clients, that is, male and female clients who have the same first interview ratings and the same marital status. Still another research project might investigate the counselor termination ratings of client adjustment, again controlling for type of problem, marital status and first interview ratings.

As is evident, future research possibilities are great. Few studies have adequately explored the area and the present study raises several questions which require much deeper and more precise examination.
References


Rossi, A. Ambivalence in women: Should we plan for the real or the ideal? *Adult Leadership*, 1967, vol. 16, # 3, pp. 100 - 118.

Table 1.
Screener Description of Problem*

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N = 565 645 83 117 463 518 436 352 209 213

* p < .05 for all females and males
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<th>Married Male %</th>
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<th>Single Male %</th>
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*p < .05 for all females and males
Table 3.
Source of Knowledge of Center*

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<th>Single Female %</th>
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N = 565 645 83 117 463 518 436 352 209 213

* p < .05 for all males and females
Table 4.  
Nature of Client Termination *  

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<tr>
<th></th>
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<td>10%</td>
<td>14%</td>
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<td>4%</td>
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<td>5%</td>
<td>10%</td>
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<tr>
<td>Client by no-show for other than 1st interview</td>
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<td>6%</td>
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<td>5%</td>
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<td>13%</td>
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<td>13%</td>
<td>8%</td>
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<td>13%</td>
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N = 565 645 83 117 463 518 436 352 209 213

* p < .05 for all females and males
Table 5.

Change in Client Adjustment At Termination *

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* p < .05 for all females and males