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**THE ASSESSMENT OF ACTIVE LISTENING SKILLS IN HELPLINE
WORKERS**

A Senior Honors Thesis

by

AMBER LYNN ARGO

Submitted to the Office of Honors Programs
& Academic Scholarships
Texas A&M University
in partial fulfillment of the requirements of the

UNIVERSITY UNDERGRADUATE
RESEARCH FELLOWS

April 2002

Group: Psychology 2

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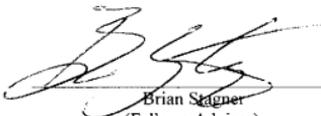
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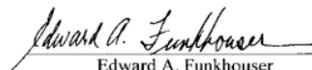
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ABSTRACT

The Assessment of Active Listening Skills
in HelpLine Workers. (April 2002)

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The goal of this project was to study the active listening skills of Student Counseling HelpLine workers at Texas A&M University. This research project was designed to determine if the test currently used by the HelpLine to objectively measure active listening skills is a valid and reliable test and if active listening skills are maintained after training.

The test that this research attempted to validate was the Crisis Center Discrimination Index. This research, by administering the index to volunteers before training, immediately after training, and a period of time after training, attempted to assess if active listening skills are developed through training and if they are maintained after training. This study also used two supervisor ratings of active listening skills; one set of ratings were completed at the end of training and another were completed at a period of time after training. The study will correlate these supervisor ratings with the indexes given at the same time.

There were no significant differences between indexes taken at the beginning of training, after all training was completed, and a period of time after training. This means that either active listening skills are not improved during training or practice on the HelpLine, or that the index is not a valid measure of active listening skills. By finding that there were no significant

correlations between the indexes and supervisor ratings taken at the time same time, the test was not shown to be a valid measure of active listening skills. The test does have some reliability with an alpha over .7. Alpha is obtained by splitting the test in half in every possible way and averaging all the correlations between the halves. There is also high inter-rater reliability between the supervisors doing the ratings. There was a significant increase in supervisor ratings of active listening skills from immediately after training to a period of time after training, which indicates that practice on the HelpLine improves the active listening skills of its volunteers.

ACKNOWLEDGEMENTS

I would like to thank the following people and groups for helping in the completion of this research project: the Honors Office at Texas A&M University, Dr. Brian Stagner, Dr. Kerry Hope, Susan Vavra, Dr. Leslie Morey, Brian Quigley, Lee Shefferman, Josh Bias, Don Maples, and the May and August 2001 Student Counseling HelpLine training classes.

The Honors Office at Texas A&M University gave me the incentive and opportunity to complete the research project.

Dr. Brian Stagner, as my fellows advisor, gave me the idea of doing research on the HelpLine. I told him that I wanted to spend my time on research that I could see the benefits of. When I had questions about my research, he was always ready to help me or he sent me to someone that knew more about the problem than he did. What I appreciated most about Dr. Stagner's involvement in my research project is that he allowed me to have control over my project so that I really felt like this was my project. Through the freedom he gave me, I feel that I have learned much about the realities of doing research. I also gained the confidence in myself that will be necessary to lead future research.

Dr. Kerry Hope, director of the Student Counseling HelpLine, greatly influenced the quality of my research. She helped me to choose the topic of the research, supplied me with literature on the topic, and introduced me to the various techniques that allow projects to be approved by the Institutional Review Board.

Susan Vavra, coordinator of the Student Counseling HelpLine, contributed much to the research process. She always cooperated with whatever measures were necessary for the research to be completed, even if these measures created more work for her. She did this without a word of complaint and with a smile on her face.

In class and out of class, Dr. Leslie Morey helped with the statistical analysis of the research. He was always available to speak with me about my project when I approached him. His expertise in the field of statistics and testing allowed me to analyze my data with confidence.

Brian Quigley helped with the statistical analysis of my project several times during the research process. Through his influence, I was able to better understand why I should use certain statistical techniques and how to explain my reasoning to other people. Although he is a busy graduate student, he always agreed to meet with me when I needed help.

Lee Shefferman and Josh Bias completed the second set of supervisor ratings for the project. Without these ratings, the quality of the research would have been greatly diminished.

Don Maples coded all ratings and indexes used in this project in order for me to be able to look at them without knowing which volunteer completed them. Although he sometimes had very little time to code the ratings and indexes, he always completed them by the time that I said they were needed. He was always interested and available to talk about my research.

This research would not have been possible without the consent of the May and August 2001 training classes. Their participation was vital in this research and it will influence the training of other HelpLine workers.

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INTRODUCTION

The goal of this research was to study the effectiveness of the training of active listening skills in Student Counseling HelpLine workers. Since hotlines became widespread in the 1960's and 1970's, research validating hotline workers' abilities has become increasingly important. When they were first begun, many hotlines focused on suicide prevention, but gradually they began to broaden their scope and are now readily available to anyone who needs to talk. The Student Counseling HelpLine at Texas A&M University was established in January of 1995. The volunteers who staff the HelpLine provide support, information, and referrals to anyone who calls. During the 1998-1999 school year, which represents an average year at Texas A&M University, with no major crisis affecting the entire student body, the HelpLine received 954 calls. The directors of the HelpLine need an objective scale on which to test HelpLine volunteers' active listening skills after they have finished training. It is also crucial for them to know if volunteers keep their skills after an extended period of time to determine if more continued education is necessary.

Telephone hotlines are important because they can be reached when a crisis is taking place. A crisis happens when someone's coping mechanisms become inadequate (Slaikeu, 1983). Crisis intervention must occur during this time of emotional upheaval. Hotlines are a good source of crisis intervention because they are accessible to anyone free of charge during times when traditional counseling services are not available. There are many other features of a telephone hotline that make it a unique and important form of crisis intervention including the following: the caller has control over the conversation, the client is anonymous, and the caller does not become dependent on one counselor.

The Student Counseling HelpLine trains its volunteers to be empathetic and show understanding through the use of active listening skills. Active listening is defined by the HelpLine as the use of reflection, paraphrasing, open-ended questions, and summary statements. Delworth, Rudow, and Taub (1972) published a test for helping skills, termed, the Crisis Center Discrimination Index. This test was published as a possible mechanism for hotline directors to distinguish between "helpful and unhelpful" volunteers. The HelpLine currently uses this index, with revisions by its director, Kerry Hope, as an objective assessment of active listening skills for potential volunteers. It uses the test in this fashion because HelpLine volunteers are taught to be "helpful" through the use of active listening skills. An example of one of the 16 questions on the index (revised by Kerry Hope, 1992) is displayed in Appendix A. Part of this research will focus on this index. Carkhuff (1969) suggests that low scores on written tests will correlate with low-level interactions with clients. This supports the use of written tests to obtain objective measures of active listening skills in HelpLine workers.

Research indicates that using active listening skills with callers on a HelpLine is more effective than giving advice. Mishara and Daigle's (1997) research supports the theory of a helper as a listener instead of giving advice. They found that the Rogerian model of intervention including acceptance, approval, and incomplete thoughts, led to more of a decrease in depression and a greater likelihood of reaching a contract to not commit suicide with a caller than a more directive style. Gingerich, Gurney, and Wirtz (1988) found that callers are more likely to be given a referral than they expected and less likely to be given advice. Nine-tenths of the callers in the previous study said they were helped.

Much of the research on hotlines was completed during the 1970's. Researchers wanted to know if hotlines actually helped people. One study attempted to answer this question by having confederates call HelpLines with personal problems (Genthner, 1974). Raters listened to

the phone calls and rated the helpers on scales of empathy, respect, and specificity. The study found that no workers reached a level that was minimally helpful. Advice was abundant in this study, which the Student Counseling HelpLine strongly discourages during training. Most research on hotlines has countered Genthner's study. King (1977) found that nonprofessionals were effective for telephone counseling. His research showed that telephone counseling could have a significant positive impact on callers' lives.

Nonprofessionals usually staff hotlines. Rosenbaum and Calhoun (1977) stated "Litman's Law" as one of the reasons for this. This law states that the more severe the crisis, the less training an individual needs in order to deal with it effectively. The abilities to show warmth, empathy, and interest are the most important qualities in a hotline worker. Rosenbaum and Calhoun (1977) stated that warmth was the best predictor of positive outcome with verbal patients. Genuineness and empathy came second. These three variables were given the name, "clinical effectiveness." Nonprofessionals were shown to have as much clinical effectiveness as professional counselors. Active listening is a device used to show empathy. Empathy must be trained in many people. A study supporting this idea showed that counselors who had training and immediate supervision after a call showed more empathy than counselors with training, but no supervision and counselors with training, but delayed supervision (Doyle, Foreman, Wales, 1977). The Student Counseling HelpLine gives immediate supervision if asked for, and mandatory delayed supervision by requiring volunteers to attend a weekly, supervised meeting where calls are discussed and volunteers participate in role-plays. Carkhuff (1969) found that on a written test of communication skills, similar to the Crisis Center Discrimination Index, the participants did significantly better after training.

Although many volunteers must be trained to be empathetic, Albano and Glenwick's (1990) research supports the notion that the best predictor of a volunteer's helping skills after

training is his ability to help before training. This research indicates that giving a volunteer an assessment before training would assist in predicting their skills after training. If training classes must be limited, a predictive assessment would be useful to eliminate unhelpful volunteers before training began.

Some studies show that experience on hotlines do not increase the skills of the workers. One study found a low correlation between the experience as a volunteer on a hotline and the counseling skills of the volunteer (Bleach & Claiborn, 1974). This study suggested that training, not experience develops the counseling skills necessary for a volunteer. Danish, D'Augelli, and Brock (1976) also discovered that training decreased advice and closed questions, while increasing the focus of volunteers on the callers' feelings. These are all aims that the Student Counseling HelpLine hopes to obtain after training and are tested for in the Crisis Center Discrimination Index. D'Augelli and Levy (1978) found that after a two-month follow-up, some verbal responses returned to pre-training levels, including closed questions. The Student Counseling HelpLine discourages closed questions because they do not encourage the caller to talk.

This research project has two objectives: instrument validation and outcome evaluation. First, it will attempt to provide evidence that the Crisis Center Discrimination Index (Appendix A) is an accurate measure of the active listening skills required of HelpLine volunteers. Second, the project will examine whether the training required to be on the HelpLine develops these skills and if these skills are stable over time.

METHODS

This research included two Student Counseling HelpLine training classes: a group trained during May of 2001 and a group trained during August of 2001. There were 14 and 13 subjects from each class, respectively. Volunteers were administered the Crisis Center Discrimination Index published by Delworth, Rudow, and Taub (1972) and revised by Hope (1992) during the first day of HelpLine training before any training took place. They were given half an hour to complete the test. The test was administered again during the last day of training and volunteers were again given half an hour to complete the test. A layout of the research design is illustrated in Table 1.

TABLE 1: RESEARCH DESIGN

First Day of Training	Last Day of Training	January-March 2002
Index 1	Index 2	Index 3
	Ratings 1	Ratings 2

Training at the Student Counseling HelpLine, which is six days and approximately 45 hours long, consists of a combination of lecture and interactive presentations on counseling and active listening skills, how to handle different types of calls, suicide assessment and crisis intervention, and when and how to make a referral. There are presentations by the Student Counseling Services staff, A&M offices, and community agencies about the types of concerns that college students may experience, how to help a student with these concerns, and referral sources available to the caller. There is also an hour-and-a-half of role-play training each day of training. A sample training schedule and an outline of what is expected of HelpLine volunteers after training are displayed in Appendix B.

Immediately after training, two supervisors rated the volunteers on a scale that indicated the volunteers' ability to use active listening skills based on role-plays that the volunteers participated in during their final interview. The supervisors rated volunteers on a likert scale that asked questions pertaining to ten aspects of active listening skills. This rating form is shown in Appendix C. The average score that the volunteer received from the two raters were used for this study as his or her average supervisor rating of active listening skills immediately after training.

In January of 2002 all volunteers who were trained the previous summer or fall were asked to complete the Crisis Center Discrimination Index once more. They were again given half an hour. Supervisors, using the same rating form used previously, rated volunteers once more on their abilities to use active listening skills. This was completed between January 2002 and March 2002. The same supervisors who did the first set of ratings were unable to also complete the second set. The average ratings of the two supervisors completing the rating forms in January to March 2002 were correlated with ratings from a supervisor who rated volunteers for the first set of ratings and was able to rate a portion of volunteers for the second set of ratings. This assessed the reliability between the different sets of raters.

The validity of the Crisis Center Discrimination Index was evaluated by examining the correlations between scores on the Crisis Center Discrimination Index and supervisor ratings that were completed at approximately the same time. The validity of the index would be indicated by negative correlations between the scores on the index and supervisor ratings. For each example caller on the index, the volunteer gives the four possible responses a rating of 1.0 to 5.0 based on the helpfulness of the response for the caller. Scores on the index are calculated by adding the differences between the "correct" answers, which are the ratings experts would give each response, and the test-taker's answer for all responses on the index (Delworth, Rudow, & Taub,

1972). A low score on the index would indicate an ability to use active listening skills on the Student Counseling HelpLine.

Training effectiveness was evaluated through a repeated-measures t-test including indexes given before any training and immediately after training. Training effectiveness, along with maintenance of active listening skills, and training group differences according to index scores were also evaluated through a 2 by 3 ANOVA with group and time as independent variables. Maintenance of active listening skills and group differences according to supervisor ratings were evaluated through a 2 by 2 ANOVA with group and time as independent variables.

This project received the approval of the Institutional Review Board. In order to obtain approval, each participant was required to sign a consent form saying that they were willing to participate in the study (Appendix D). This consent consisted of them releasing the scores from the tests they already took during training and their supervisors' ratings to be used in the research project, and retaking the index in January 2002. Because the researcher is a volunteer for the Student Counseling HelpLine, each participant has a number so that when analyzing data, the researcher was unaware of whose scores they were looking at. Approval of the IRB was not required to administer the tests to the volunteers during training or to allow supervisors to rate the trainees. These tests and ratings are already required as a part of HelpLine training. For the purpose of this research project, the HelpLine directors introduced more regulation in the administration of the Crisis Center Discrimination Index.

RESULTS

The research began with 27 subjects. By the time the project ended with the last supervisor ratings, there were 20 subjects, 10 from each training class. This high drop out rate occurred because people did not have the skills to be on the HelpLine, people quit for personal reasons and the supervisors were unable to rate some volunteers for the last set of ratings.

There was no significant correlation between scores on the Crisis Center Discrimination Index and scores on the supervisor ratings, $r = +.056$, $n=44$. This correlation coefficient of .056 is displayed on Figure 1.

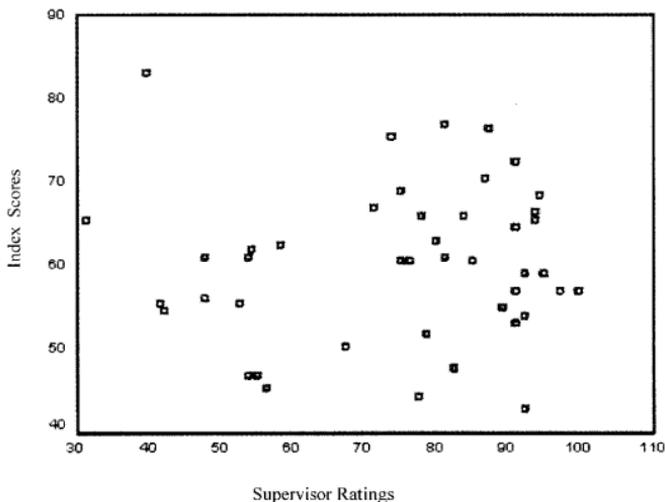


FIGURE 1: Scatter-gram of Index Scores and Supervisor Ratings

There was also no significant difference in scores between indexes given before training, immediately after training, or a period of time after training. This is displayed in Figure 2. A repeated-measures t-test was conducted with both groups collapsed into one large group because training should have been equivalent for both groups. There were no significant changes in scores on the pre-test index to the index taken immediately after training: $t(26)$.

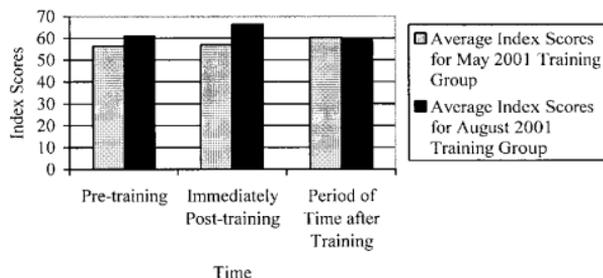


FIGURE 2: Average Index Scores at Three Different Administrations

A correlation for the index scores revealed a significant relationship between the pre-training index and immediate post-training index, $r = +.442$, $n = 27$, $p < .05$, two tails. There was also a significant relationship between immediate post-training index and the index given in January 2002, $r = +.569$, $n = 23$, $p < .01$, two tails. The index had a high internal consistency when scores on all items from the pre-training index were analyzed. An alpha of .7375 was obtained. Alpha is obtained by correlating all possible split-half versions of the test with each other and averaging these correlations.

Using the pre-test index and the index taken immediately after training, all items on the 16-item index were correlated with the total score without the particular item in question included in the total score. 7 items had a correlation above .4, $p < .05$ two tails, with the total score without the particular item in question included for both test administrations. For the index taken immediately after training, the scores for these 7 items were added together and this new total score was correlated with the supervisor ratings completed at the same time. There was no significant correlation found, $r = +.084$, $n = 23$, $p > .05$, two tails.

There was a significant difference between training groups in the scores on the immediate post-training index (Figure 2). The May training class had an average score of 56.92 and the August training class had an average score of 66.32 on the index, $p < .05$, two tails. The standard error for both groups for the index at this time was higher than the other two times the index was taken. The standard errors for the May training class were (in order of earliest to latest index) 2.49, 2.99, and 2.27. The standard errors for the August training class were (in order of earliest to latest index) 2.60, 3.13, and 2.37. The standard errors for differences between the groups were 3.60, 4.33, and 3.28. The average standard deviation was also higher for the second index scores. These standard deviation scores were (in order of earliest to latest index taken) 8.75, 11.21, and 7.68. Training group membership had no significant effect on the other two sets of index scores.

Both sets of raters had high reliability with each other and one rater from the first set was shown to be reliable with average ratings from the second set, $r = +.980$, $n = 5$, $p < .01$, two tails. The first set of supervisors had a significant relationship when their ratings were correlated with each other, $r = +.911$, $n = 23$, $p < .01$, two tails. The second set of raters were also shown to be reliable with a significant correlation with each other, $r = +.897$, $n = 21$, $p < .01$, two tails. An average rating score was derived from averaging the ratings of the two supervisors rating the

volunteer's role-play. A MANOVA showed that there were no significant differences between groups in reference to the ratings. However, there was a significant difference between ratings completed immediately after training and immediately before training, $F(1, 18) = 20.54, p < .01$, two tails. Groups were then collapsed together and ratings showed a significant increase from an average rating of 66.25 (SD = 18.163) immediately after training to an average rating of 84.53 (SD = 13.507) in January to March of 2002 when a repeated-measures t-test was conducted, $t(19) = +4.646, p < .05$, two tails. This is displayed in Figure 3.

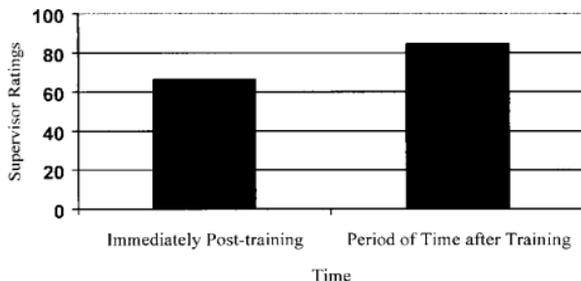


FIGURE 3: Improvement in Supervisor Ratings after Time on the HelpLine

DISCUSSION

This research did not provide any evidence that the Crisis Center Discrimination Index is a valid test of active listening skills. The correlation coefficients between the indexes and the supervisor ratings completed during the same time period were almost nonexistent (Figure 1).

A hypothesis was that certain items on the index that were distorting the total score could cause the lack of correlations. To test this hypothesis, each item was correlated with the total score without the particular item in question being added to the total score. The items with the highest correlation coefficients are the items that are the best predictors of total test scores. By only using the items with significant correlations above .4 on both the pre-test indexes and post-test indexes in the total score, any "bad" items that were distorting the total scores should have been eliminated. These new total scores of the post-test indexes made of the 7 items that correlated the highest with the total score, were correlated with the supervisor ratings, but no significant correlation was found. This indicates that the lack of correlation is due to a lack of the index's ability as a whole to assess active listening skills rather than the existence of a few "bad" items.

It is possible that the index is a valid test for a skill besides active listening skills. The index requires test takers to assign each response a score, but the index does not use the full range of the possible scores it gives. The total index score is derived by adding the differences in the "correct" rating and the rating the test-taker assigned to the responses. None of the "correct" ratings are above 4.0, but test-taker is asked to rate each response on a scale from 1.0 to 5.0. If the test-taker were instead instructed to rank responses in order of the best display of active listening skills to the worst display of active listening skills, this same test would possibly have better correlations with supervisor ratings because there would be less room for subjectivity

in the “correct” rankings and the “correct” rankings would be forced to include the full range of possible answers.

Because the index showed moderate correlation coefficients between test takings, and no significant change over time, people scored similarly on repeated index administrations.

Although the correlation coefficient of index scores between administrations is lower if the test-taker had training between the administrations, it is still significant. Training does seem to lessen the correlation coefficient, which indicates that training does have an effect on the test. Because it is not known what the test is measuring, what training is changing to change test scores cannot be determined. A future study could change certain training procedures and determine what effect different training procedures have on the test. In this way, it could be determined if the test measures a skill that is addressed in training.

The groups were combined for the analysis of effects of training because training for both groups should have been identical and there was an identical time difference between the administrations of the first two indexes. Combining the groups to obtain more subjects gave the data analysis more power. Even when training groups were combined to form one large group, no significant differences were found between scores on the indexes given before training and the indexes given immediately after training.

Although the results did not indicate that the index was a valid measurement of active listening skills, analysis did indicate that it had high internal consistency with a high alpha. This means that people score similarly on all items of the test during one test administration. The moderate correlation coefficients between test takings also indicate that the index has moderate test-retest reliability.

There were significant group differences in scores on the indexes administered immediately after training (Figure 2). The August training group scored higher (which

theoretically indicates lower active listening skills) than the May training group. This could be a result of the small sample size. There was also possibly some difference in the testing situation, even though the researchers attempted to maintain identical test administrations. There were higher standard errors and standard deviations for indexes taken immediately after training than at the other two times. This means that a higher variability in scores could have contributed to the group difference. It is possible that the group differences could be caused by differences in training. Although training was identical in subject matter for both groups, some presentations were presented by different people, which may have affected how well volunteers did on the index. The May training class had a mean score that was constant from the pre-training indexes to the immediate post-training indexes. The August training class began with a higher mean on the pre-training index than the May training group and their scores increased from the pre-training indexes to the immediate post-training indexes. This increase in the May training group's index scores appears to be the cause of the significant difference between groups on the indexes taken immediately after training. It is difficult to imagine what could have changed in training to cause volunteers' scores to indicate fewer skills than they had before training. Even if the index is measuring a skill other than active listening skills, there should not be any skills that training decreases in volunteers.

Ratings improved significantly from immediately following training to a period of time after training (Figure 3). This contradicts the research by Danish, D'Augelli, and Brock (1976) that was previously mentioned. These researchers found that abilities related to active listening skills, such as avoiding giving advice and closed questions, which are addressed on the rating forms used by supervisors to rate active listening skills in this study, decreased from immediately after training to two months after training. The increase in active listening skills of the volunteers from immediately after training to a period of 6 to 9 months after training that this

study found could be due to several causes and it is likely that all causes that will be mentioned contributed somewhat to the overall improvement in ratings after time on the HelpLine. Because of the high inter-rater reliability indicated with the high correlations between raters, it is unlikely that these significant results were the product of differences between raters. Practice on the HelpLine could have helped to raise the active listening skills of volunteers. It is also possible that the raters themselves influenced the ratings. The raters knew that the volunteers they were rating in January to March 2002 had worked on the HelpLine for a period of time. Their expectations that the volunteers would have better active listening skills than new HelpLine workers could have influenced their ratings. A future study that keeps raters blind to how long the workers they are rating have been involved on a hotline would eliminate the possibility of rater expectations influencing the results. This was not feasible for this study because all raters who had the time and ability to rate HelpLine volunteers were intensely involved with the HelpLine. A third possible reason for the increase in supervisor ratings after a period of time on the HelpLine is that the volunteer was less nervous during the second role-play. They had become more confident with their skills and knew the supervisors well after working on the HelpLine for over a semester. During the second role-play used for this study, no worker thought that they could lose their position on the HelpLine because they performed poorly. The first set of supervisor ratings was taken from final interviews when many workers knew that the role-play determined if they were accepted onto the HelpLine or not.

Future research could use larger sample sizes, possibly incorporating groups from several hotlines in order to have a large subject pool. A larger subject pool would reduce errors and the results would have more power.

It would have been ideal to also have pre-training ratings to use in the data analysis, but this was not feasible for this study for two reasons. The first reason is that there are no role-

plays conducted before any training takes place. This means that the first supervisor ratings that could be included in the study could not be taken before any training took place. The second reason is that the same two raters (sometimes there are not even two raters available to rate during the training week) are not rating every volunteer during the training week. In order to ensure the reliability of the ratings, it was necessary to have the same two raters rate all workers. Future research could include pre-training supervisor ratings.

The HelpLine still requires a validated objective test for active listening skills. This study did not provide the evidence required to justify use of the Crisis Center Discrimination Index in future selection of Student Counseling HelpLine volunteers. Future research could study the how the changes suggested previously to the index affect the correlations with supervisor ratings. Future research could also create new tests to measure active listening skills and study their validity and reliability.

CONCLUSION

The lack of a significant correlation between the Crisis Center Discrimination Index and supervisor ratings suggests that the index is not a useful indicator of the active listening skills for Student Counseling HelpLine Workers. The improvement in supervisor ratings after practice on the HelpLine suggests that time working on the HelpLine improves active listening skills. From the results of this research, it does not appear that more continued education is necessary to maintain the active listening skills of Student Counseling HelpLine workers. This research could not speculate on the effects of training on active listening skills because the index was not shown to be a valid measure of these skills. The HelpLine still requires a valid objective measure of active listening skills. Future research should develop and assess the reliability and validity of an objective measurement technique that will satisfy the HelpLine's needs.

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APPENDIX A

EXAMPLE QUESTION FROM THE CRISIS CENTER

DISCRIMINATION INDEX

Directions for Index: You will read about sixteen persons who are seeking help with a problem. They may not be formal clients, but simply people who have sought the help of another person in a time of need. Following each excerpt by a person seeking help you will read (or listen to) four possible responses. These are initial responses which might be made early in the course of the helping relationship. Every one of the four possible responses should be rated according to the continuum below. Rate each response independently of each other. Rate EACH possible response 1.0, 1.5, 2.0, 2.5, 3.0, 3.5, 4.0, 4.5, 5.0:

- 1.0 or 1.5 = Is not helpful in recognizing the problem. May hinder communication.
- 2.0 or 2.5 = Partial recognition of problem and/or feelings towards it.
- 3.0 or 3.5 = Minimally helps the person in recognizing the problem and his/her feelings towards it.
- 4.0 or 4.5 = Significantly helps the person in recognizing the problem and dealing with it.
- 5.0 = Optimally aids the person in dealing with his/her problem.

Caller: I'm having problems with my boyfriend. We've been getting pretty intimate lately, and all that is left is going all the way. I am not sure it's what I want to do because I've always wanted to be a virgin when I got married, but it's awfully tempting. I've been brought up to believe that sex outside of marriage is wrong, but how can it be wrong when I love him so much? He doesn't understand this and is getting very impatient because I won't go all the way. I'm afraid I'll lose him if I don't, but I'm afraid I'll hate myself if I do.

Possible Responses:

- _____ Are you afraid of sex? Sometimes these things happen when people feel inhibited about their inner emotions.
- _____ It sounds like you don't know which is more important, pleasing your boyfriend and possibly yourself, or possibly losing your boyfriend for the values that even you are questioning.
- _____ That must really be a confusing situation to be in, not to know which way to go in such an important situation.
- _____ Why would you hate yourself for going all the way if you love him the way you say you do?

From: Delworth, U., Rudow, E. H., & Taub, J. (Eds.). *Crisis Center/Hotline: A Guidebook to Beginning and Operating*. Springfield: Charles C. Thomas, 1972.
Revised by Kerry Hope in 1992.

APPENDIX B

SAMPLE HELPLINE TRAINING SCHEDULE

Monday

8:30	Pick up Name Tags and Training Packets	Ms. Susan Vavra, HelpLine Coordinator
8:35 - 9:30	Ice Breaker Activity	HelpLine Volunteers
9:30 - 10:00	Welcome Brunch	SCS Staff & HelpLine Trainees
10:00 - 10:30	Confidentiality & Ethics	Dr. Kerry Hope, Associate Director
10:30 - 11:00	Listening Skills Pre-Test	Susan
11:00 - 12:00	Overview of Crisis Theory & Crisis Intervention	Mr. Steve Wilson, SCS Psychologist & Back-Up Team
1:00 - 2:15	Introduction to Active Listening Skills (Part I) Difference between talking to friends & callers; Open Ended Questions, Paraphrasing, Reflection	Mr. Josh Bias & Mr. Lee Shefferman, HelpLine Graduate Assistants
2:15 - 2:45	Overview of the Student Counseling Service	Kerry & Susan
3:00 - 5:00	Role Play Training	HelpLine Staff
5:00- 5:45	The ABCs of Handling a Call, Pacing a Call, & Using Call Logs	Kerry & Susan
5:45 - 6:00	Question & Answer Period	Kerry & Susan

Tuesday

8:30 - 9:30	Gay, Lesbian, Bisexual & Transgendered Issues	Dr. Mary Ann Covey, SCS Psychologist
9:30 - 10:45	Introduction to Active Listening Skills (Part II) Reflection; Summarization; Handling Personal Questions; Ways to respond to a caller handout; Pacing/stages of a call	Josh & Lee
11:00 - 12:00	Handling Upset Callers -- When & How to Calm Tears & Anger	Dr. Robert Carter, SCS Psychologist
1:15 - 2:15	Break Ups & other Relationship Issues	Josh
2:15 - 3:15	Abusive & Violent Relationships and Survivor Syndrome	Dr. Maggie Olona, Director
3:30 - 5:30	Role Play Training	HelpLine Staff
5:30 - 6:00	Question & Answer Period	Kerry & Susan

Wednesday

8:30 - 9:30	Decision Making Skills	Dr. Betty Milburn, Associate Director
9:45 - 10:45	Birth Control & Overview of Family Planning Services	Family Planning Staff

11:00 - 12:00	Unplanned Pregnancy Options & Services of Planned Parenthood	Ms. Heather Clark
1:30 - 3:30	Role Play Training	HelpLine Staff
3:45 - 5:00	Grief, Loss, Death and Dying	HelpLine Staff
5:00 - 6:00	Ending a Call, When & How to make Referrals, & Question & Answer Period	Susan & Kerry
Thursday		
8:30 - 9:30	Eating Disorders	Mary Ann
9:30 - 10:20	Depression	HelpLine Staff
10:30 - 12:30	Suicide Assessment & Intervention, Accessing Back-Up, & Making Referrals	HelpLine Staff
2:00 - 3:30	HelpLine Standards, Guidelines, & Procedures; Ethics Revisited; Fire Procedures; & Tour	Kerry & Susan
3:45 - 5:30	Role Play Training	HelpLine Staff
5:30 - 6:00	Question & Answer Period	Susan & Kerry
Friday		
8:30 - 9:30	Sexually Transmitted Diseases and Overview of Health Center Services	Ms. Margaret Griffith, Beutel Health Center
9:45 - 10:20	Demonstration Role Play (3 rd Party Call)	HelpLine Staff
10:30 - 11:30	Sexual Assault, Services of TAMU Gender Issues Education Office and the Brazos County Rape Crisis Center	Ms. Risa Bierman, Gender Issues Education Services
11:45 - 1:00	Meet the Back-Up Team (Lunch Provided)	Back-Up Team
1:00 - 3:00	Multicultural Issues	Dr. Carlos Orozco & Dr. Brian Williams, SCS Psychologists & Back-Up Team
3:00 - 5:15	Role Play Training	HelpLine Staff
5:15 - 5:30	Question & Answer Period	Kerry & Susan
Saturday		
8:30 - 9:00	Fill out payroll paperwork and Sign up for observation shift and final interview	Kerry & Susan
9:00 - 10:30	Identifying & Ending Non-Productive Calls, Handling Prank, Obscene and Repeat Callers	Kerry & Susan
10:30 - 12:00	Role Play Training	HelpLine Staff
12:00 - 1:00	When you know the Caller & other Ethical Issues (Lunch Provided)	Kerry & Susan
1:00 - 1:30	Listening Skills Post Test	Kerry & Susan
1:30 - 2:00	Question & Answer Period	Kerry & Susan

OBSERVATION SHIFT

Each HelpLine Trainee will serve one observation shift while "seasoned" HelpLine workers are on duty. No more than 2 trainees per shift can sign up. Observation shift must be completed before final interview.

FINAL INTERVIEWS and TRAINING EVALUATION

One-Hour Final Interview with Susan Vavra & Kerry Hope.

Each HelpLine trainee will have a chance to give and receive feedback about the training and the trainee's areas of strength and weakness. The final interview will include a role-play using the HelpLine phone, facilities & reference materials.

Weekly Supervision Sessions

Volunteers MUST attend a 50-minute small group supervision session every week.

Volunteers are divided into six groups based on class/work schedules. Volunteers will meet with the same small group each week. During this meeting, volunteers will have a chance to discuss calls they have handled, to learn from other volunteers' experiences, to "de-stress" from stressful calls, and to role play how to handle calls. These meetings will be led by one of the SCS Doctoral Interns or HelpLine Graduate Assistants with the assistance of Susan Vavra and/or Kerry Hope.

Continuing Education Meetings

Meetings for continuing education will be held approximately twice a month.

APPENDIX C

HELPLINE SUPERVISOR RATING FORM FOR ACTIVE

LISTENING SKILLS

Unacceptable	Poor	Average	Above average	No improvement necessary
Establishing Rapport				
0	1	2	3	4
Using open-ended questions				
0	1	2	3	4
Using Paraphrasing				
0	1	2	3	4
Using Summarization				
0	1	2	3	4
Using Reflection of Feelings				
0	1	2	3	4
Avoiding Giving Advice				
0	1	2	3	4
Avoiding Problem Solving for the caller				
0	1	2	3	4
Avoiding personal information or opinions				
0	1	2	3	4
Helping caller focus on central problem				
0	1	2	3	4
Handling Silence(s)				
0	1	2	3	4

APPENDIX D

CONSENT FORM

Informed Consent The Assessment of Active Listening Skills in HelpLine Workers

I have been invited to participate in a research study about how the active listening skills of potential and current HelpLine workers are evaluated and whether active listening skills learned in initial training persist over time. I am one of up to 50 potential participants in this study. This study will include volunteers who trained during May and August of 2001. I understand that this study is being conducted by Amber Argo as part of her Honors Research Fellows project.

I understand that this study is, first, an attempt to validate an active listening skills questionnaire that is given as part of the standard training for the Student Counseling HelpLine. The second purpose is to see if the one-week initial HelpLine training can be demonstrated to improve active listening skills, and whether these active listening skills deteriorate over time after training. This will aid HelpLine staff to know if additional training or retraining seems to be necessary for HelpLine workers.

Specifically, by agreeing to participate I agree to:

- 1) Release a copy of the Crisis Center Discrimination Index that I took the first day of training to Amber Argo. I understand that I will be taking this test whether or not I choose to participate in the study.
- 2) Release a copy of the HelpLine Counseling Skills Rating Form filled out on me after my final interview to Amber Argo. I understand that my trainers/supervisors will be completing this form whether or not I choose to release the information to Amber Argo.
- 3) Release a copy of the Crisis Center Discrimination Index that I took after completing training to Amber Argo. I understand that I will be taking this test whether or not I choose to participate in the study.
- 4) Take an extra Crisis Center Discrimination Index during the first meeting of the Spring, 2002 semester. This will take approximately 30 minutes. If I agree to participate, my scores on this will be released to Amber Argo.
- 5) I will perform a role-play in late January or early February of 2002, during which my supervisors will be completing a Helpline Counseling Skills Rating Form based on my performance. I agree to release copies of my role play rating form to Amber Argo. I understand that I would have had to participate in a re-certifying role play any way, although not until late in the semester.

Confidentiality

I understand that any information given to Amber Argo will have ALL identifying information removed from it. Thus, my participation will be totally anonymous to the researcher. My name will be assigned a subject number prior to the study by a secretary at the SCS who is not affiliated with the HelpLine, and she will put this number and no other identifiers on any data released to Amber Argo. The name and contact information for this secretary will be given to me at the time of the study. Kerry Hope, Susan Vavra, Amber Argo, or any other person involved in the HelpLine will not know who is or is not participating in Amber Argo's research.

Risks and Benefits

I understand that there are no anticipated risks for participation. The only benefit for participation is that I will be invited to a free pizza party in January 2002 with all other HelpLine workers who trained in May or August of 2001.

Freedom to Withdraw from the Study

I understand that I can withdraw my consent to participate at any time and Amber Argo will delete any information already released by me to her. If I want to withdraw, I will tell the secretary, and she will tell Amber Argo to delete all data related to a particular subject number.

I understand that this research study has been reviewed and approved by the Institutional Review Board – Human Subjects in Research, Texas A&M University. For research-related problems or questions regarding subjects' rights, the Institutional Review Board may be contacted through Dr. Michael W. Buckley, IRB Coordinator, Office of the Vice President for Research at (979) 845-8585 (mwbuckley@tamu.edu).

If I have any later questions about the study I can contact Amber Argo as stated below. I have read and understood the explanations provided to me. I have had all my questions answered to my satisfaction. I have been given a copy of this consent form to keep.

_____ I agree to participate in the study.

_____ I decline to participate in the study.

Signature

Printed name

Date

Amber Argo
amberargo@tamu.edu
696-9307

Brian Stagner, Ph.D., research advisor
249 Psychology Building
bhs@psyc.tamu.edu
845-2549

VITA

AMBER LYNN ARGO

Permanent Address: 589 Christy Kay Lane
Rhome, TX 76078

Educational Background:
Texas A&M University, College Station, TX, Major: Psychology, B.S.
Expected Graduation Date: May 2002, Grade-Point Average: 4.0

Course Work in Psychology:

Abnormal Psychology	Developmental Psychology	Psychological Assessment
Personality Psychology	Physiological Psychology	Psychology of Women
Introduction to Psychology	Statistics for Psychology	Experimental Psychology
Psychology of Religion	Psychology of Learning	

Professional Experience:

Student Counseling HelpLine, Texas A&M University, College Station, TX

Volunteer available to handle calls from anyone who requires the service.

California Specialty Hospital, Vallejo, CA

As a mental health aide and creative therapist, facilitated and co-facilitated therapy sessions with adults, adolescents, and children. Assisted other staff in maintaining a safe environment for patients and employees.

LifeWorks, Austin, TX

Volunteer assisting coordination and supervision of groups for children from low income housing. Group sessions' goals were to give the children an activity, boost their self-esteem, and teach them better communication skills.

ALPS Program, Texas A&M University, College Station, TX

Worked in a microbiology lab and presented the information learned from the experience.

Honors, Awards, and Organizations:

- 2002 Gathright Award (Highest GPA in my class of the College of Liberal Arts)
- Scholarships from Texas A&M University, Austin Livestock Show, and Cinemark
- ASPIRE Mentor (Helped freshmen become adjusted to the University setting)
- Psi Chi Member (Psychology Honor Society)
- American Psychological Association Student Affiliate
- Dean's List - 5 Semesters

Presentations:

- Twenty-Fifth National Convening of Crisis Intervention Personnel in Chicago, IL
Critical Incidence Stress Debriefing: Conceptual Overview and Practical Application in the Aftermath of the Texas A&M University Bonfire Tragedy.
- Twenty-Sixth National Convening of Crisis Intervention Personnel in Chicago, IL
Assessment of Active Listening Skills in HelpLine Volunteers

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