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A study of the effects of training in empathy and meditation upon the empathy and esp scores of undergraduate subjects

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A STUDY OF THE EFFECTS OF TRAINING IN EMPATHY AND
MEDITATION UPON THE EMPATHY AND ESP SCORES OF
UNDERGRADUATE SUBJECTS

AN ABSTRACT
SUBMITTED TO THE FACULTY OF THE SCHOOL OF EDUCATION,
ATLANTA UNIVERSITY IN PARTIAL FULFILLMENT OF THE
REQUIREMENTS FOR THE DEGREE OF
DOCTOR OF PHILOSOPHY IN GUIDANCE AND COUNSELING

BY
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ATLANTA UNIVERSITY
ATLANTA, GEORGIA
AUGUST 1980
ABSTRACT

The problem involved in this study was to determine the effects of two different training modalities upon the empathic skills of 42 undergraduate college students who had selected some helping profession as a career goal. An experimental design was developed wherein the 42 subjects were randomly assigned to two experimental groups and a control group. One experimental group was given 16 hours of didactic instructions in empathy skills, the other experimental group was subjected to 16 hours of training in meditation. The control group participated in music listening activities during the training period. Post-test empathy scores for the two experimental groups were compared to each other and to the control group.

It was also posited that different interpersonal skills may exist within a single individual in comparable amounts. This probability led to efforts to determine the relationship between empathic ability and extra-sensory perception, which is the ability to perceive through other than the usually identified senses. To obtain the ESP scores the Zener ESP Test was administered to the three groups of subjects. The next step was to find the coefficients of correlation between the ESP scores and the empathy scores.

The data of the study were analyzed in the following manner;

1. Group means were computed for the empathy test scores and ESP scores of the subjects.

2. A re-test reliability coefficient was computed for the empathy test scores of all subjects.
3. A randomized block analysis of variance was computed and the appropriate significance levels were determined.

4. The empathy test mean scores for each group were analyzed by the t-test of significance.

5. A Pearson Product Moment Correlation was computed for the empathy test scores and the ESP scores of each group independently.

6. A Pearson Product Moment Correlation was computed for the empathy test scores and the ESP scores of the total group.

Findings

Testing of the hypotheses of the study resulted in the following findings:

1. A t-ratio of .66 with 13 degrees of freedom p > .519 was not significant at the .05 level when the mean empathy scores of the empathy group and the control group were compared.

2. A t-ratio of 2.31 with 13 degrees of freedom and p > .038 was significant at the .05 level when the mean empathy scores of the meditation group and the control group were compared.

3. A t-ratio of .88 with 13 degrees of freedom and p < .395 was not significant at the .05 level when the mean empathy scores of the meditation group and the empathy group were compared.

4. An F-ratio of 1.338 was not significant at the .05 level, for the empathy scores of the empathy, meditation, and control group.

5. An r of -.06 with p > .42 was not significant when the empathy scores and the ESP scores of the empathy group were correlated.

6. An r of -.425 with p > .065 was not significant when the empathy scores and the ESP scores of the meditation group were correlated.

7. An r of -.51 with p < .03 was significant when the empathy scores and the ESP scores of the control group were correlated.

8. An r of -.37 with p < .008 was significant when the empathy scores and the ESP scores of all subjects were correlated.
Conclusions

Within the limitations of the study the following conclusions may be drawn:

1. The null hypothesis of no significant difference between the empathy scores of the empathy group and the control group is accepted. Subjects trained in empathy did not earn significantly higher scores than subjects who did not receive training.

2. The null hypothesis of no significant difference between the empathy scores of the meditation group and the control group is rejected. Meditation training indicates a trend toward influencing higher empathy performance for subjects trained in the technique.

3. The null hypothesis of no significant difference between the empathy scores of the empathy group and the control group is accepted. Empathy training did not have a significant effect on empathy scores.

4. The null hypothesis that there is no significant difference between the mean empathy scores of the empathy, meditation, and control group is accepted. There were no significant interaction effects of the total group of subjects.

5. The null hypothesis of no significant correlation between the empathy scores and the ESP scores of the empathy group is accepted. Subjects on the whole did not show similar levels of performance on the empathy test and the ESP test.

6. The null hypothesis of no significant correlation between the empathy scores and the ESP scores of the meditation group is accepted. There is no relationship between the empathy test performance and the ESP test performance of the subjects who received meditation training.

7. The null hypothesis of no significant correlation between the empathy test scores and the ESP test scores of the control group is rejected. There is a positive relationship between the empathy test performance and the ESP test performance of the subjects in the control group.

8. The null hypothesis of no significant correlation between the empathy test scores and the ESP test scores of the empathy, meditation and control groups combined is rejected. There is a positive relationship between the empathy test performance and the ESP test performance of the total group of subjects in the study.
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BY
GWENDOLYN JOHNSTON ROQUEMORE

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AUGUST 1980
DEDICATION

This study is dedicated to my dear ones:

To my mother and father for their generosity, encouragement and unconditional love.

To my son, Shaar Rawn, who has been patient and accepting of my preoccupation with my goals.

To my grandmother who left me a legacy of strength and determination.

To my deceased sister Ernestine, who always believed in me.

To my sisters Mary and Gloria, who gave me constant encouragement and moral support.

To my husband Clarence, who tried to understand it all.
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# TABLE OF CONTENTS

**DEDICATION** ................................................................. 1

**ACKNOWLEDGEMENTS** .................................................. 11

**LIST OF TABLES** ....................................................... 5

**CHAPTER**

I. **INTRODUCTION** ....................................................... 1
   - Rationale ................................................................. 7
   - Evolution of the Problem ........................................... 14
   - Statement of the Problem .......................................... 17
   - Purpose of the Study ................................................. 17
   - Hypotheses of the Study ............................................ 18
   - Definition of Terms ................................................ 19
     - Empathy ............................................................... 19
     - ESP ........................................................................ 19
     - Meditation ............................................................ 21
   - Limitation of the Study ............................................... 22

II. **REVIEW OF THE LITERATURE** ......................................... 23
   - Empathy ................................................................. 23
   - Meditation .............................................................. 40
   - Extra-Sensory Perception and Psychological Theories ........... 54
   - Psi-Hitting or Psi-Missing ........................................ 65

III. **DESIGN OF THE STUDY** ............................................... 67
   - Locale of the Study .................................................. 69
   - Subjects ...................................................................... 69
   - Procedure .................................................................... 71
   - Description of the Instruments ..................................... 72
     - The Counseling Skills Evaluation ................................. 72
     - The Zener ESP Test .................................................. 77
   - Research Procedure and Methodology .............................. 80
   - Data Collection ........................................................ 106
   - Treatment of the Data ................................................ 109

IV. **PRESENTATION, ANALYSIS AND INTERPRETATION**
    OF THE DATA ............................................................... 111
   - Hypothesis I ............................................................ 114
   - Hypothesis II ........................................................... 115
   - Hypothesis III .......................................................... 116
   - Hypothesis III-A ....................................................... 117
   - Hypothesis IV ........................................................... 118
LIST OF TABLES

Table

I. Randomized Block Design .......................... 68
II. Academic Classification of Subjects ................. 70
III. Career Choice of Subjects .......................... 70
IV. Percentile Ranks for CSE Scores ...................... 76
V. Distribution of Subjects Scores on the Counseling Skills Evaluation by Groups ....................... 112
VI. Distribution of Raw Scores on the Zener ESP Test ............ 113
VII. Comparison of Empathy Scores for the Empathy Group and the Control Group .................. 114
VIII. Comparison of Empathy Scores for the Meditation Group and the Control Group ............... 115
IX. Comparison of Empathy Scores for the Meditation Group and the Empathy Group .................. 117
X. Analysis of Variance of Empathy Test Scores for the Empathy, Meditation and Control Groups .... 118
XI. Group Means and Percentile Ranks of Empathy Test Scores ........................................ 118
XII. Distribution of Pre-Training CSE Scores and Percentile Ranks by Groups ................. 124
XIII. Frequency Distribution of the Percentile Ranks of Pre-Training CSE Scores ...................... 124
XIV. Distribution of CSE Scores by Sex .................... 126
XV. Career Choices of Subjects and Pre-Training CSE Scores ................. 127
CHAPTER I

INTRODUCTION

The human service professional is a practitioner who functions in many styles, and executes a variety of skills and techniques in his or her interpersonal activities. Highly skilled and semi-skilled helpers may assume very impactful roles in the lives of the individuals they encounter. Healing factors have frequently been designated as traits, abilities, sensitivities and skills vested in the helping person. Concomitant with the variables cited above, extra-sensory factors have been recognized as possibly contributing to one's capacity to exert favorable influences upon the lives of those who contract for helping services. A growing list of helping traits and behaviors challenges educators and professional trainers to determine which traits or behaviors should be developed in aspiring human service professionals. There is no reason to believe that all of the helping behaviors or traits that can ameliorate the problem situations of helpees have been identified.

Extensive research has been conducted to determine the traits which when present in helping individuals can produce favorable change in the problem situation of a patient or client. These traits were observed in high-functioning individuals regardless of the specific role or function they perform as professional helpers.¹ The researchers cited below pro-

vide a summary of traits that are viewed as important to helping activities.

Wolfe asserts that whether one is a psychiatrist, psychologist, social worker, nurse, physician, parent, teacher or counselor, the individual can be effective in interpersonal relationships regardless of his theoretical orientation. The inference is, that the traits or behaviors one employs in the helping process is more important than the professional label assigned to his function.

If a human service professional is capable, expresses interest in his clients, maintains their confidence and is objective in his attitude, then he will be viewed favorably by his clients.

Further focusing on the behaviors of human service professionals, Benjamin believes the individual should cast aside any "mask," "facade" or "professional equipment" that creates a barrier between the client and the professional.

Three levels of understanding are emphasized by Benjamin as essential ingredients for the execution of successful interpersonal relationships.

1. One should understand the client through the eyes of others.
2. Understand the client through one's own eyes.
3. Understand with the client.

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4Ibid., p. 42.
Harvey and his associates sought to select lay counselors with certain characteristics which are non-intellective. They attempted to select persons who exhibited a sincere regard for others, tolerance and the ability to accept people with values different from their own, a healthy regard for self, a warmth and sensitivity in dealing with others and a capacity for empathy.¹ When persons, with the above characteristics, ventured into a training program, according to Carkhuff, it provided them with improved skill application in their human service activities.²

Empathy, warmth and genuineness have been identified as superior traits for counselors and other human service workers. The literature section of this study describes studies that lend support to this assertion. Among lay human service workers and formally trained human service professionals, the above traits were observed as being highly facilitative during the helping process. According to evidence examined by Carkhuff, lay persons can effect constructive changes in clients to as great a degree as professional practitioners.³ The findings suggest that training is not the only variable which contributes to the positive outcomes of human service activities. There is evidence that some individuals may possess therapeutic traits intrinsically. Arbuckle notes that lay therapists and lay helper groups such as Alcoholics Anonymous and Neurotics Anonymous have had well documented suc-


cess in helping individuals resolve problems. Some individuals who have been helped by quasi-untrained helpers have been unable to benefit from professional helpers. On the basis of the foregoing observations, we may reasonably assume that empathy and genuineness were expressed by the untrained helpers that Arbuckle identifies.

In looking at the helping activities of a variety of practitioners who reputedly offer help to clients through extra-sensory abilities, we acknowledge the possibility that what has been labeled as extra-sensory ability may be a level of empathy. One may also conjecture that these practitioners may have provided other facilitative conditions that contributed to their helping roles. Many individuals of all intellectual, social and economic levels engage their helping services. A brief profile of some of these non-traditional practitioners is included in the section below.

Olaf Jonson has been a subject of extra-sensory experiments at Duke University and the University of Virginia. He uses his psychic abilities of telepathy, clairvoyance, picture transmission and mediumship to help solve crimes and assist individuals with their personal problems. Laboratory data and observations substantiated his unusual abilities.

Mrs. Eileen Garrett was probably the most scientifically studied individual with reputed extra-sensory ability. She has been subjected to tests of psychology, extra-sensory perception, electro-encephalography, neurology, biochemistry, physiology, hypnosis and psychoanalysis. Many

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famous psychologists, including Dr. Ira Progoff, Dr. Adolph Meyer, Dr. J. B. Rhine and Dr. William McDougald, have observed and verified Mrs. Garrett's psychic fears.\(^1\) Due to what appears to be accurate readings, predictions and psychic advice to many individuals, scientific investigators commissioned Mrs. Garrett's talents to be utilized exclusively in the research of psi abilities.\(^2\) Up until her death in 1970, she retained her psychic abilities.

Mrs. Gloria Stewart, a noted medium and clairvoyant was subjected to many laboratory tests to validate her extra-sensory abilities. For a period of four years, she was subjected to innumerable card guessing experiments with rigid statistic controls. Her average scores on card guessing was 25 per cent, indicating a 10-1 ratio that her extra-sensory performance was not due to chance.\(^3\)

Observations of the above individuals represent a few of the studies conducted to measure objectively the extra-sensory abilities of psychic practitioners who have gained outstanding reputations for helping clients through the use of clairvoyance, mediumship, readings, and advising. There are several practicing psychics who have not been subjected to such objective scientific study of their abilities, yet there are many individuals who seek their helping services. Among the contemporary individuals who reputedly utilize extra-sensory perception in their interactions with clients are Jean Dixon, Jane Hudson, Omar, Jack Swartz, and Sybil Leek.

\(^{1}\)Ibid., p. 173.


Through a demonstration of their abilities to feel or perceive the emotions, feelings and thoughts of the communicant, these helpers exhibit abilities that are regarded as beneficial to helping activities. It seemed tenable to consider extra-sensory perception and empathy as acceptable skill dimensions that might affect positive outcomes in interpersonal helping situations.

The traditional therapeutic models have not sufficiently identified all the variables of helping activities that produce the most favorable change in a client's troubled situation. Extra-sensory perception might prove to be a critical element of empathic communication. Walker sums up this similarity in the statement:

Sometimes we have a feeling that we have established a close relationship with another mind. In moments of relaxation and of freedom from the compulsion of the ego, we feel and understand one another in a way in which we did not understand one another before.¹

Walker cites the growing feeling among parapsychologists that on unconscious levels individual minds come into more intimate contact with one another than we formerly believed to be possible.² These statements may be interpreted in the context of ideas about empathy.

Present theories relating to empathy define it as a process comprising several dimensions. Insight is considered an aspect of empathy


²Ibid., p. 241.
Hastorf and Bender contend that empathy is a combination of sensory, imaginative and intellectual processes. Arnold Buchheimer views empathy as both an effective and abstracting process. The more comprehensive aspects of empathy will be explored in the literature review of this study.

The helping activities of individuals who claim to use extra-sensory perception with helpees, do not preclude the possibility that empathic understanding was expressed toward their clients. Empathy and extra-sensory perception may interact in a manner similar to empathy, warmth and genuineness to enhance helping conditions. It may be that ways of increasing empathy may produce similar levels of extra-sensory perception in subject responses.

Rationale

The identification and development of desirable traits and behaviors for human service professionals has been the subject of several research investigations. Studies conducted by Wrenn (1951), Mowrer (1951),


Patterson (1967), and Benjamin (1947), are representative of the research endeavors that have yielded significant information regarding the traits of human service professionals that are functional in their interpersonal activities.

Among the traits that have been related to effective interpersonal functioning, empathy has been designated as a favorable trait for human service professionals. Kurtz and Grunman assert that there is little doubt that there is a relationship between empathy and positive therapy outcomes. In support of the above statement, Truax and Carkhuff contend that the level of a therapist's accurate empathy determined the amount of intra-personal exploration that takes place in a client. Intra-personal exploration is considered to be a critical variable in the therapeutic process. Several theorists cited in the literature agree upon the importance of empathy as a beneficial trait for effective human service professionals.

Viewing helping activities from a psychoanalytic perspective, one recognizes the existence of a number of human service practitioners who claim to have extra-sensory ability. These individuals are engaged by clients to provide help with their problems through the use of extra-sensory perception. Sigmund Freud, in discussions of psychoanalysis and telepathy,

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2 Benjamin, The Helping Interview, pp. 56-54.


which is an extra-sensory trait, believes that there is a relationship between psychoanalysis and telepathy.\footnote{George Devereaux, *Psychoanalysis and the Occult* (New York: International Universities Press, Inc., 1973), p. 81.} In spite of the significant role that Freud has played in the development of helping activities, this researcher accepts the possibility that telepathy might be evident in other helping activities, not just in psychoanalysis.

There are numerous references to the relationship of empathy to extra-sensory perception as functions in helping interactions in the literature. It seemed reasonable and challenging to investigate the degree to which aspiring human service professionals reveal the traits of empathy and extra-sensory perception. There is a strong possibility that both abilities may be operative in helping interactions with clients. It is also tenable that the measure of an individual’s level of empathy at a given time may be positively related to a measure of his or her extra-sensory ability. It is also tenable that extra-sensory ability may be another kind of empathy.

It has been reported by Sigmund Freud that individuals in a dyadic relationship, such as a therapist-client situation, transmit and receive non-verbal messages and information through extra-sensory channels. He further contends:

> On the basis of much experience, I am inclined to draw the conclusion that thought transference of this kind comes about easily at the moment at which an idea emerges from the subconscious or as it passes over the primary process. In this manner strongly emotionally colored thoughts and ideas can be successfully trans-

\footnote{Ibid., p. 81.}
ferred between individuals without difficulty.\textsuperscript{1}

Through his statements regarding thought transference, Freud lends support to the rationale for this study in that a given individual's empathic awareness may come through extra-sensory channels.

Further justification for the present study is the fact that several major universities are engaged in research related to the study of human sensitivity under the discipline of parapsychology. The objectives of much of the research are the examination and assessment of factors that may influence the communication of ideas, events or feelings between individuals. Rutgers University has conducted studies of extra-sensory perception among executives. The University of Pittsburgh has conducted research on telepathy and personality factors.\textsuperscript{2}

For several years, Dr. Gertrude Schmeidler, a psychiatrist, has been conducting ESP experiments at the City College of New York. Her subjects include students, medical patients and volunteers from the general public.\textsuperscript{3}

At the University of Virginia, Dr. Rex Sanford has carried out experiments using ESP precognition tests.\textsuperscript{4} Other universities that are conducting research in the field of parapsychology are the University of Texas and the University of California at Davis.

\textsuperscript{1}Ibid., p. 116.


\textsuperscript{4}Ibid., p. 170.
Many of the outstanding researchers in the field of parapsychology are conventionally trained psychologists, psychiatrists, clergymen, physicists, chemists and engineers. Each of the former utilize the skills extracted from his or her special discipline to meet the challenges of parapsychological research. The initiator of this research study has been conventionally trained as an educator and counselor. For several years the writer has been interested in the various aspects of interpersonal communication that appear to be facilitated by known as well as unknown variables. Over the past several years, considerable time and energies have been directed toward the formal and informal study of extra-sensory traits as well as traditional traits that may influence positive interpersonal communications and facilitate the helping process.

The researcher perceived meditation as a beneficial activity for individuals involved in a helping role with other human beings. Empathy and extra-sensory perception are also desirable traits for helpers and other human service professionals. Although there is general agreement as to the explanation of these terms, the following paragraphs are presented in order that the reader will know the frame of reference from which the study was proposed.

Meditation is a mental and physical process that allows the individual to enter a deep state of relaxation. In meditation the mind becomes still, one's body assumes a restful state and the mood becomes calm. As one focuses on a single thought, visual image or sound, the mind is emptied

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1 Ibid., p. 169.
and cleansed of distraction. Stimuli such as conversation, distracting thoughts and noise are neutralized as one experiences a sense of inner-peace and well being. The ego becomes merged with the inner self and all perceptions unite into an expanded awareness and increased flow of energy. Meditation results in an expanded consciousness and the power to use all inner resources is strengthened. Daily and consistent meditation relieves anxiety, increases sensitivity, and sharpens the memory.

Meditation tends to draw all the perceptions together into a common experience.

Empathy is the ability of an individual to experience the thoughts, behaviors and feelings of another individual as if they were one's own. When one is empathic, he or she is sensitive to another's deeper feelings and experiences as well as the meanings behind these factors. The empathic human service professional is able to accurately communicate a level of empathy that can assist a client in resolving his or her problem situation. Empathy is similar to intuition and interpersonal sensitivity.

Extra-sensory perception is a way of knowing about events, situations or human conditions without using the traditional senses. For example, one may know another's thoughts or be able to read the contents of a sealed letter by using extra-sensory perception. A certain amount of extra-sensory ability may allow one to obtain information about another individual's problem situation or life circumstances that is not reported in an interview or case history. Specific situations that could be accommodated by extra-sensory knowledge would be the following:

1. When a client offers resistance to self-disclosure.
2. When the client cannot identify his real problem.
3. When the client is deficient in verbal communication skills.
4. When a client employs psychological defense mechanisms.
5. When a helpee is generally uncooperative.

Empathy, meditation and extra-sensory perception may increase an individual's sensitivity, awareness and insight. In interactions with other individuals in a helping activity, empathy and extra-sensory perception will interact in some favorable manner if they are positively correlated. Meditation contributes to the general well being of the individual as well as enhances the awareness and sensitivity. One who meditates will often have a greater capability to express empathy and to utilize extra-sensory perception.

Tantamount to the reasons for undertaking the present research are the following assumptions:

1. Human service professionals who believe in the existence of extra-sensory perception will find it very easy to accept and understand their clients who claim to experience ESP.
2. Since all the levels of empathy have not been irrefutably established, extra-sensory perception may characterize another dimension of empathy.
3. Human service professionals who accept the ESP hypothesis will become aware of extra-sensory abilities functioning in their own helping activities.
4. Noting that the empathy functioning of individuals in training for human service professions has been favorably influenced by both didactic and experiential methods, it is possible to compare the impact of two different training methods on the sub-
ject's empathy scores.

Many researchers have found that some practitioners are unable to demonstrate the accuracy of clients' meanings and feelings to a greater extent than nonpractitioners. The intent of most training programs is to help trainees learn to perceive the meanings and feelings of clients accurately so that they may implement empathic procedures in their helping interactions. The selection of a group of subjects who plan to pursue careers in human service holds the potential of providing data that can eventually be correlated with their effectiveness in professional work.

Evolution of the Problem

After several observations of doctors, counselors, psychologists, social workers and teachers in interpersonal encounters of a helping nature, the researcher was made aware of the differential levels of empathy that were discernible in their helping transactions. These differences seemed to be related to their effectiveness. It was conjectured through these observations that if empathic understanding is an important trait for helping individuals, then it will be beneficial for training programs to identify and develop empathic ability in prospective human service professionals.

In addition to the above observations, the researcher has worked in various settings as a social worker, teacher, counselor and program coordinator, where clients or patrons expressed serious concern for the inability of certain professionals to 'relate,' 'understand,' 'empathize' or to assist them with their problems or meet their helping needs. On the other hand,

there are individuals in the professions cited above, who were greatly sought after and held outstanding reputations for their ability to "relate," "empathize" and assist clients in positive ways.

At another level of helping the writer made an informal survey of the professional services of mediums, psychic counselors, psychic healers, and spiritual advisors affiliated with non-traditional helping organizations including The Institute of Metaphysics, the Alexandrian Institute, The House of Hope, Spiritus and Foundation of Truth. This survey revealed that there was extensive solicitation and patronage of the helping services of a variety of practitioners purported to possess extra-sensory ability. After experiencing sixty personal encounters with a variety of these non-traditional helpers, it was evident to this writer that many of these individuals were providing conditions for better adjustment and the resolution of client problems. Empathy appeared to be a salient factor in most of these encounters as well as some evidence of extra-sensory ability. Many other clients interviewed by the researcher share the aforementioned opinion.

Reflecting upon both the positive and negative experiences with non-traditional helpers, the researcher became interested in questions such as the following:

Is empathy related to extra-sensory ability?

Will the use of two different training methods, one basically didactic and the other experiential, produce significant differences in empathy scores of experimental subjects?

If one has a measurably high or low level of empathy, would the individual have a correlatively high or low level of extra-sensory ability?
It may be that researchers have not explored the full range of procedures to facilitate and maximize the function of empathy in helpers. Educators do not yet agree on how trainees' ability to perceive accurately the meanings and feelings of others can be improved.\(^1\) To this researcher it seemed tenable to select a research problem that would investigate the effects of different training methods on the empathic ability of human service professionals. Lesh conducted a study to determine the impact of meditation training and practice on the development of empathy in counselors.\(^2\) Lesh's research provided an empirical model for the present experimental training design. The review of literature revealed no previous investigation which combined a study of ESP with empathy which are both essentially non-intellective traits.

According to Daniel Goleman, the connection between proficiency in meditation and extra-sensory abilities was recognized in the writings of the Yoga Patanjali 1500 years ago.\(^3\) Among the powers that one could attain through Yoga meditation was knowledge of the nature of another's mind which was accomplished through the total stilling of the mind and pointed concentration.\(^4\)

The implementation of a training approach that might increase the trait of empathy and examine its relatedness to extra-sensory perception in

\(^1\)Ibid., p. 58.


\(^4\)Ibid., p. 216.
a given subject posed a challenge to the researcher. It appears that few researchers have considered the possibility that there might be a positive relationship between one's extra-sensory awareness and empathy functioning. It was conjectured that this research effort might lend some innovative direction to the identification of a new process, contextual variable or training approach in the measurement and understanding of the intrapsychic components that may be operative in the expression of an individual's empathic abilities.

**Statement of the Problem**

The problem of this study had two aspects. The first aspect of the study was to determine if training one group of subjects in empathy and a second group in meditation techniques would yield higher mean scores on the Empathy Scale of the Counseling Skills Evaluation than those obtained by a control group. The second aspect of the study was to determine if there would be any relationship between the mean scores of each group of subjects on the Empathy Test and the scores they earned on the Zener ESP test. The purpose of the second aspect was to test the assumption that empathy and extra-sensory perception are related.

**Purpose of the Study**

A search of the related literature revealed some information regarding the impact of various training techniques on the empathic ability of various human service professionals or practitioners. There was a noticeable absence of studies comparing individual's empathic ability with extra-sensory ability. The purpose of this study was to investigate the effects
of empathy training and meditation on the empathy functioning and extra-
sensory perception of a sample of junior and senior college students, and
to investigate the relationship between empathy and ESP.

Specifically, this study examined the effects of meditation and
empathy training on the empathy and ESP scores of 3 groups of undergraduate
subjects who plan to pursue careers in human service, and determined the
correlations between empathy and ESP scores for the same subjects.

Hypothesis of the Study

The study tested the following null hypothesis:

1. There is no significant statistical difference between
   the empathy test scores of the subjects trained in empa-
   thy skills and the subjects who did not receive training.

2. There is no significant statistical difference between
   the empathy test scores of the subjects trained in medi-
   tation and the subjects who did not receive any training.

3. There is no significant statistical difference between
   the empathy scores of the subjects trained in empathy
   skills and the subjects trained in meditation techniques.

4. There is no significant positive correlation between
   the Empathy Test scores and the ESP scores of the sub-
   jects trained in empathy skills.

5. There is no significant correlation between the Empathy
   Test scores and the ESP scores of the subjects trained
   in meditation techniques.

6. There is no significant correlation between the Empathy
   Test scores and the ESP scores of the subjects who do
   not receive training.

7. There is no significant correlation between the Empathy
   Test scores and the ESP scores of all the subjects, in-
   cluding those in the training groups and the non-training
   group.
Definition of Terms: Empathy

To provide a frame of reference for readers of this study definitions of key terms used in the study are as follows:

Affective - characterized by feelings, emotions and moods that influence behavior.

Behavioral Sciences - the science which studies the activities of man through observation and experimentation.

Empathy - identification with and insight into another person’s feelings.

Facilitative - helpful and encouraging to the communicative process.

Helpee - the recipient of helping services.

Helper - the individual that provides assistance in solving another individual’s problems.

Human service professional - a professionally trained service provider in the fields of medicine, teaching, social services, psychological services and health professions respectively.

Human service workers - one who assists human service professionals in providing human resources and services to individuals and groups.

Therapeutic - the quality of having a healing or assuaging effect on a human condition or situation.

Definition of Terms: ESP

Agent - the sender in ESP tests. The person whose thoughts or mental states are to be determined by the percipient.

B.T. (Basic Technique) - the clairvoyance technique where each card is set aside by the experimenter after the card is called by the subject.

Call - the subject’s response or guess in trying to identify the target in an ESP test.

Clairvoyance - the extrasensory perceiving of future occurring objects or events on the part of an individual.

C.R. (Critical Ratio) - a measure to determine whether or not the observed observation is greater than the expected random fluctuation about the average.

Deviation - the amount an observed number of hits or an average score varies either above or below the mean chance expectation.

Displacement - ESP responses to targets other than those for which the calls were intended.

DT - down through; the clairvoyance technique in which the cards are called down through the deck before any are removed or checked.

ESP - extra-sensory perception; awareness of or responses to an external event or influence not apprehended through the traditional sensory channels.

ESP Pack - twenty-five ESP Cards 1. closed pack, an ESP deck containing five each of five symbols; 2. open pack, an ESP deck made up of ESP symbols selected in random order.

G.E.S.P. - general extra-sensory perception. A technique designed to test the occurrence of extra-sensory perception permitting either telepathy or clairvoyance and precognition to operate in combination.

Para-psychology - a division of psychology dealing with behavioral or personal effects that do not fall in the scope of physical principles.

Percipient - the subject or person who receives the information in an ESP test.

Precognition - cognition of a future event which could not be known through rational inferences.

Psi missing - exercise of psi ability in a way that avoids the target the subject is attempting to hit.

Psi - a general term to identify personal factors or processes which are non-physical in nature.

Reading - a verbal report of circumstances surrounding one's life or character traits.

Run - a group of trials for guessing or calling the symbols on the ESP Cards.
Score - the number of correct hits in an ESP run. 1. total score, the total number of correct hits in a given number of runs. 2. average score, the total number of hits divided by the number of runs.

Significance - a numerical result is significant when it equals or surpasses some criterion of a degree of chance improbability. The criterion commonly used in parapsychology is a probability value of .01 or less, or a deviation in either direction such that the critical ratio is 2.58 or greater.

Spontaneous Psi Experience - a natural unplanned occurrence of an event or an experience that involves a parapsychical observation.

Target - the stimulus object in clairvoyant or precognition tests, in telepathy the mental state of the agent.

Telepathy - extrasensory perception of the mental activities of another person. It does not include the clairvoyant perception of objective events.

Trial - in ESP tests, a single attempt to identify a stimulus object. ¹

Definition of Terms: Meditation

Alpha - a level of the electrical activity of the brain operating in the posterior brain.

Beta - a second level of brain activity operating in the anterior part of the brain.

Checking - verifying that a meditative state exists.

Mantra - a sound that when repeated consistently exerts a refining influence on the nervous system.

Meditation - a mental state in which the attention is turned inward toward the subtle levels of thought. ³


³Ibid., p. 190.
Limitations of the Study

Considering the fact that subjects in this study represent a small random sample of individuals planning to pursue careers in human service, the results of the study may not be representative of college students in a different setting.

The study is also limited by the fact that data obtained for the groups may not be predictive of individual behavior in future professional activities or training events.

It is tenable that the instruments used to measure the traits studied do not show enough consistency in their reliability and construct validity to give the most efficient measures. This is a limitation of most measuring instruments for mental and personality traits.

In view of the lack of consistency in the accuracy of empathy measures and the vacillating nature of extra-sensory perception, there may have been limitations imposed by the brevity of the experimental training period. Extended training may have produced different results.

Finally, laboratory and simulation situations cannot be judged as having the same potential for eliciting effective empathic behavior as a real life interpersonal situation. These limitations suggest that caution be observed in applying the findings of this study to other groups and to individuals.

One may conjecture that a sample of subjects with characteristics similar to the present sample would yield data comparable to that obtained in this study.
CHAPTER II

REVIEW OF THE LITERATURE

The literature review of this study is divided into three main sections. Content related to empathy is discussed in the first section. Research studies and readings pertaining to meditation are included in the second section. The final section of the review discusses psychology, psychiatry and extra-sensory perception, and summarizes the references.

Empathy

Empathy has been identified as a vital function in the helping process. It appears to be critical to the learning and relearning process of individuals who seek to help others resolve problem situations. Any improvement in the patient's or client's functioning within a helping relationship is positively related to empathy according to Carkhuff. The higher the level of empathic functioning on the part of the human service professional, the more one can predict positive change on the part of a client.1 Evidence of the positive relationship between the quality of empathy and client improvement has led to systematic efforts to measure empathy and to train prospective counselors and human service professionals to demonstrate empathic behavior.2

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Many attempts have been made to define empathy or to describe its characteristics. There is considerable agreement among theorists as to what empathy is and how it functions.

According to Buchheimer and Carter, empathy is a complex multidimensional concept. It takes in traits that include warmth, compassion and understanding. E. Grendlin agrees with Buchheimer by describing empathy as understanding and sensing the meaning which the client is experiencing so as to help the client focus on that meaning to produce constructive outcomes in therapy. In a similar vein, Murphy describes empathy as the direct apprehension of the state of mind of another person without feeling as the other person does. Finally, Benjamin Wolman defines empathy as "the ability to perceive the mood and feelings, sufferings and situation of another person." The definitions all convey the idea of empathy as a way of understanding others on a cognitive and an affective level.

In less definitive terms, several theorists have expounded upon the functional nature of empathy and its applications. These explanations are analogous to operational definitions of the concept of empathy. The psychogenesis of empathy is evident in the process of identification according to Buchheimer and Carter, "An Analysis of the Empathic Behavior of Counselor Trainees in a Laboratory Practicum," pp. 352-361.


ing to David Stewart. He states that empathy is evident when a significant emotional tie is formed between two persons who are striving for a common goal. This emotional tie is the psychological ground of communication. The fact that an empathic response involves feelings leads to understanding how the emotional tie develops in a helping situation. In the opinion of Carkhuff, empathy is manifested when the helper crawls inside the helpee's skin and has the same feelings as the helpee. He also sees awareness as the key to empathy. The therapist must be aware of his own feelings and reactions, yet experience the outward signs of the client that relate to his inner feelings. One may interpret these statements as requiring that a helper carry out the dual function of feeling with the helpee yet retaining an awareness of his own feelings.

Florence Kaslow makes a statement that seems to distill the essence of empathy. Her contention is:

"Empathy is a strategic factor both in making an accurate dynamic diagnosis and in establishing rapport essential for developing a therapeutic alliance... As a therapeutic tool, empathy encompasses those acts that serve to satisfy an individual's need states and to establish a congruent relationship between the helper and the helpee."


Kaslow's statement emphasizes the importance of empathy as both a means to diagnose a client's needs, and also to help meet his needs in the therapeutic situation. In her view, empathy is a necessary trait for the human service professional.

Robert Waelder regards empathy as "the source of our knowledge of the psychic life of others." Comparing empathy to intuition, he believes it is fundamental to worthwhile interpersonal and diplomatic relationships. One may interpret Waelder's ideas as comparing empathy to our intuitive ability to know about other individuals. This view seems to place empathy in the category of an innate ability that some individuals use to carry on worthwhile interpersonal relationships on more than the helping level.

The main implications of the preceding opinions are, that empathy is a special way of understanding another individual, conveying that understanding in a feeling manner to that person and thereby helping that person to ameliorate his problem situation. Succinctly stated, empathy is beneficial to positive interpersonal and helping relationships.

**Measuring Empathy**

The measurement of empathy is accomplished in a variety of ways. The Accurate Empathy Scale developed by Truax in 1961 has been utilized by many researchers. The scales have been validated through extensive psychotherapy processes and outcome studies. The scale consists of nine measures of Accurate Empathy which describe the level of client feelings.

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perceived and reflected by the professional helper. The range of helper responses begin at level I where the helper ignores the feelings of the client. The quality of responses progresses through level IX where the client's feelings are perceived with unhesitating, flawless accuracy. This scale has been used in establishing other scales and as criterion for developing training programs.

Robert Carkhuff developed a series of guidelines for the measurement of empathic communication. The content of the helper's responses to the helpee were incorporated into a five point scale for measuring empathic functioning. Level I of the scale is used to designate the absence of empathic understanding, whereas levels II-IV represent intermediate and progressively higher levels of empathy. Level V represents the most helpful level of empathy. The Carkhuff Scale is frequently used to measure the empathic responses of counselors, therapists and a variety of human service trainees. Responses may be given to a variety of client-helper interview content, including written excerpts of dialogue, audio-taped interviews, video-taped segments of actual interviews or simulated portrayals of client-therapist interactions that are based on real life problem situations. The simulated interactions may either be with live sub-


jects or reproduced in the form of a movie. Carkhuff has set the mini-
mally helping level at Level III.

The Barrett-Lennard Inventory of Empathy uses six measures of
therapist empathy. Like the aforementioned scales, a subject or trainee
may earn a numerical score that measures the depth and quality of his
empathic responses in a given situation. The items that are chosen for
individuals to respond to have been submitted to a screening procedure
wherein the items are selected by the fact that a number of expert coun-
selors or therapists have responded to them in a certain way.¹ Trainees
rate the empathic responses according to their understanding of the degree
of empathy expressed in the statements. The Barrett-Lennard Inventory has
been used in research and training.

A free response measure of empathy utilizes client statements that
contain emotion laden expressions. The technique is to have individuals,
usually helper trainees, listen to or read a paragraph of client talk.
The client talk is followed by a helper response. There is a continuing
segment of client talk which is followed by a void, which gives the trainee
the opportunity to give what he considers to be an empathic response. A
free response measure is evaluated by whatever criteria is set by the
examiner. The criteria for measuring may be a qualifying statement, a
numerical score or a combination of the two. Arbuckle has used the free
response test in much of his research.²

¹"Dugald S. Arbuckle, "The Development of an Instrument for the
Measurement of Counseling Perceptions" Journal of Counseling Psychology,
4 (Spring 1957): 308.

²Ibid., p. 305.
Sidney Wolf has developed an Empathy Scale for the Counseling Skills Evaluation which is based on the Carkhuff Scale. The instrument was developed to aid in the screening, evaluating and training of helping.¹ Wolf's scale ranges from one to five with midpoints between each step on the scale. Responses that were rated number one by judges reflect destructive responses, while responses rated as five are judged as very helpful. Respondents earn a difference score that indicates how closely their ratings correspond to those assigned by experts. The smaller the average difference score earned by a respondent, the greater amount of empathic judgment is demonstrated.² In view of the fact that the Wolf Counseling Skills Evaluation has not been in use very long, there were no research reports in the traditional professional journals which were reviewed for this study. Wolf, however, reports the use of his scale in training paraprofessionals and professionals.³

In an attempt to compare the empathic judgement of volunteer subjects, Greenberg, Kagan and Bowes employed a sequence of video tape counselor client episodes. The episodes depicted a wide range of emotional statements offered by clients. The procedure involved having subjects rate statements on a seven point scale. When a statistical analysis was made of the subjects' ratings, the researchers found a fifty percent variation among the respondents ratings of the clients emotions.⁴ Their find-

²Ibid., pp. 7-8.
³Ibid., p. 12.
ings indicated the wide disparities in empathic judgement that may be observed in the responses of untrained subjects.

A consensus of much of the research on empathy supports the idea that empathy is best measured through a numerical evaluation of the empathic responses of human service workers, both pre-professional and professional. It is non-consensual, however, whether the measures of empathy yielded by the instruments are valid or if they have a high degree of reliability. Bulmer notes that practitioners are unable to demonstrate accuracy of interpersonal perception to a greater degree than non-practitioners. He conducted a study to determine whether an individual's ability to perceive affect in others could be improved as a result of the individual having gained knowledge and understanding of certain concepts through direct teaching. He concluded that individuals who had not been taught about interpersonal concepts did not differ significantly from those who had been taught to be practitioners.¹ A similar conclusion was reached by Carkhuff who observed that lay persons often demonstrate empathic understanding to as great a degree as professionals.²

Focusing on the fact that empathy measures are often conducted to predict therapy outcomes, researchers have attempted to relate a helper's empathy score to his success or effectiveness in helping activities. Kurtz and Grunman maintain that data relating to empathy measures and therapist outcomes cannot be generalized to all therapy client populations.³ This

¹ Bulmer, "Improving Accuracy of Interpersonal Perception," pp. 38-41.

² Carkhuff, Helping and Human Relations, pp. 6-7.

raises the question, "has anyone been able to judge empathy with unquestionable accuracy?" For this researcher, the question can only be answered by continued research utilizing a variety of measuring techniques and instruments. The possibility of correlating empathy measures with measures of other abilities that resemble empathy may yield information relative to deeper levels of empathy or different kinds of empathy. In spite of the dissenting views on the accuracy of empathy measures, researchers continue to place confidence in the statistical measures of empathy.

There has been no attempt to describe or refer to all of the instruments and techniques that are used to measure empathy. The instruments described above have been referenced to illustrate the type of empathy measures that are frequently used in research and training. It is acknowledged that there are other empathy measures that may yield valid and reliable information for a particular research project. As researchers conceive new hypotheses, relating to empathy current measures will be modified and new measures validated.

Empathy Training

Studies undertaken to train individuals in empathy are cogent to the problem stated in the present study. A variety of studies are cited that describe several methods that have been employed to measure and increase empathy functioning on the part of trainees and professionals.

Truax and Lister utilized a three faceted training approach to study the effects of short term training upon the accurate empathy of a group of counselors initially low in empathy. The three training approaches included a therapeutic model wherein the trainees communicated high levels
of empathy to the trainees, a didactic approach to shape trainees' empathy responses and a quasi-group therapy approach to allow subjects to integrate the didactic training with their own personal goals. After a 40 hour training experience, the group as a whole showed significant gains in empathy. The mean empathy rating for the combined group (N=12) was 4.8. This rating compared favorably with the levels demonstrated by lay counselors who revealed mean scores of 4.5 and with the mean scores of graduate students in counseling and clinical psychology programs who attained a group mean empathy rating of 5.1 on a nine point scale.¹

From the results of this study, one may conclude that short term training can increase the empathy levels of trainees to a level comparable to the empathy functioning of practicing lay counselors or student in formal graduate programs.

A study of the effect of short term training on the interpersonal functioning of college students was conducted by Berenson, Carkhuff and Myrus. Three groups of undergraduates met for a period of eight weeks and received a total of sixteen hours training. A didactic training model was used for one group. After six weeks of training the didactic group was subjected to four hours of therapy. The second experimental group spent the first six weeks of training in therapy and were then assigned to four hours of discussion. There were no significant differences in the overall post experimental measures of interpersonal skills between the two groups. Both groups however, demonstrated improvement in their interpersonal skills.

The researchers concluded that a systematic program utilizing didactic and therapeutic techniques is superior to a loosely conceived training program.¹

A study of the impact of social work education on the empathic techniques of fifty-seven incoming and graduating students was undertaken by Thomas Keefe. He employed two experimental groups and a control group to determine the effect of meditation as compared to the effect of didactic experiential curriculum on the empathy performance of social work students. The Kagan Affective Sensitivity Scale was used to measure the empathy of first year students who were trained in meditation and second year students who were trained by a didactic communication method. The results of the study revealed that meditation training produced positive change in the empathic ability of the first year students. Their scores on the Affective Sensitivity Scale were significantly higher than the scores of the second year students and the control groups.² Keefe's study is relevant to the present study which compared the impact of meditation and a didactic method of empathy training on the empathy scores of student subjects. Although there was no statistically significant difference in the mean scores of the meditation and empathy trainees at the .05 level, the meditation group performed better than the empathy and control groups on the Counseling Skills Evaluation.


Reddy investigated the effects of training techniques that utilize feedback as a means of facilitating the learning of accurate empathy. He employed three experimental groups (N=36). Subjects were given the task of responding empathically to episodes of psychotherapy presented through a film. One group of subjects received immediate feedback regarding the accuracy of their responses, another group of subjects received delayed feedback about their responses, while a control group received no feedback at all. Results of the study supported his hypotheses that subjects who received immediate feedback would earn significantly higher scores on the accurate empathy scales than the subjects in the delayed feedback group and the control group.¹

Payne and Gralinski conducted a study similar to that conducted by Reddy through their comparison of different training techniques upon the learning of empathy. They employed students as subjects, and administered pre- and post tests to measure the gains in empathy scores. One group of subjects participated in conferences with supervisors prior to responding empathically to client statements. A second group of students received supervision that incorporated counseling of the subjects. The third group received no supervision at all. The empathy test scores earned on the post-tests were higher for the group that participated in the supervisory conferences. However, an analysis of co-variance revealed initial differences in the subjects' empathy scores on pre-treatment measures.² The implications of these findings suggest that empathy may be


a trait that is only increased significantly when an individual exhibits a positive level before training.

Data obtained from studies of the empathy levels of clinical psychology students at the beginning of their training and after their second year of training contradicts much of the evidence supporting the beneficial effects of training. Carkhuff, Kratovil and Friel had first year graduate students perform interviews with clients and assigned ratings on the quality of empathy, warmth and genuineness expressed in the interviews. When students were tested again at the end of their second year of training, it was noted that the clinical psychology students had deteriorated in their functioning levels on all three of the psychotherapeutic skills selected for evaluation. The above findings raise the question of whether long term training programs are less effective than short term training programs in developing empathy as well as other helping skills. Subjects in the present study earned empathy scores ranging from the 5th to the 95th percentile. Considering the fact that the majority of them plan to enter graduate programs, we cannot predict a general improvement in their empathic functioning through professional training.

In line with the present study, some studies have been carried out to compare empathy with other traits. Dymond, in an investigation of the relationship of empathy to insight, concluded that there was a positive relationship between the two factors. She obtained an insight index by comparing a subject's own judgement of himself with the judgement of him

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made by others. The concurring ratings were totaled and compared with the scores subjects obtained on an empathy test. In cases where a subject's self-conception agreed well with the conception that others held of him or her, there was a marked ability to take the role of the other which is a measure of empathy.\(^1\) The present study made the assumption that extra-sensory perception was another type or level of empathy.

In a later study, Dymond compared subjects' empathy functioning levels with certain personality variables. Seven subjects who ranked high in empathy and seven ranked low in empathy were selected to take a series of personality tests. As a result of the test scores, subjects with high empathy were profiled as optimistic, warm, outgoing individuals with a strong interest in others. In contrast the subjects who were ranked as low in empathy were rigid, introverted people who experienced little success in their interpersonal relationships.\(^2\) It is tenable that other cognitive or affective traits have a positive relationship to empathy. Dymond's study had some influence upon his researcher's decision to explore the relationship between empathy and extra-sensory perception.

There is scientific evidence that in human organism all expressions of affect or emotion are accompanied by physiological responses.\(^3\) Murray Gellen studied the relationship between one's level of empathy and his


measure of vasoconstriction. He hypothesized that highly empathic subjects would manifest higher levels of vasoconstriction than subjects in a control group when they viewed slides accompanied by client statements taken from an empathy test. The physiological data collected in the experiment revealed that counselors and counselor trainees high in empathy had made higher levels of vasoconstriction than a control group.¹ Gellen's study illuminates the potential of empathic content to elicit strong physiological as well as cognitive responses from helpers and helper trainees.

As noted earlier in the rationale of this study, the importance of empathy as an interpersonal skill is evident in many human service disciplines. The empathic potential of prospective teachers was studied by Sharon P. Morgan. The basis for her study was that former research findings have pointed out the relationship of high teacher empathy to lower truancy rates, fewer behavior problems, and better motivation for grades among emotionally disturbed students. If these observations are given serious consideration, then the training and selection of teachers should consider empathy as a quality for effective teaching with special populations.²

Hawkes and Egbert carried out an experiment similar to the one conducted by Morgan. They sought to determine the relationship between teachers' competence and their empathic responses. Students were asked


to rate teachers on their empathic behavior. They concluded that teachers functioning on a high level of empathy, demonstrate more competence in their teaching than teachers who function at low levels of empathy.¹

Sira observed that the medical doctor is the primary formal agent that laymen use to solve problems. He also noted that positive affective behavior on the part of general practitioners was strongly related to patient satisfaction. On the basis of his investigations, Sira contends that a doctor's affective behavior shows a greater correlation with patient improvement than his technical competency. He considers a doctor's demonstration of interest or empathy regarding a patient's medical problem may be considered a vital aspect of the patient's treatment.² Individuals who plan to enter medical training to be doctors should be more effective by developing and improving their empathic ability.

In an effort to prepare social workers to work effectively with cross-cultural clients, Pinderhughes developed a curriculum to teach graduate students empathy. Her approach was to allow students to interact in small groups with other ethnic minority members and to discuss their thoughts and feelings about their ethnic group identity. Pinderhughes believed that once students recognized their own biases and understood the dynamics of those biases they would develop empathy. By expressing empathy toward their clients, social workers would be able to assist minority clients in changing their definitions of themselves as helpless and


thereby motivate them toward more productive lives. Although the impact of this training model was not evaluated through a follow-up study, Pinderhughes was confident that the social work trainees who increased their empathy levels would have positive outcomes in their future dealings with ethnic minorities.¹ Like several other studies, inferences were made about the behavior of trainees in real life helping situations after empathy was developed as one of their therapeutic skills.

In the above literature review, empathy has been defined according to several theorists. Techniques and criteria for measuring empathy have been explained. A number of studies have been included which describe the various methods of training individuals in empathic skills. The training methods included didactic and experiential approaches to identify and increase empathic behavior. In addition, studies have been included which explain how empathy is helpful to a variety of human service professionals, including counselors, doctors, social workers and teachers. Finally, some studies have been presented that describe how empathy is related to personality and physiological variables. A consensus of all of the references point to the benefits of empathy as an interpersonal skill for human service professionals.

Meditation

Over several centuries, scholars and scientists have provided definitions, descriptions and explanations of meditation. Some of the descriptions are elaborate and comprehensive, others are concise. The benefits of meditation have been described in scientific as well as anecdotal terms. Significantly, a consensus of the writings about meditation endorse the beneficial elements of the practice, and underscore the facility by which it is learned and practiced.

Until recent years meditation as a consciousness altering technique was infrequently practiced in western culture. Most references to meditation place it within the range of the mystical, esoteric and the paranormal. In recent years scientists, laymen and scholars in Western Society have become very knowledgeable about the process of meditation, its many forms, its effects on the human body, and mind systems, as well as its beneficial applications in human development.

In the past five years, the laboratory has yielded observations and statistical data documenting the effects of meditation upon the individual. The Army and Navy of the United States have experimental programs of meditation in progress. Several foreign governments including Russia, India and Germany have offered Zen meditation training for certain laborers and civil servants. In this country, it is estimated that there are 20,000,000 individuals who practice meditation on a regular basis. It is well documented that meditation practice has increased to the extent that laymen and

scientists alike are investigating its use and effects on a widespread
basis.

Simply defined, meditation is the stilling of the mind to distrac-
tions of the everyday world and shutting out other stimuli that constantly
place demands upon the individual. According to Naranjo, all meditation
is dwelling upon something. Comparing meditation with ordinary thought
he states,

In one's daily life the mind flits from one
subject or thought to another; meditation practices
generally involve an effort to stop the merry-go-
round of mental or other activity and to set our
attention upon a single object, sensation, utterance,
issue, mental state or activity.1

Walpula Rahula likens meditation to mental culture or the Zen con-
cept "Bhavana." The aim of meditation is to cleanse the mind of impuri-
ties and disturbances. These impurities include hatred, illness, fear,
anger and other negative thoughts.2

Within the context of Zen, meditation means sitting quietly in a
certain way. It also means breathing in a certain way.3

In another description of meditation, Swearer asserts that it
changes the inner qualities and outer actions in a way that leads to the
understanding of falseness and reality. In meditation we must not think

1 Claudio Naranjo, "The Domain of Meditation," in What is Meditation

2 Walpula Rahula, "Meditation of Mental Culture" in An Extended Con-
cept of Man. The Nature of Consciousness. ed. by Robert E. Ornstein

3 Paul Wienpaul, The Matter of Zen: A Brief Account of Zazen (New
but be aware of the thinking process. The authenticating of these definitions appear to be within the realm of the subjective and philosophical. It remains a challenge to discover and document more empirical ways of defining and describing meditation. Evidence of a more scientific nature describing the process of meditation will be cited in another section of this review.

During the learning and practice of meditation the individual sits alone or with a small group. For maximum benefit, the space, room or location for meditation is quiet, sparsely furnished and void of external stimulation. There are a variety of postures that are appropriate to accommodate the method that is selected by the subject. One technique may require the individual to sit Buddha or lotus style with the spine straight, the legs crossed and the hands gently resting on the lap. Another position requires that one sit with arms resting on the legs, the back straight against a chair or a wall and the feet placed slightly apart. A third position suggests that the meditator lie outstretched on the floor in a totally relaxed state.

In addition to the correct posture, certain breathing techniques are suggested. For example, one may be required to inhale deeply and then release the air in short quick breaths. Another technique is to have the individual breathe naturally and normally but to focus his attention or awareness on the breathing process. Long deep inhalations with a correspondingly deep exhalation may be suggested as another technique.

In most of the westernized techniques of meditation, the individ-

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ual is advised to meditate twice daily. Depending again on the philo-
osophical or cultural orientation of the meditation, the time for sugges-
ted meditation may be from ten to twenty-five minutes. The procedures
utilized in the present study are described under the Research Procedure
section of this paper.

Some of the schools and techniques of meditation are Zen, Yoga,
Spiritual or Prayer Meditation, Transcendental, Buddha, Sufi and Wu Shin.
All of the meditative techniques if applied correctly lead to altered
states of consciousness. It has been postulated by many psychologists
and psychiatrists that man's needs to alter his consciousness at various
times during the life process is a universal biological and psychological
imperative.¹ Throughout the world, men of various cultures and races use
natural substances or synthetic chemicals to alter the consciousness that
are safe, non-chemical and self-generated.

The quality and dynamics of meditation are exposited in a variety
of conceptualizations and descriptions. Naranjo and Ornstein categorize
meditation into three basic types. The first type utilizes a technique
where the individual experiences a detachment or emptiness. In contrast,
the "Way of Form" technique is concentrative, absorbing and unifying. A
third type of meditation is characterized by freedom, surrender transpa-
rency and inner-directedness.²

¹Charles Tart, *Altered States of Consciousness* (New York: John
Wiley and Sons, 1960), p. 34.

²Claudio Naranjo and Robert E. Ornstein, *On The Psychology of
An individual who practices the detachment type of meditation is said to withdraw from internal and external experience alike. There is an absence of all goal directed activity and there is a separation from ego function. If the technique is fully implemented, the subject may enter into an unfamiliar but pleasant domain of experience.¹

Concentrative or absorptive meditation employs symbols. The symbols may be verbal, visual or accoustical. Each symbol such as a name for God, a flower, a light, a bell or a drum evokes the notion of a center of balance around which energy flows. In essence, the meditation objects are the external representations of the meditation state.²

The process of "freedom" meditation requires the subject to deliberately refrain from thinking. The freedom from thoughts, however, represents a maximization of awareness and self-abandonment. Receptivity follows awareness and the lake of the mind becomes a mirror and reflects.³

The turning away from discursive thinking according to Yasutani Rashi, a Zen master "... leads you to differentiate yourself, on one side of an imaginary line from what is not you, on the other side of the non-existent line."⁴

In the author's opinion, this experience could lead to the helper's ability to distinguish between the objective and subjective, thereby be-

¹Ibid., p. 71.
²Ibid., p. 72.
³Ibid., p. 121.
coming one with a client's feelings. In other words, one can experience and express empathy through the process described above:

A type of meditation practiced by the Chinese is called Wu-Shin. It is said, the meditator observes his own stream of consciousness during the meditation activity. He is to remain awake every moment and flowing in the experience. By summoning up his total state of consciousness, the individual accepts its course and does not seek to divert it.\(^1\) In spite of the variety of metaphors and analogies used to describe various forms of meditation, those who have practiced one or more of the techniques can identify some common elements of awareness, freedom from regular thought activity, and a quiet inward feeling during their experience.

The object of Yoga meditation, is to reunite the individual self with the world self. This relates to the process of empathy in this writer's view. One cannot show empathy with another if he does not know what his own experience is. Once this is known, one can be in tune with his own feelings as well as those of the individual he seeks to help.

The technique of Yoga meditation enhances awareness through a series of breathing techniques and the repetition of a mantra. In addition to the breathing techniques, the Yoga subject performs bodily exercises and embraces a way of life and ideology that will compliment and endorse the benefits of meditation.

Zen meditation emphasizes the process of insight. This process is called "Satori" in the language of Zen. Through enlightenment, it is said, the mind flows into new channels and one feels a new and deep knowledge. The ultimate end is "... to free the mind to go beyond the

\(^1\)Ibid., p. 84.

\(^2\)Smith, Meditation the Inward Art, p. 139.
limits of intellection.\textsuperscript{1} The effects of Zen meditation heightens the perception and augments empathic feelings. According to Bradford Smith, One has the experience of entering into something else and becoming a part of it.\textsuperscript{2} We recognize in the foregoing process the same dynamics that are operative in empathic communication.

During Zen Meditation, the meditator concentrates on his own breathing. He gives full awareness to each breath by mentally counting the inhalations and exhalations. As the individual sits (Zazen) and breathes, he achieves relaxation and the active racing thoughts of the mind seem to flush away and one experiences somewhat of a void. As the meditator becomes habituated to the daily practice of meditation, the answers to philosophical questions, the understanding of reality, and understanding of one's body and mind, man and nature, the finite and the infinite. Simply stated the individual transcends conscious thought and the usual blinders and constraints of everyday mundane thinking. The philosophical aspects of Zen will not be elaborated upon for this would require a more comprehensive and extensive thesis that would obscure the essential purpose of this study.

A statement of Wienpaul summarizes the essence of Zen Meditation.

"Zen means meditation. This cannot be repeated too often. Meditation in this context means sitting quietly, more specifically, sitting a certain way and breathing in a certain manner."\textsuperscript{3}

\textsuperscript{1}Smith, \textit{Meditation the Inward Art}, p. 139.

\textsuperscript{2}\textit{Ibid.}, p. 148.

\textsuperscript{3}Wienpaul, \textit{The Matter of Zen: A Brief Account of Zazen}, p. 3.
T. M. is the abbreviation for Transcendental Meditation. This form of meditation employs a method that allows the mind to settle down while one sits comfortably with the eyes closed. One repeats a mantra and breathes in a rhythmical manner and similar to the technique of Zen proceeds to empty the mind. Although the technique is usually practiced in one's home, it can be carried out in any location where the individual can sit comfortably without being disturbed.

In order to learn T.M., one must visit a specific center for three lessons and pay fees ranging from 75 to 200 dollars. In spite of the tight controls on the dissemination of the training, it is known that the technique has been taught by other than certified Transcendental Meditation teachers.

Research reports, scientific literature as well as popular literature contain elaborate testimonies of the benefits of meditation.

Terry Lesh has demonstrated that therapists who practice meditation improve their empathy toward clients. He observed that a group of therapists who were trained in meditation revealed a dramatic increase in measurements of their empathy functioning as compared to a non-meditating group.¹

Bloomfield et. al., interviewed several mental health professionals who claimed that TM practice had produced beneficial changes in their relationships with clients. They claimed increased efficiency and satisfaction in their work as human service professionals. One psychiatrist

reports, "I automatically make intuitively better therapeutic responses and listen more attentively."¹

Goleman cites the connection between proficiency in meditation and psychic abilities. Referring to the ancient writings of Patanjali, it is said that when one attains perfect concentration in meditation a range of supernatural powers becomes possible. Among the powers enumerated in Patanjali's writings are, knowledge of the past and present, insight into the nature of another's mind, and tuning into the flow of the world.²

Dr. Karlos Osis had conducted experiments on the effects of meditation upon extra-sensory perception. He noted a significant increase in the extra-sensory perception of his subjects after meditation. He noted the following conditions as having a positive effect on ESP scores:

1. a relaxed non-defensive openness and feelings of closeness to others.
2. A specific change in the individuals state of consciousness.
3. The ease with which one masters meditative techniques.³

Although Woolfolk believes that scientific investigation has failed to demonstrate a clearly defined set of physiological responses to all forms of meditation, there is information supporting its beneficial effects. Studies of Zen and TM have shown that there is increased alertness due to electrocortical excitation of the brain, an increase in oxygen

¹Ibid., p. 168.


consumption and a reduction in heart rate and respiration. These affects appear to be associated with stress reduction and subjective feelings of well being.\textsuperscript{1}

The Maharishi Mahesh Yogi claims that meditation can penetrate the deeper levels of consciousness and facilitate the flow of latent cognitive material. He further asserts that the overall nervous system is also refined as the consciousness is expanded. The restful alertness that accompanies the meditative state is a condition of maximum energy. When one emerges from the meditative state, the brain and mind are activated. The benefits of alertness and expanded consciousness would indeed seem to influence the expression of empathy in a positive direction.

Much of the information regarding the beneficial effects of meditation are anecdotal, observational and based on subjective statements. Several research investigations have sought to substantiate the benefits of meditation on a variety of human performances.

Paul Leung conducted an experiment to compare the analytical empathy scores of a group of undergraduate students trained in Zen techniques with the scores of another group trained in external concentration techniques. His findings indicated that those trained in Zen meditation increased their ability to perceive empathic statements and to understand the self-attitude of clients.\textsuperscript{2} The results of this study holds significance

\textsuperscript{1}Robert L. Woolfolk, "Psychophysiological Correlates of Meditation." Archives of General Psychiatry. 32 (October 1975), p. 133.

\textsuperscript{2}Ibid., p. 136.

for the present study. Utilizing a sample of undergraduate students, this researcher recognized the possibility of replicating the findings of Leung by comparing the effects of Zen meditation training on empathy scores.

Le Shan, as a psychotherapist, claims that meditation increases the individual's ego strength and coherence of personality. As part of a research program, Le Shan set up training seminars to facilitate ESP and psychic experiences among the participants. Through the use of meditation and didactic methods he determined that eight out of ten of his participants increased their ability to use ESP at a functioning level. Inferences drawn from Le Shan's study are cogent to the present study in the respect that if meditation has a positive effect on a particular group of subjects' empathic behavior, then it also might enhance the subjects' extra-sensory functioning.

Goleman and Davidson studies the effects of meditation and hypnosis on subjects attenuation behavior. One group of subjects was exposed to hypnosis and another group was allowed to meditate. In measuring the state effects of the two procedures, subjects who engaged in meditation revealed a decreased reactivity to the external environment. It would seem that these state effects produced by meditation might be beneficial to an individual on a helping level. The requirement of such situations is that the individual enters into the internal experience of a client

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and becomes less reactive to the external environment.

An investigation of the effects of Zazen on dimensions of personal development of college undergraduates was conducted by Cowger. One group of subjects practiced relaxation and another group engaged in Zen meditation for 21 sessions. Pre and post measures on the Personal Orientation Inventory, the State-Trait Anxiety Inventory and the Torrence Tests of Creative Thinking were administered to all subjects. Persons practicing meditation reported stronger feelings of oneness, calmness and compassion than persons participating in the relaxation exercises. The meditation training appeared to facilitate the development of personal dimensions that are related to empathy.¹

A most significant study on the benefits of Zen meditation was executed by Terry Lesh. He employed one experimental group and two control groups to study the effects of meditation on Openness to experience an affective sensitivity. Lesh considers affective sensitivity to be synonymous with empathy. The mean difference in empathy scores were significant for the experimental group as compared to the control groups. The means were .34, -.70, -.01, respectively.

Lesh admits in his discussion of results, that the experimental group had significantly higher empathy scores than the control groups before the experiment was begun. This observation lends limited support to his hypothesis that there is a highly positive relationship between the practice of Zen and the development of empathy or affective sensitivity. The least that can be said is that with the particular group

of counselor trainees participating in his study, the practice of Zazen did increase their ability to accurately detect and describe the affective states of others under less than ideal conditions.¹

The benefits of all types of meditation are extensively documented throughout the literature and in non-published reports. Like other psychological data, conclusions, judgements and interpretations of the results are tentative and open to speculation. The scientific evidence supporting the benefits of meditation is gradually overtaking the anecdotal and observational information. Since the initiation of this research endeavor, a project to study the effects of prayer meditation on the heart rate, galvanic skin response and blood pressure of selected subjects is in progress at Spelman College under the direction of Dr. Karl Hendrickson. Some of the subjects who participated in the present study are assisting in the research project.

The writer has attempted to provide an adequate description of the basic concept of meditation, an overview of the contemporary forms of meditation and illustrative studies that support the rationale for the study. References have also been included that support assumptions about the effect of meditation on extra-sensory perception. Although the primary focus of the study is not to study the effect of meditation on ESP, the correlative inferences about ESP and empathy would seem to justify the references.

The Characteristics of Extra-Sensory Perception

Extra-sensory perception is considered among the paranormal events that emerge in human experience for which one can seldom offer a plausible answer. For centuries it was believed by philosophers and scholars that nothing enters the human mind except through the senses. The foregoing belief assumes that the contents of the human mind are verified through some empirical activity, such as speaking, written content or bodily gesture. The perception and acknowledgement of events as extra-sensory is verified through testimonies, direct observation, laboratory data and public consensus.

The term extra-sensory perception defines a number of processes that are non-physical in nature, in that time, distance, and physical experience do not prevent their occurrence. The present study is concerned with the existence and measurement of GESP or general extra-sensory perception. As described in the glossary section of this paper, CESP is the manifestation of telepathy, clairvoyance pre-cognition and retro-cognition, or a combination of these processes. By telepathy, we refer to one's awareness of another individual's present or future thoughts or mental state. In therapeutic situations, a type of telepathy may occur in which the emotional interests of the patient or helpee are communicated to the helper in the absence of a verbal dialogue. Clairvoyance is the extra-sensory awareness of objects or objective events. Precognition is the awareness of an event which will occur in the future, which could not have been inferred from usual sources of information. Retrocognition is the awareness of knowledge of a past
event which was not communicated through the normal channels of communication.

In the present study, the targets or objects of GESP were concealed pre-selected and recorded symbols. The task for the percipient or subject was to know what the symbols were and in what order they had been selected. The experimenter in the study did not factor out or analyze the separate variables of G.E.S.P. in the subject's responses. The factoring process is complex and would not answer the hypotheses any better.

Extra-Sensory Perception and Psychological Theories

The phenomena of extra-sensory perception has been reported by people of all cultures, all socioeconomic groups, all educational levels and a wide range of occupational levels. Reported experiences, personal observations, laboratory experiments and historical investigations of extra-sensory perception have been analyzed and organized into a realm of scientific investigation designated as parapsychology. By assigning the study of extra-sensory perception to the scientific nomenclature, the writer accommodates the conventional function of science. The study of extra-sensory perception includes the discovery of new phenomena and the verification that such phenomena can generate hypotheses that are testable and measurable through some objective method. Whether it is possible to deal scientifically with non-observable phenomena such as thoughts and feelings is the subject of perennial controversy. Over several decades scientific methods of studying and analyzing psychic phenomena, including extra-sensory perception, have been prodigiously applied. Dr. J. B. Rhine
of the Foundation for Research on the Nature of Man has applied the scientific method and developed sophisticated statistical procedures for the study of extra-sensory perception for over 50 years. From the early 19th century, several western psychological theorists have considered the analysis of psychic phenomena in the light of traditional psychological postulates.

Parapsychology is accepted as a legitimate discipline of psychology in that its experiments, research reports and critiques are published in scholarly journals, scientific publications and psychological abstracts. These publications have influenced many scientists, scholars and laymen to hold credible views in favor of parapsychology. According to William James, "To no one type of mind is it given the prerogative to discern the totality of truth."\(^1\) William James devoted 25 years of his career to the study of parapsychology. In an address presented to the Society of Psychical Research in 1890 James stated:

Facts are there only for those who have an affinity for them. When once they are indisputably ascertained and admitted, the academic critical minds are by far the best fitted ones to interpret and discuss them... yet on the other hand, if there is anything which history demonstrates, it is the extreme slowness with which the academic and critical mind acknowledges facts which present themselves as wild facts.\(^2\)

In the above statement, James attests to the resistance of academic and scientific minds to relinquish their "cognitive dissonance

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\(^2\) Ibid., p. 149.
in the light of the archives of information available to those who desire to know more about parapsychology. He is also pointing out the urgent intellectual need for science to be built up again in a form that will relegate exceptional occurrences to a positive place in the arena of scientific investigation.

In expressing a concern similar to that of James, J. B. Rhine observes that... "Entomologists with a new bug, geologists with a strange rock or archaeologists with a new ruin to excavate are eager to study and organize and classify. Psychologists, however, as a group ignore the strange occurrences in the realm of the mind."¹ The tendency of psychologists to simply dismiss what could not be explained has imposed a serious impediment to progress of psychic research. Since making the above statement, Dr. Rhine has accrued a substantial constituency of psychologists and other social and physical scientists who are currently conducting parapsychological research.

In considering the fact that many of the helping professions (psychology, counseling, social work, psychiatry) evolved from the principles of clinical or humanistic psychology, we have selected references that illustrate some theoretical concepts that are related to some forms of extra-sensory perception.

Jung contends that the intuitive and mantic methods that we observe in human interaction start with psychic factors.² Jung developed the idea


of synchronicity to account for events that appear to be connected to, and frequently emerge from extra-sensory content. He relates that it is of no significance whether the separate events caused the other; rather, it is the meaning of the whole that is emphasized. The feelings, hunches and cognitions that one receives about another individual may serve to facilitate understanding and acceptance of that individual. In helping interactions, intuitive feeling could facilitate the expression of empathy.

Walker cites the growing feeling among psychologists that on unconscious levels individual minds come into more intimate contact with one another than we formerly believed them to. This permits different minds to come in contact with one another by means of telepathy. He further states, that at times individuals may feel that they have established a close relationship with another mind and in moments of deep relaxation we feel and understand one another in a way that we did not understand each other before. The foregoing theory has practical implications for the present study in that the subjects use of meditation has the potential to elicit a sense of understanding and closeness to individuals in simulated problem situations.

In his discussions of psychoanalysis and telepathy, Freud states that psychoanalysis shares a sympathy with telepathy since they both are

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1Ibid., p. 121.


suspected of mysticism. An analytic session, conducted with a female patient who related the prophecy of a fortune teller which later became true, prompted Freud to comment affirmatively regarding the incident. He believed that the experience had less to do with future events than with the unconscious thoughts or wishes of the client which were picked up from the fortune teller telepathically. Freud stated:

I have often had the impression in the course of experiences in my practice circle that strongly emotionally colored recollections can be successfully transferred through thoughts without difficulty.¹

One may interpret the above statement as supporting Freud's belief in telepathy as a cognitive and an affective process. He also concluded that thought transference comes about easily at the moment an idea emerges from the unconscious to the secondary process which is conscious.²

Freud further contends that through analysis, insight is gained into thought transference which is closely allied to telepathy and can be identified with it. He also holds that psychological processes and ideas which occur in the mind of one person can be transferred through space to another without employing the usual means of communication.³ The problems and concerns that a client brings to the helping situation seem to be transferred to the empathic helper both consciously and unconsciously. Although Freud is not making a definitive statement about a relationship between telepathy (which is extra-sensory) and empathy, he does infer that

¹Ibid., p. 243.

²Ibid., p. 89.

³Ibid., p. 99.
there is an interaction between the two factors.

Edward Hitschmann reluctantly reports a telepathic distraction which occurred during a psychoanalytic session with a client. Upon the receipt of an important letter before entering the session, Hitschmann was aware of his preoccupation with thoughts of the letter and his superficial attention to the content of the client's conversation. The patient inquired candidly if the doctor had received an important letter. This was significant, since the inquiry was abrupt and unrelated to the client's conversation. Apparently, Hitschmann's strong emotional feelings regarding the letter were transferred pictorially to his client. In this instance, the emergence of an extra-sensory phenomenon during a helping interaction could not be easily dismissed. One might regard this instance as coincidence, but Hitschmann was later to encounter similar events in his analytic encounters. From these experiences, Hitschmann became convinced of the credence of extra-sensory ability.

Jules Eisenbud believes that the facts of telepathy and other psychic phenomena can strengthen the psychoanalyst's view of man and nature. Through this understanding, the beneficial outcome of psychoanalysis should be enhanced.

Through her psychoanalytic practice, Helen Deutsch claims to have discovered that telepathic phenomena are accessible to direct investigation. She believes that careful observation permits one to recognize a given extra-


sensory event as it unfolds in the analytic process.¹

The analyst's intuitive empathy appears to transcend his consciousness and emanates from unconscious sources. Later, conscious knowledge refines these unconscious forces and directs them into connected thought sequences that may be transmitted as insight. In Deutsch's view, the proof of this is seen when a patient in analysis will note several incidents where he or she felt that the analyst was a mind reader.² The foregoing process establishes an analogy with empathy. As a helper senses and responds to the quality and intensity of a client's feelings and problem situation verbally, the client may get the impression that his mind is being read. This may be particularly true of those individuals who interact with psychic counselors and mediums.

The evidence of extra-sensory perception in clinical activities is convincing to this researcher. One may not have the scientific or methodological tools in such encounters to produce statistical data, yet we cannot dismiss these occurrences as fraudulent when one considers the integrity of the theorists.

Experiments in ESP

Literally, thousands of experiments have been conducted in laboratory settings to detect and measure extra-sensory perception. Many of these experiments had the objective of comparing ESP with other personality


²Ibid., p. 158.
variables. None, to this writer's knowledge, have studied the statistical relationship between empathy and extra-sensory perception in a laboratory setting. There are, however, extensive claims regarding the relationship between the two traits as was cited earlier in this chapter. Experiments studying the relationship between ESP, personality, and cognitive traits provides insight into the conceptually related predictors of positive ESP scoring.

Kanthamani and Rao analyzed the data of ESP card tests obtained from 22 high school students. Subjects were pretested on a neuroticism scale to distinguish high from low neurotic subjects. Once classified, subjects were administered an ESP card test. The results of the data analysis confirmed Rao and Kanthamani's hypotheses that low-neurotic subjects would score significantly more hits on the ESP card than high neurotic subjects.¹

Studies of extraversion and ESP have been executed by several researchers. A significant study was conducted by Astrom, who administered the Eysenck Scale and 125 ESP Trials to 48 college students. Employing a group of ESP tests, he compared the scores subjects earned on the ESP trials with scores obtained on extraversion. His results showed that subjects with low extraversion scores earned significantly higher ESP scores than subjects with low extraversion scores.² A difference at the .05 level was obtained between psi-hitters (extraverts) and psi-missers (introverts). Astrom's results agree favorably with the findings of G. Schmeidler, R. A. McConnell


Believing that ESP is an intuitive faculty which develops in a person in accordance with his general intellectual development, Eason and Wysocki compared the ESP performance and I.Q. scores of 98 high school subjects. Subjects with I.Q.'s ranging from 90-110 were assigned to one group (A) and those with I.Q.'s ranging from 125-144 were placed in another group (B). Of the 98 students, 50 had a mean I.Q. of 105.2, the other 48 had a mean I.Q. of 129.9. All of the subjects were members of middle-class families.

Subjects were blindly tested on GESP by one of the experimenters and scores were collected and analyzed. I.Q. scores were obtained from the school records of the subjects. The difference in the I.Q. scores of Group A and Group B were significant with a \( t \) of 3.373 at the .001 level. The difference between the ESP scores of the two groups yielded a non-significant \( t \) of .103. The overall ESP data for both groups however, yielded scores above chance expectation which indicated that subjects did show ESP. The researchers concluded that there was no relationship between I.Q. and ESP.

Neilsen and Freeman conducted a study to confirm earlier findings on the relation of mood to scoring levels in pre-cognition tests. On the basis of earlier studies, it was determined that individuals who believe

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in ESP, referred to as sheep tend to score better in unpleasant mood states than open-minded subjects, and that subjects of all groups score more positively when in extremely unpleasant moods.¹

Subjects were administered a mood scale prior to taking a precognition test. The mood scale presented criteria for physical, emotional and mental aspects of mood and for basic mood categories of extremely pleasant, and moderately unpleasant. An analysis was made of the mood scales and precognition scores of the two groups of subjects. The analyses were interpreted as indicating that relatively extreme mood ratings constitute a favorable condition for ESP. There was a statistically significant difference between the precognition scores of the "sheep" group as compared with those of the "openminded" group. The "sheep" obtained their highest scores while in an extremely unpleasant mood while the "openminded" subjects scored higher when they were in a moderate mood. The difference in scoring was significant at the .05 level. In view of the fact that the study was conducted over a three-week period and part of the activities such as the precognition tests were conducted outside of the laboratory, there are serious questions as to the impact of the variables that could not be manipulated by the experimenter.² Also, considering the fact that the subjects in the present study were all volunteers and had no information about the nature of the GESP test, it is impossible to deter-


mine if there were any mood effects on the test scores.

Green noted the absence of research on how psychological counselors use their extra-sensory abilities in their professions and their personal lives. She used a phenomenological study to discover the fundamental extra-sensory abilities that they used in their personal and professional life. Her subjects reported a total of 22 extra-sensory abilities that emerged in relation to their therapeutic activities. Among the abilities that they reported were telepathy, clairvoyance, precognition and clair-sentience. The latter ability is very closely associated with empathy in that it involves feeling with another individual.¹ Green's study was based on assumptions that lend support to the present study. An assumption of this writer regarding psychic ability in human service professionals is that if human service professionals believe in the existence of ESP they may find it expedient to accept and understand their clients who claim to have the ability or they become aware of extra-sensory abilities in their own functioning.

The foregoing studies have provided a background for the acceptance of extra-sensory perception as a definable and measurable trait in human abilities. Studies of the relationship of ESP to other human variables suggest a need for more extensive studies and use of additional psychometric measures to gain additional knowledge of the relationship between ESP and empathy, as well as other therapeutic abilities displayed by human service professionals or trainees.

Psi-Hitting or Psi-Missing

The scoring and interpretation of ESP results represent rather unorthodox analyses in regard to Psi-Hitting or Psi-Missing. The latter represents the primary dependent variables for parapsychologists. This phenomena has been demonstrated in a variety of studies, for illustrative purposes. Child and Levi conducted several psi experiments with simple targets such as the 5 geometric symbols on ESP cards. After the incidences of positive scoring, individuals on successive tests demonstrated consistently negative scoring. This is interpreted as psi-missing, which constitutes unconscious evasion of the targets. Levels of significance were established for these tests with the same statistical reasoning applied to psi-hitting. According to J. B. Rhine, in tests where subjects must complete several runs, they may have to force themselves to guess until the test is completed. What are considered as long monotonous runs by subjects, can produce tension and frustration. The elusive nature of psi- or extrasensory ability under test conditions is attributed to a variation in mental states. Rhine maintains that psi is a stable trait, and that psychological factors are the source of uncertainty. The reality is that psi-missing is as verifiable as psi-hitting. Results show, as the subjects shift from missing to hitting and back again in U curves as they go from trial to trial within the segment, and from one segment to another in the run, we see that these unconscious errors and successes are only a shade apart.


Unless one considers the meaning of psi-missing in examining ESP test results, many tests would be meaningless. Analyses may be made for displacement effect but these are difficult to execute. The displacement effect was examined by Soal and Bateman. Subjects may miss immediate targets but exhibit psi-hitting on targets following the direct target. In the present study, no analyses were made for displacement effects. The occurrence of psi-missing is considered in the discussion of the results.

The literature reviewed may be summarized as follows:

The characteristics of extra-sensory perception are identifiable.

Extra-sensory perception is considered in the light of traditional psychological theories.

Experiments in extra-sensory perception report significant and non-significant results.

Psi-missing and psi-hitting both reflect the effects of internal emotional states rather than the absence of psi-ability.

The foregoing studies and theoretical assumptions are significant in pointing up the need for continued research in the area of extra-sensory perception in relation to personality or cognitive variables that may influence the helping process. There is no paucity of experimental data on ESP. On the other hand, experimental studies of extra-sensory perception in relationship to empathy have not been reported in the literature. A number of theorists cited in this section have made statements and observations indicating their belief in the relatedness of the two variables. It is anticipated that other empirical studies of extra-sensory perception and empathy will be initiated by researchers and published in current scientific and scholarly literature.

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CHAPTER III

DESIGN OF THE STUDY

This chapter presents a discussion of the design of the study, the locale of the study, and a description of the subjects. A summary of the experimental training procedure is also included. The instruments used in the study are discussed and the justification for their use is explained. The method of collecting the data and the statistics used to analyze the data are also described.

The purpose of the study was to compare the impact of meditation training and empathy training on the empathy test scores of undergraduate subjects who aspire to be human service professionals. A second aspect of the study was an analysis of relationship of the subjects' scores earned on the Empathy Test of the Counseling Skills Evaluation with their scores earned on the Zener ESP Test.

The study employed a randomized block design. This design is commonly used when the number of subjects available for research is few and there is a need for experimental control of individual differences. According to Kerlinger, such a design is practical when one has the opportunity to try a training method of some educational innovation only once.¹

Through this design, subjects are blocked on a co-variate prior to

the experimental treatment. The subjects in each block are then randomly assigned to a treatment or a control group. In the present study the blocking variable consisted of scores earned by subjects on an audio-taped version of the CSE Empathy Test. In utilizing the empathy scores for blocking, the procedure conformed to the requirement to block subjects on a variable which is known to correlate with the criterion.\(^1\) The post treatment scores earned on the Empathy Test provided the criterion for analysis. A representation of the randomized block design is presented in Table I.

Table I

<table>
<thead>
<tr>
<th>Randomized Block Design</th>
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</thead>
<tbody>
<tr>
<td>Empathy</td>
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<tr>
<td>---------</td>
</tr>
<tr>
<td>1</td>
</tr>
<tr>
<td>2</td>
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<tr>
<td>3</td>
</tr>
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<td>12</td>
</tr>
<tr>
<td>13</td>
</tr>
<tr>
<td>14</td>
</tr>
</tbody>
</table>

\(N = 42\)

Locale of the Study

The study was conducted in the Psychology Department of Morehouse College. Three large classroom and a small seminar room were used as the sites for orientation, conducting the training, collecting the data and for storage of materials. The college is a member of the Atlanta University System. The student enrollment is mainly male, yet several females from other colleges in the University Center also take courses within the department.

In view of the fact the training was conducted in the evening when other classes were suspended, the location was appropriate for the training activities. The classrooms are traditionally equipped with movable desks, two walls of chalkboards, a large desk in each room and a large movable table. The rooms were well-lighted, well ventilated and fairly free of distraction. The training rooms were located in such a manner that different groups did not interact to any great extent during the evenings of the training except during the pre-test and post test periods. There were no other individuals present during the training except the experimenter, the trainers, the participants and two research assistants.

Subjects

The subjects of the study were 42 junior and senior undergraduates attending four of the colleges in the Atlanta University Center. All subjects in the study have expressed an interest in pursuing human service careers. Twenty-five male and seventeen female students participated in the study. The ages of the subjects ranged from 19-23. The average age of the subjects was 20.8 years. The distribution of subjects by sex, aca-
demographic classification and career choice is represented in Tables II and III.

Table II
Academic Classification of Subjects

<table>
<thead>
<tr>
<th>Sex</th>
<th>Classification</th>
<th>Totals</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Junior</td>
<td>Senior</td>
</tr>
<tr>
<td>Male</td>
<td>6</td>
<td>19</td>
</tr>
<tr>
<td>Female</td>
<td>6</td>
<td>11</td>
</tr>
<tr>
<td>Totals</td>
<td>12</td>
<td>30</td>
</tr>
</tbody>
</table>

A distribution of the career choices of the trainees is shown in Table III.

Table III
Career Choices of Subjects

<table>
<thead>
<tr>
<th>Career</th>
<th>Female</th>
<th>Male</th>
<th>Totals</th>
</tr>
</thead>
<tbody>
<tr>
<td>Psychologist</td>
<td>6</td>
<td>14</td>
<td>20</td>
</tr>
<tr>
<td>Psychiatrist</td>
<td>1</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Counselor</td>
<td>1</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Medical Doctor</td>
<td>0</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Teacher</td>
<td>5</td>
<td>6</td>
<td>11</td>
</tr>
<tr>
<td>Lawyer</td>
<td>0</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Nurse</td>
<td>1</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>Social Worker</td>
<td>2</td>
<td>1</td>
<td>3</td>
</tr>
<tr>
<td>Radio Commentator</td>
<td>0</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Totals</td>
<td>16</td>
<td>26</td>
<td>42</td>
</tr>
</tbody>
</table>
All of the subjects were volunteers who responded to announcements in classes, letters and bulletin board notices. Individuals who responded to recruitment efforts each filled out a research interest form. Of the sixty-nine volunteers, fifty subjects were randomly selected as described in the procedure section of this chapter. Although the experimental design called for forty-five subjects, extra subjects were selected to accommodate the drop-out factor. Six subjects dropped out of the study. In order to have data for equal groups, only scores for complete blocks were retained.

Procedure

The trainers for the experiment were selected on the basis of their special qualifications and experiences in the area of training. For the meditation training, an individual was selected who holds a master of Social Work degree and has a broad knowledge of Zen, Yoga and Transcendental meditation. The trainer was selected from among 4 individuals who were interested in conducting the training. In his therapeutic work with clients, the trainer frequently teaches them meditation. He has provided training and consultation to professional and paraprofessional groups on techniques of meditation and has developed a series of audio-tapes on meditation. During meetings with the trainer, it was explained that his main responsibility was to provide training to the subjects and to help to organize the materials and the instruments before and after the experiment.

The trainer for the empathy group holds a M.A. in psychology. He was selected from among 4 interested professionals because of his extensive experience in training groups, his serious interest in the experiment, and the experimenter's knowledge of his competence through direct observations,
references and personal interview. He is the clinical director of a residential program for offenders.

Prior to the training, conferences were held with both trainers to familiarize them with the experimental procedure and to review the content to be used in the training. There were several weeks of dialogue and individual conferences before the actual experiment was conducted.

The monitor for the control group holds a B.S. degree in Education and has had further graduate work in Music and Business. He is a versatile musician and has an excellent collection of records and tapes and enjoys sharing his hobby with others. It was conveyed to him that his group was to have interesting and enjoyable experiences with music. The experimenter assisted him in outlining the experience and collecting the materials.

In view of the fact that the activities for the control group would be qualitatively different than those of the experimental groups, it was agreed upon that their sessions might be shorter.

No comprehensive explanation of the dependent variables nor the hypotheses was communicated to any of the trainers. They were simply told that the goal of training was to provide the subjects with experiences that would enrich their knowledge and help them to be more competent in their future careers.

The experimental assistants were a work study student from the media center, and a graduate student. Their assistance was utilized in preparing the materials and setting up the equipment and facilities.

Description of the Instruments

The Counseling Skills Evaluation (Empathy Scale)

The Counseling Skills Evaluation consists of a 16 mm film which portrays simulations of clients relating serious emotional or situational prob-
lems to a counselor. There are twelve episodes, each of which is followed by five different counselor responses. Subjects are to rate each counselor statement on an empathy scale of one to five. These statements range from a very low expression of empathy or helpfulness to one that represents the optimum level of empathic expression.

The instrument was developed by Sidney Wolfe and associates to aid in the screening, evaluating and training of helping personnel. The authors of the Counseling Skills Evaluation based their empathy contents and measuring criteria on the extensive body of information extracted from the research of Truax, Carkhuff, Berenson and Wolf. Carkhuff has determined that competent judges can determine the empathic level of human service professionals by using operationally defined scales to assess their discrimination by rating empathic responses. The key to empathy ratings are the relation of the helper's response to the helpee's emotions and content. The criterion for the ratings are based on the evaluation of empathic responses selected by highly trained professionals. Respondents in a testing situation may select statements that are identified as high in empathy and by their ratings of statements indicate their ability to recognize empathy. The writer believes that an individual may recognize high levels of empathy and yet not always express high levels of empathy in actual helping situations. It is important however, that a trainer be able to determine an individual's potential for expressing empathy.

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2Carkhuff, Helping and Human Relations, pp. 169-173.
Ratings of helper effectiveness that are based on observations of actual or role-played sessions are limited by the narrow range of clients or client problems and may preclude fair comparisons. Standardized stimulus materials such as those provided in the film are rated and compared more efficiently.\(^1\)

The content of the CSE was obtained by having therapists and counselors write responses to client statements to compile a large variety of statements that would contain very helpful or very harmful responses. The final selection of the responses was done by professional judges who were highly skillful and effective as helpers and who scored in the highly discriminating range of the Carkhuff Scale. Modal ratings of the judges were selected for the scoring key, used to compare test subjects' ratings with the judges' ratings. The final refinement of the content led to the development of a 5 point scale ranging from Destructive to Very Helpful.

The scale for measuring empathy incorporates the criteria set by Carkhuff.

1. The helper is listening. He communicates no awareness of the client's expressed feelings.

2. The helper responds partly to the client's expressed feelings, and subtracts from the communications of the helpee.

3. The helper expresses essentially the same feeling and meaning as the client, and his expressions are interchangeable.

4. The helper adds deeper feeling and meaning and this helps the client to express feelings that he was previously unable to express.

5. The helper responds with accuracy to all of the helpee's deeper as well as surface feelings and is tuned into the

helper's wave length.¹

Wolf's scale is presented below to show the rating points for the counselor's responses.

<table>
<thead>
<tr>
<th></th>
<th>1</th>
<th>1.5</th>
<th>2</th>
<th>2.5</th>
<th>3</th>
<th>3.5</th>
<th>4</th>
<th>4.5</th>
<th>5</th>
</tr>
</thead>
<tbody>
<tr>
<td>Destructive</td>
<td>Minimally Helpful</td>
<td>Very Helpful</td>
<td></td>
<td></td>
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<td></td>
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</tbody>
</table>

The reliability of the Counseling Skills Evaluation was determined by administering the instrument to several groups of helpers and was indexed by Cronbach's coefficient Alpha. Several different groups were used to establish the reliability norms including undergraduate Alcoholism Training Staff, Counselors, paraprofessional trainees, drug addiction counselors, psychiatrists, psychologists, social workers, high school principals and school nurses. The highest reliability was found for psychiatrists, social workers, psychologists and psychiatric aides (.95). The next highest reliability coefficient was for undergraduates and training staff personnel (.92). For all samples combined, the coefficient Alpha for the test was .89.² Instruments developed by other researchers for group tests of empathy have yielded comparable reliabilities. In group tests using statements to be rated, the following coefficients were cited: Truax, Carkhuff and Kadman, .87 (1905); Truax and Wargo, .81 (1966); Campbell, Kagan and Krathwohl, .75 (1971).³

¹Ibid., pp. 10-11.
²Ibid., p. 12.
In their validation study Wolf and Wolf found that each of the subjects' ratings of the episodes were positively correlated with their scores on the overall test. For 800 subjects the correlations ranged from +.51 to +.85.1

The Counseling Skills Evaluation was selected on the basis of its reported validity, reliability and ease of scoring. To obtain ratings for subjects, the film must be presented and each episode is rated by placing a number on lines provided on a record sheet. Each subject will rate 60 responses. Once the exercise is completed, the subject's ratings are subtracted from the rating of the experts. The total of the difference scores is divided by the number of responses to yield an average difference score for each subject. The difference scores were used as the basis for statistical analysis of the subjects' performance relative to the hypotheses of the study.

A table of the percentile ranks for Empathy Test Scores is presented below:

<table>
<thead>
<tr>
<th>Average Difference Score</th>
<th>Percentile</th>
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</thead>
<tbody>
<tr>
<td>.82</td>
<td>95</td>
</tr>
<tr>
<td>.88</td>
<td>90</td>
</tr>
<tr>
<td>.92</td>
<td>85</td>
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</tbody>
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Table IV (Continued)

Percentile Ranks for CSE Scores

<table>
<thead>
<tr>
<th>Average Difference Score</th>
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<tr>
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<tr>
<td>1.06</td>
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<td>1.74</td>
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<tr>
<td>1.78</td>
<td>10</td>
</tr>
<tr>
<td>1.82</td>
<td>5</td>
</tr>
</tbody>
</table>

The Counseling Skills Evaluation provides standardized instructions for administration that are part of the filmed presentation. During the test, the administrator should have a reproduction of the record sheet projected on a chalkboard or overhead projector to reinforce and clarify the filmed instructions. The Empathy Test may be completed in 24 minutes; so minutes was provided during the experiment to allow for questions, passing out and collection of materials, and checking to assure that subjects were adhering to the standardized test procedures.

Conditions for testing recommended by the authors, included good lighting, adequate space, establishing rapport and clarifying instructions.

The Zener ESP Test

The Zener ESP Test was developed by Dr. Joseph B. Rhine. The idea for the test, however, came from Sir Francis Bacon in 1627. He suggested
that a practical way of testing the paranormal is by guessing the symbols on cards.\(^1\) For many experiments the standard playing card suit symbols were used before the geometric symbols were developed by Rhine and Dr. Karl Zener.\(^2\)

The ESP Test consists of a standard size pack of twenty-five cards, each having a single geometric symbol, either a star, a circle, a cross, a square, and three wavy lines. There are 5 cards printed with each symbol in the pack. There is a record sheet on which the subject records answers. This version of the test may use an open pack which has an irregular number of cards and a random selection of the symbols. Dr. Rhine concluded that more important than the cards themselves, was the statistical appraisals that could be accomplished through their use.\(^3\) Since 1931, the cards have been used in thousands of experiments on which statistical analyses were made to determine the extra-sensory performance of subjects. The standard deviation is the yardstick for measuring the significance of the scores.

The subject's score is the actual number of hits earned out of the total possible correct guesses above the chance expectation.

In the present experiment a closed pack was used. The number of trials was 25 allowing for a possibility of 250 hits.

Reliability studies of ESP card tests yield fairly low reliability because of the unconscious nature of the phenomenon. The average reliability

\(^1\)Wolman, *Handbook of Parapsychology*, p. 204.


\(^3\)Rhine, *New Frontiers of the Mind*, pp. 64-67.
for ESP card test data is .30, repeated tests of high scoring individuals over long periods give higher reliability.¹

The variety of methods of conducting ESP Tests for GESP are too numerous to mention here. Two of the methods in popular use are described below.

1. GESP - Individual Subjects

The experimenter shuffles the cards. The subject is seated behind a screening device or with his back to the experimenter. A signalling device is used so the subject can indicate when he is ready to guess a card. The experimenter picks up a card, looks at it and places them in order in another pile. The subject records each guess or call on the record sheet. The order of the guesses is matched with the experimenter's order. After all cards are called (25 for 1 run) the experimenter uses a newly shuffled deck to continue the next run or set of trials.

2. G.E.S.P. Test - Group of Subjects

The experimenter prepares individual target sheets for each subject. This is done by shuffling the deck and copying the resulting order on the record sheet. Each sheet is numbered and placed in an opaque manila envelope and sealed. A record sheet is placed on the outside of the envelope directly over the concealed record sheet. An envelope and record sheet is distributed to each subject and they are to write in the call columns the symbols they think will match those that are already written on the enclosed record sheet. The calls are later matched with the pre-selected ones by scorers who circle the correct calls and add
up the totals for all columns. For accuracy, two or three blind scorings are made. Once scores are obtained, they are subjected to the standard statistical analysis depending upon the hypotheses and purpose of the experiment. A reproduction of the cards symbols and the record sheet are presented in the appendix.

The Zener ESP test was chosen over the scores of methods used to obtain ESP scores because it is the most standardized method developed to date.

The test can be administered by a novice or by experienced researchers with comparable success if all testing condition are controlled according to instructions.

Group ESP tests should be conducted in settings free from distraction and in a pleasant relaxed atmosphere. The most important ingredient is the spirit generated. It is important for the experimenter to be enthusiastic and interested. The technique for testing should be well-worked out in advance. The experimenter has administered the Zener Test on many occasions to individuals and groups. An attempt was made to provide pleasant, relaxed, distraction-free surroundings for the administration of the test.

Research Procedure and Methodology

Relevant literature was examined prior to the design and execution of the study. The instruments were selected and pre-tested on three different groups.

Trainers were recruited and conferences were held with the three individuals selected. Agreements were made about the content of the training.

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The subjects selected for the study were volunteers who responded to announcements and letters distributed in classes, and to notices placed on message boards in classroom buildings, dormitories and lounge areas throughout the Atlanta University Center. Subjects who were interested in participating, obtained research interest reply forms from the experimenter or through professors who agreed to cooperate with the experimenter. Once the applications were returned, all subjects who indicated a career goal in some area of human service were placed on a roster. Names of the subjects were placed on oak tag discs and placed in a cannister. Fifty discs were selected at random. Although the experimental design called for 45 subjects, the extra subjects were selected to accommodate the drop out factor. Among the selected subjects there were 29 males and 21 females. Previous experience has shown the difficulty of holding volunteer subjects.

Subjects who were selected for the training were notified of their acceptance and were asked to sign contracts to participate in the training for four evenings. The contract was utilized with the reasoning that signing an agreement would be somewhat more binding than a verbal commitment. The schedule of the training was posted and simple instructions were given as to where and when subjects were to report.

The experimenter and the assistants duplicated and organized the necessary materials. A thorough discussion and review of the training procedures were carried out with the trainers. It was communicated that subjects would be randomly assigned to the experimental and control groups. A roster of the participants was given to each trainer the first evening of the training.

The target selections for the ESP Test were recorded and sealed in envelopes. These were locked in a secure closet until they were needed at
the end of the experiment.

On the first night of the experiment all 50 subjects convened in a large room for orientation and the pre-test.

After having students sign in, the experimenter thanked them for their participation. During the orientation, the experimenter explained to the subjects,

"I am interested in finding out more about the traits and characteristics of individuals who want to go into professions that provide services to other individuals."

"Just as a preliminary investigation, what are some of the services that professionals provide for individuals or groups to either improve their personal well-being or solve their problems?"

A number of participants responded and related a variety of services including teaching, medicine, mental health services and social services.

"What are some of the traits or knowledge you believe all individuals who work with other individuals or groups should have?"

Some of the traits listed were as follows:

1. intelligence
2. knowledge of their field
3. compassion
4. understanding
5. empathy
6. honesty
7. objectivity
8. kindness
9. generosity
10. friendliness

11. warmth

12. respect for all human beings

"You certainly know a lot about the traits that are effective in working with other human beings in a helpful manner. For the next few evenings you will participate in some experiences that should help you to understand more about these traits and how to develop them more fully. You will be randomly assigned to one of three groups in which you will have some enjoyable experiences, discussions and activities that help you learn more about yourself in relation to some of the traits we have discussed. The first activity of the experience will be a film that will help you understand something about people and their problems. I would like for you to react to the film according to instructions given. You will have a sheet on which to record your reactions."

Several students asked a variety of questions. All questions seemed to be answered satisfactorily without giving specific information about the training. When it was apparent that most inquiries and curiosities were satisfied, the experimenter asked the assistant to bring the projector into the room.

The experimenter explained, "The film will only be shown once. You must attend to it carefully and try not to disturb others by talking, laughing, gesturing or other distracting behavior." A copy of the test record sheet was projected to reinforce the instructions that were provided on the film, the projector was stopped to determine if everyone understood the procedure. The film was reset at the starting frame and the Counseling Skills Evaluation was completed. After the film was over, the experimenter checked each record sheet with the help of an assistant and collected the record sheets. The subjects were advised of where to report for the next evening's activity and dismissed."
The CSE record sheets were checked and scored. They were re-scored for accuracy by two assistants who were not present at the time of the pre-test, but were instructed earlier how to check the scoring. Once obtained, the scores were ranked from low to high. The lower scores representing the least difference in the subject’s ratings and the experts’ ratings. Using a table of random numbers, subjects were randomly assigned as a block (three subjects to each block), to each of the experimental groups. The extra subjects were kept in reserve for possible assignment if there were drop-outs. (The first three subjects were each randomly assigned to the meditation (1) empathy, (2) and control group respectively.) The same procedure was used for the next block of three and the remainder of the blocks.

On the second evening of the experiment, all subjects assembled in a large classroom. Attendance was taken and the experimenter checked off the names of those present from the group assignment lists. The trainers were provided with a list of their trainees and were introduced to the group. Two subjects did not come at the time the training was to begin. This resulted in the need to reassign the extra subjects. This was done by flipping a coin. After all groups were assigned, the subjects and the trainers went to their respective training areas.

Experimental Training – Meditation

Evening I

Subjects participated in get-acquainted exercise. It is entitled "Who Am I." The exercise was answered in writing and responses were discussed.

The trainer asked each subject to pair up with someone and discuss
what they knew about meditation and to share any experiences they may have had with the process. After 3 minutes, the subjects returned to the larger group and shared their findings. None of the subjects were regular meditators, two had tried to learn meditation by reading, but felt they had not been able to accomplish the technique.

The trainer gave a lecturette on Zen Meditation. He described the philosophy, historical background, vocabulary and provided examples of the effects of the Zen experience. Quotations from some of the Zen masters including Buddha, Hui-Seng, Tosotu.

The subjects were carried through a relaxation technique through audio-taped directions (musical background). Following the relaxation exercise, subjects reported their experiences.

The final activity of the evening was an introduction to the Zen breathing techniques and sitting postures. Individualized assistance was given to each individual. When it appeared that subjects understood the procedure, they went through a short meditation period.

Each subject was asked to try the technique on their own the next morning or sometime early in the day before coming to the training.

**Evening II**

The group assembled in their training area. To begin the evening, subjects were asked to report on their meditation experiences attempted at home. Several subjects asked questions about their experiences and the trainer assured them that there was a range of experiences for individuals who meditate.

The trainer lecture on the Yoga school of meditation and provided
information about the Yoga masters including Yogananda, Maharishi, Krishna, and Patanjali. He read quotes from passages in the Yoga Sutras. Subjects were invited to comment on the passages and ask questions.

Techniques of Yoga meditation were described and demonstrated. These techniques included lotus position, the Prahna (breathing), meditating on an object and the use of a mantra.

After a short break, the trainer resumed the topic of Zen meditation. During the lecture, he explained the concept of "Satori" which means insight and enlightenment. The value of reading extensively into the literature of different Zen and Yoga masters was explained. Some books were suggested for further study. Some titles given were: Buddhist Meditation by Conze, The Teachings of the Compassionate Buddha by Burt, Meditation by Smith, A History of Zen Buddhism by Dumoulin, Varieties of Mystical Experience by O'Brien, and A History of Zen by Edward Maupin.

The concept of the Koan or philosophical question was explained. It was explained that the Koan does not have a specific answer, but the capacity to lead the student to the "aha" or enlightenment that goes beyond reason or logic.

An example of the kinds of Koans used for enlightenment were given. Each subject was given a Koan to contemplate silently for five minutes.

How does a wing fly?
Describe silence.
What is the eye that does not see?
All is nothing, nothing is all.
What is the sound of one handclapping?
Describe a melted snowflake.
Where does the mind end?

Subjects were asked to form triads to discuss their "koans" with other individuals.

The final activity of the evening was a relaxation exercise provided on a tape cassette. This was in preparation for the meditation to follow.

When the trainer was assured that subjects were relaxed, instructions for meditation were provided through an audio-tape. Instructions were as follows:

"Sit with your back straight, but not rigid. Rest your arms gently at your side. Rest your hands on your lap, palms up or palms down. Bring your attention to the most noticeable point of touch where the breath enters the nostrils. Feel the cool tingling sensation. Now let your attention move to the movement of your abdomen and fill your body cavity with air. Feel your abdomen become flat as you slowly force all of the air out of your body into the room. Concentrate on your "breathing in and breathing out." "Breathing in and breathing out." Do not think about breathing. Become one with each breath. You may say to yourself one, one, one. If you desire you may repeat this four or five times.

Thoughts will come into your mind. They will float up like bubbles from the bottom of a pool. One, two, three or several ideas, sounds, sensations may seem to distract you. Let them float up and pass away. As you focus on your breathing, the ideas, sounds and sensations will fade away.

You may now feel a little uncomfortable or anxious. Shift around a little until you find just the spot that relieves the discomfort. Now you feel the tension going because you are attending to your breathing. The thoughts come and float away as you feel the coming and going of your breath. See, hear and feel each breath. Each breath is unique. Breath is going in stopping, and coming out. Breathing is going on by itself. Your body is relaxed now. Your eyes are restful, there is no tightness anywhere. You are aware, you know you feel, you hear your breath come and go. Just awareness and breathing. Stay, don't let your mind pull you away. Gently, return to the breath. The body now breathes by itself. Each breath is unique. Each moment is new. Moment to moment ob-
jects arise and float away in the vast ocean of the mind. You are aware, thoughts are simply passing through the ocean of your mind. Floating away... lightly like wind-blown features. All sounds are floating away. All feelings are passing away. What we think is passing away. Whatever is, is not. Just as your breath now. Coming in stopping, going, coming stopping going. Thoughts going, feelings floating, sensation sensing. Everything is going into nothing except breathing. (pause several minutes). You can now return to seeing and feeling and thinking as you open your eyes. There is no rush, you may wish to take a moment or two longer. We welcome your return (end of tape)."

Following the meditation, subjects were asked to share their experiences. Among the experiences reported were feeling good, feeling wise, feeling peaceful and calm, feeling light, having a tickle sensation, almost invisible, feeling alert, and knowing that something good was occurring somewhere. These feelings are frequently reported by habitual meditators. All indications were that all of the group were learning the techniques effectively.

During the meditation, lights were cut and candles were lit at opposite ends of the room. This is a frequent technique used to create an atmosphere that reduces distraction such as various stimuli that would command one's attention in a highly illuminated room.

Subjects were permitted to ask questions or share any other thoughts or feelings they had.

Before the session terminated, the trainer reminded the subjects to meditate the following morning for at least a few minutes so they would not forget the technique.

Evening III

On the final day of the training, subjects were asked to briefly recapitulate the things they remembered about the previous lectures. Each
individual was given three minutes to write down his or her report. Subjects were asked to share their knowledge with the group if they so desired. All subjects participated in the reporting of their observations.

The trainer lectures briefly about other types of meditation. He gave special attention to the similarities in the different methods.

Transcendental meditation is the most frequently reported method of meditation in the U.S. It is estimated that over 20 million Americans practice the technique. The trainer pointed out the costs of learning T.M. He also related some of the reported benefits of T.M. These included relaxed states, reduced anxiety, reduction in heart and pulse rate, increased mental alertness and better memory.

Spiritual meditation was explained to the subjects. The elements of spiritual meditation that were emphasized were, the effectiveness of short prayers to be used like a mantra and imaging. He read several examples of spiritual meditations. These were selected from Meditations of Paramansa Yogananda, Moments with My Master by Judith Koehiger, and Growth Through Meditation by Fay C. Oliver.

A list of references were given to the subjects to assist them in furthering their knowledge. Among the books suggested were How to Meditate, Lawrence Le Shan, Meditation by Alan Watts, Varieties of Meditative Experiences by Daniel Curtis and Transcendental Meditation by Maharishi Mahesh Yoga, The Transcendental Meditation Primer by Patricia Hemmingway, and The Experience of Insight, A Natural Unfolding by Joseph Goldstein. The above activities occupied a period of approximately an hour and one half.

After a short break, the group arranged the chairs and dimmed the lights to prepare for meditation.
The trainer asked the subjects to assume the meditative posture. The particular posture as described earlier was as follows:

"Sit with your back straight and your feet slightly apart. Rest your arms lightly next to your body. Turn your hands palms up or palms down, whichever is more comfortable. Let your head lean slightly forward. Gently close your eyes and focus your sight toward your eyelids. Relax your head and shoulders, your chest, your abdomen, your thighs, your legs, your feet, your toes. Breathe in, fill your insides with air, release the air. Concentrate on your breathing. You are now ready to enter meditation."

The trainer turned on a cassette recording for the guided meditation. After the allotted period of meditation, the subjects were permitted to sit a little longer if they desired or to move about the room. Subjects were advised that there was another part of the training that would follow in a few minutes. All subjects completed a written experience evaluation. Several students browsed through the books and talked among themselves until they were directed to assemble for the post-tests.

Control Group

Evening I
(3 hrs.)

Subjects in the control group were introduced to their monitor and proceeded to their activity area. After attendance was taken, subjects were asked to relate what kinds of music they enjoyed. There was an informal rap session about music. The trainer explained that in the first part of the evening he would play some records depicting the development of Black music starting with African Rhythms. He played excerpts from an album entitled Negro Folk Music of Africa and America, by Ethnic Folkways Library. Subjects were asked to give their impressions of the early rhythms as compared to modern day rhythms.
Records of early jazz musicians who were popular in the 1930's and 1940's were played. This included songs by Fats Waller, Art Tatum, Jelly Roll Morton, Jimmy Lunceford and James Johnson. Subjects reacted to the music by commenting on the selections and pointing out similarities or differences.

A short biographical sketch was given of each musician.

The next group of records were renditions of jazz from the 1940's to the 1950's. The musicians featured in the selections were the Modern Jazz Quartet, Charlie Mingus, Charlie Parker, Bud Powell Trio, Charlie Christian, Scott Joplin and Jimmy Blanton. After each selection, the trainer commented on the significance of each musician's contribution to the field of jazz. Subjects were allowed to ask questions and to make comments.

A select group of records representing the Be-Bop era were played. The musicians featured were King Pleasure, Dizzie Gillespie, Kennie Clark, Louis Armstrong. After each excerpt, subjects were asked for feedback or comments.

The third group of selections featured three decades of the music of Duke Ellington, Count Basie, Lionel Hampton, Erroll Garner, Kai Winding and Ramsey Lewis. Subjects were asked to comment on the changes or similarities they would identify in arrangements or instrumentation of the various artists.

A list of names was written on the chalkboard for subjects to select a choice of records for their listening pleasures. After each selection, subjects were permitted to comment on the selections if they so desired. The total session lasted about 3 hours.
Some subjects stayed to talk to the trainer and to write down the names of artists that they wished to learn more about. The trainer invited the subjects to bring jazz recordings from their own collections to the next evening session.

Evening II
(3 hrs.)

The activities of the second evening began with the trainer requesting subjects who had brought in recordings to share with the groups. Three subjects brought in L. P. records which were played for the groups' listening pleasure. Each student explained what they liked about the selections they chose.

Music selections for the rest of the evening presented vocal jazz performers. The artists included both male and female performers.

Before each selection was played, the trainer made some brief statements about each artist's life and career.

The vocalists included the following female artists: Bessie Smith, Bessie Jackson, Maxine Sullivan, Esther Phillips, Pearl Bailey, Lil Green, Dinah Washington, Sarah Vaughn, Lena Horne, Billie Holliday, Ella Fitzgerald, Aretha Franklin, Minnie Rippererton and Dionne Warwick.

After each song or excerpts, subjects were asked to comment on the styles and arrangements of the particular rendition.

The final segment of the evening's activities was the presentation of songs by male artists.

Selections were played from albums or single records. Among the artists featured were Orlando Robinson, Sam Cooke, Nat King Cole, Bill Kenny, Al Greene, Arthur Prysock, Billy Eckstine, Lou Rawls, Billy Daniels, Oscar
Browne, Cab Calloway, James Brown and Lonnie Green, Sammy Davis, Jr., Barry White, Steve Word, Ray Charles, Johnny Mathis and Marvin Gaye comprised the final group of vocalists that were presented to the group.

After listening to the various artists, the trainer asks the subjects to write a short essay about their impressions of some of the artists. These impressions were later shared in small groups of three or four subjects.

A few single records were played for the listening pleasure of the subjects. Some of the subjects asked permission to dance and this was permitted. The group was formally dismissed at 9:30 p.m.

**Evening III**

The evening began with a short lecture about the similarity between Gospel music and jazz. Subjects were brought into a discussion by having them comment on several gospel records played by the trainer.

The first group of records featured some early recording artists. These included Clara Ward, The Paine Singers, Thomas Dorsey, Mahalia Jackson and Brother Joe Mays. After each selection was played, subjects were allowed to make comments or ask questions.

Another group of records featured contemporary gospel artists with choral groups as back up singers. The performers presented were The Angelic Gospel Choir, The John Haysen Singers, The James Cleveland Singers, Shirley Caesar and the All Stars, Brother Joseph Franklin and the Franklin Singers, The Institutional Baptist Choir, The Voices of Christ, and the Atlanta Philharmonic Choir. From time to time the trainer provided anecdotes or vignettes about the group or individual performers. He also commented on the various styles and arrangements reflected in the music.
After the segment was completed, subjects were given a short break to write down names of albums or engage in conversation.

The trainer showed slides with taped music accompaniments. The music was a pot pourri of contemporary rock and disco music. Among the musical groups providing the background music were the O'Jays, Earth Wind and Fire, Slave, The Average White Band, Rolls Royce, Ashford and Simpson, Peaches and Herb, Cool and the Gang, Sheik and The Commodores. Following this experience, the trainer asked subjects to give their opinion of disco music as compared to the other types of music they had listened to. A rather lengthy discussion followed. The trainer played soft music while the discussion continued.

Upon the termination of the discussion, the trainer announced that students should remain for the final part of the training. The subjects completed an experience evaluation by completing a short written form. The trainer stated that all of the subjects seemed to enjoy most of the experience.

Empathy Training

Evening I
(4 hrs.)

The training session began with a warm up experience. Subjects were asked to mill around the group and look at each participant without speaking. After two minutes, each individual chose a partner to engage in dialogue. The only requirement was that the dialogue begin with a compliment or positive statement. Each member of the dyad was to respond to the statement and thereby begin the dialogue. The objective of the dialogue was to learn something unique or unusual about the individual that was not known to a lot of individuals. After the short dialogue, individuals reassembled into
a large group and shared the impressions and information with the other subjects.

The content of the training was taken from "Tune In and Listen," a course to teach empathy. The materials consists of 12 cassette tapes, an instructor's manual and a series of response sheets for subjects to write out certain exercises that help them to demonstrate the principles and techniques developed in the training. Although the training workshop is packaged, it provides for flexibility and modification of the content and procedures by the trainer.¹

In an attempt to provide a background for the training the trainer gave a comprehensive lecture on empathy. To begin the lecture, empathy was defined. Considerable attention was given to the role of empathy in helping situations as well as everyday life. A description of the five levels of empathy were presented during the lecture. The importance of empathy in relation to other helping variables was also discussed. It was also explained that individuals have different levels of empathy and that it may increase or decrease. Finally, the trainer briefly outlined the objectives and activities that would be pursued for the next three evenings. Subjects were allowed to ask questions for a brief period of time.

Before the participant training activities began, the trainer explained the importance of confidentiality. He solicited the commitment of all trainees to conform to the rules of confidentiality through the training experience.

¹Donald Tubesing and Nancy Tubesing, Tune In and Listen (Milwaukee, Wisconsin: The Listening Group, 1976).
The furniture was arranged in a circular manner to give a greater sense of cohesiveness to the group. Space was also cleared to allow for activities that required moving around the room or forming small groups.

**Evening I**

**Feelings At War Within Me**

**Trainer:** "In this next 25 minutes you will attempt to recognize conflicting feelings within yourself. I want you to recognize the war which takes place between how you think you should feel and how you actually feel. You are to listen to internal voices that are your feelings on the one hand the censor that says how you feel."

**Exercise I**

Subjects were asked to move around the room to form a dyad with another person. The instructions were to sit facing one another without talking or touching to try to read the other's feelings. After three minutes, subjects formed a large group and answered the following questions through discussion:

- How did you feel during the exercise?
- What kind of feelings did you read in your partner?
- How did you try to communicate your feelings to others?

The next part of the exercise required subjects to identify a situation in their own lives in which they had conflicts between what they "should" feel and what they actually "did feel." Some examples were given to illustrate the difference in a "do feel" and a "should feel" experience. An illustration is given below.

**I do feel**

"This guy turns me off."

**I should feel**

"You ought to want to help him. That's what you are."
The exercise required subjects to write down ten situations in which they indicated their actual feelings and what they thought their feelings should be. After completing the written exercises, subjects were asked to choose a partner and sit together in order to discuss the information. The trainer moved among the small groups to encourage the honest sharing. When this activity was completed, the large group reassembled. A summary statement regarding conflict in feelings was provided by the trainer. He explained that the next activity would give the subjects skill in expressing feelings.

Expressing Feelings

Trainer: "We spend a lot of energy and place our selves under strain trying to hold our feelings back. This makes us uncomfortable and at times may cause a sensation of pain. Once we express our feelings, we may have a sense of pleasure or relief. If we are angry with a parent, a friend or a boss, and we hold back our feelings, we feel literally miserable. It may be a feeling of heat all over your body. A feeling of a lump or a pain in your chest or a sense of weight and heaviness on your shoulders. When you finally get a chance to even curse under your breath, it may feel so-oo-oo-good. Even sometimes a fight makes people feel relief. If we are sad and try to hide that feeling it may also cause a sense of pain inside one's body.

Subjects were told to take a sheet of paper and write down 2 headings, Motive and Purposes. Each subject wrote a response to the statement, "I need to talk to you." They also wrote on paper what they thought the person was trying to say. When all responses were written down, the subjects shared their responses with other members of the group. Following the above activity, the trainer gave several examples of "feeling" statements as contrasted to "thought" statements.

Subjects were asked to pair up with someone to discuss feelings that they found difficult to express. They were also instructed to think of verbal
ways to honestly express their feelings. Each individual was to try out these ways of sharing his feelings with his partner.

After the completion of the exercise, subjects were asked a series of questions. These were as follows:

Did you have any strong feelings?
Did you recognize what the feelings were?
Did you express your feelings or just your thoughts about feelings?

Each subject responded to the questions verbally when he was called upon. A general discussion about feelings followed. At the end of the discussion, subjects were allowed a short break before beginning the next activity of the evening.

The final activity of the evening was a review of the ideas about empathy presented in the opening lecture. Subjects were also helped to see how their exercises on feelings related to empathy. At the close of the review, subjects were dismissed.

Evening II

Total Listening

The session began with the taking of attendance. As a warm-up exercise, subjects were asked to pair up with another individual. The task was to use the hands and eyes to communicate information about each person's activities during the day. Each partner of the dyad was given the opportunity to interpret the hand and eye message of the one who acted as sender. After this activity, the planned training activities began.

Exercise I

Trainer: "During this session you will be learning some new concepts. We will also have you participate in
some experiences that will help you practice tuning into and recognizing the feelings of others. Pair up with another individual or two if there is an odd person. Sit in your chairs back to back. First tune in to your own feelings. Lean forward and do not come into contact with your chair or another individual. (after a minute) Now lean back and let your backs touch! Try to tune into your partner's feelings! Notice his or her body! Try to identify the person's feelings by noticing the tone of his voice, rate of speech, loudness and rate of breathing. "Turn around and face your partners! Have a conversation about their feelings without words! You may look, gesture or touch, but not talk." (after several minutes) stop! Now talk about your feelings and also tune-in and listen to your partner about his or her feelings. Do not judge or analyze what is being said."

After several minutes, subjects were asked to form a large group and to discuss their experiences in the small groups. The trainer gave the group a list of clues that people use to attend to and recognize the feelings of others. These clues included, voice tone, facial expression, body language, eye movement, and the nature of the phrases expressed. Each member of the group was given a slip of paper with a feeling to express non-verbally.

The trainer summarized the concepts of "Total Listening" for the subjects. Included in the concepts were, attention, active listening, observing behavior, inferring meaning, and readiness to respond.

Exercise II

The subjects participated in a listening exercise in which excerpts from clients' statements were presented on a cassette tape. At intervals, the trainer stopped the cassette and allowed the subjects to state what they had heard and to infer meaning from the content of the statements. The group gave feedback to each participant regarding the quality of his or her performance on the exercise.
Evening II
(4 hrs.)

The Art of Paraphrasing

The first activity of the evening was a lecture review of the actions in the empathy process. Elements in the process that subjects had experiences in the early sessions were, "Tune into your own feelings," Express your own feelings, and "Tune-Into-Others' feelings." Subjects were given an opportunity to ask questions before proceeding to the next activity.

Trainer; "In this segment you will focus on the toughest part, that of responding to the feelings of another in a way that he knows you have heard, understood and accepted his feelings. The final phase of empathy will be approached from four different angles. The remaining hours in the workshop will focus on the art of "Paraphrasing"; "Levels of Empathy" and "Skill Practice." In the session in which you are now involved you will be responding with empathy through the use of paraphrases. Paraphrase is probably the most important single concept and skill in the empathy process. During the next 90 minutes, you will be asked to do some extensive practice with paraphrasing."

The trainer gave a comprehensive explanation of the significance of the paraphrasing process. He gave examples of paraphrasing, and the way to check one's perceptions and understanding of what the other person is saying. He pointed out the divisions of paraphrasing. The first was, "Imitating what you heard," the second was "Paraphrasing the feelings," and the third was Attending to the feelings and paraphrasing them.

Exercise I

Students were given a list on the chalkboard of examples of different levels and divisions of paraphrasing. The trainer elaborated on the nature of paraphrasing. Subjects then listened to excerpts of dialogues presented
Exercise I

Students were given a list on the chalkboard of examples of different levels and divisions of paraphrasing. The trainer elaborated on the nature of paraphrasing. Subjects then listened to excerpts of dialogues presented on a cassette tape and were asked to write a paraphrase for each statement. After students had read their paraphrases, the trainer gave examples of effective paraphrasing for each statement. He also explained the importance of paraphrasing non-verbal as well as verbal behavior.

Exercise II

During the second part of the session, subjects arranged themselves in groups of three or four. The groups were instructed to have a ten-minute conversation on the topic, "When I'm Angry With Someone, It Is Best to Just Let Him Have It." The first speaker was to start the conversation and each other individual must paraphrase what the previous speaker had said, to the speaker's satisfaction before he could add his own ideas. The goal was to stretch the ability to paraphrase to its limit. After the exercise, the trainer asked the subjects questions about their experiences. Some of the questions were:

Did you paraphrase the others' statements to his satisfaction?
Were you uptight about the statements you made?
Did others have difficulty paraphrasing you?
Subjects responded to the questions individually and gave feedback to other members of the group.

To wrap up this segment of the session, the trainer elaborated on the paraphrase process and gave subjects additional criteria for evalua-
ting their paraphrasing statements.

Exercise III

Subjects were asked to divide into two groups. They were given the task again of paraphrasing the statements of others in the group. For a period of several minutes, instructions were given for subjects to employ the rules for paraphrasing that were explained earlier in the session.

When the time allotted for the exercise was completed, the trainer suggested that subjects use the art of paraphrasing in their daily conversations with individuals before coming to the next session.

Evening III
(4 hrs.)

Response Modes

The trainer began the evening by having subjects pair up with another individual and hold a five minute conversation about how they had used the art of paraphrasing in their previous days' activity. After the allotted time, the subjects formed one group to receive instructions for the rest of the training session.

Exercise I

Trainer: "In this session you will learn five response modes which are a classification system for evaluating all possible responses. One of the categories is the paraphrase response which is the heart of empathy. You will attempt to identify these responses as clearly as possible in order to see the empathy response in the context of all possible responses. You'll identify your own habits and typical modes of responding and will work on the art and skill of paraphrasing responses. The five modes of response are evaluating, interpreting, supporting, probing, and understanding."
In the first episode, you will hear a speaker present 3 aspects of problems facing him. You will listen to the statements and write your response to this person in one or two sentences on the sheet of paper provided. Write your response as if you were actually having a conversation with the person. I will give you about a minute to write the response after each statement."

Exercise I

Subjects listened to each statement presented on cassette tape. Each wrote a response to the statements as directed. When all responses were recorded, the trainer gave a short lecture on the intent behind each response category. Subjects were encouraged to take notes.

In summary, he explained the following:

1. An evaluating response is an intention on the part of the responder to make a judgement or give advice.

2. An interpreting response is intended to teach and tell a person what his problem means or what caused it.

3. A supporting response intends to reassure the other person or dilute the intensity of that feeling by giving a soothing response.

4. A probing response is intended to get more information and indicates that the responder wants to find out something that has not been said.

5. The paraphrase intends to check on whether the responder sees or feels the problem of the speaker.

Taped excerpts of the modes and categories of responses were played to provide examples of the intent of the exchange between a helper and a helpee.

Exercise II

All subjects were instructed to listen to a taped statement. They were directed to write a response to the statement that demonstrated each
of the response categories. Upon completion of the written exercise, subjects were asked to discuss their responses in a group. The trainer facilitated the discussion to keep the group focusing on the essential elements of identifying the specific response modes and to encourage each group member to share their information.

Another statement was played for the group. The statement was followed by five different responses, each representing the categories described earlier. Subjects were then asked to look at the first three responses that were made to a statement early in the session. Each response was then asked to try to classify their response style. The final part of the exercise was to have each member of the group read their statements and have other members take three or four minutes to comment on the responses that were made. Students were asked to help members of the group understand their response styles. Upon the completion of this exercise, subjects were allowed to break for 10 minutes.

The second part of the session began with a lecture on the five levels of empathy. Statements were listed on the board that represented the five levels of empathy. A summary of the description of these levels is given below.

Level 1. The helper is listening. He communicates no awareness of the client's expressed feelings and expressions.

Level 2. The helper responds partly to the client's expressed feelings.

Level 3. The helper expresses essentially the same effect and meaning as the client.
Level 4. The helper adds deeper feelings and meaning and this helps the client to manifest feelings he was unable to share previously.

Level 5. The helper adds significantly to the client's feeling and meaning. He responds with full awareness of who the client is.

Exercise III

The next activity required subjects to listen to taped excerpts of problems and the responses to the problems. Using the empathy scale, subjects rated the responses given to each problem excerpt. After all responses were rated, the subjects discussed their ratings within the group. The trainer later provided the subjects with the correct ratings for the excerpts and explained the reasons for each rating.

For the second part of the exercise, subjects were given the directive to divide into triads or groups of four if there was an odd person. Strips of paper with problem statements were randomly selected from a box. These statements were read in turn by each member of the small groups. The speaker was responded to by one member of the group. The other members rated the empathic statement of the responder. Ratings were shared and discussed using the empathy criteria presented earlier. The groups continued the skills practice until all the statements were responded to and rated.

The final activity of the training session was a question and answer period. The trainer had the group respond to questions about the concepts and skills covered over the total sessions. Subjects were also asked to verbally share their feelings and conclusions about the total training ex-
The discussion lasted for a considerable period. Each subject was asked to complete an anonymous evaluation of the training experience. The group moved from the training area to join the other experimental groups for the final phase of the experiment.

Data Collection

All subjects gathered in a large room to participate in the post experiment testing. When all subjects were accounted for, the experimenter asked the trainers to wait in another office until the post tests were completed. The experimental assistants brought in the projector, the test response sheets and the ESP envelopes to be used in the testing period.

Once all subjects were assembled, the experimenter assisted the subjects in arranging their desks so they were placed at a comfortable distance from each other. All subjects were asked to put any objects out of reach except for their writing tools. Most subjects had ball point pens as requested but a few had to use pencils. Forty-four subjects were randomly seated in the testing area to prevent the training groups from clustering. After a few minutes subjects settled down and the experimenter asked for all talking and noise to cease. When all subjects were quiet and attentive, the ESP envelopes were distributed randomly with the test sheets face down. Subjects were instructed not to handle materials until instructions were given. It was stressed that any unsealed envelopes could not be used in the study and therefore they should not be opened under any circumstances.

To assure that subjects would be thoroughly familiar with the geometric symbols to be selected for the Zener ESP Test, a reproduction of the
symbols was projected on a screen for the subjects to scrutinize. A reproduction of the test blank was reproduced on the chalkboard to demonstrate the method of recording responses. Time was allowed for subjects to ask questions. Once all questions were answered, the experimenter asked all subjects to refrain from any further talking. Subjects were instructed to use a signal of extending two fingers if they needed any further assistance. It was emphasized that a quiet non-distracting atmosphere would assure the best performance.

Instructions for the Zener Test were recorded on cassette. A transcript of the instructions is shown below:

Trainer: You are now going to demonstrate an ability that we all have to some degree yet it is seldom measured. The ability is known as extra-sensory perception or ESP. Extra-sensory perception is a way of knowing about objects, events or situations that exist or occur without using our ordinary five senses. There are 250 symbols in each envelope. Each individual has a different order of the symbols. You are to use your extra-sensory ability to guess the order of the symbols that I showed you on the chart. Any other symbols will not count.

I want you to relax and let your mind gently receive the information about the symbols that are in your envelopes... Relax as completely as you can and clear your mind of all other thoughts... As you relax and your mind slows down, you will be able to call or perceive many of the symbols in accurate order. Mark your guess down as quickly as it comes into your mind... Right now, I want you to gently close your eyes and take three deep breaths... Let's breathe. Inhale deeply... deeply... and now let the breath out. Again... inhale deeply and fill your lungs and your body with air until you feel filled up. Now let the air out slowly and completely. Let all the tension go from your forehead... your neck... your shoulders, your chest... your abdomen. Let your arms hang loose and relaxed. Take another deep breath. Fill your body with air... now let it out. Relax the lower part of your body. Feel the tension go out of your hips, your thighs, your calves, your ankles, your toes... Now, your mind and body should be relaxed. Now
that you are at ease, you will be able to call the symbols and write them down on your test sheet...
Remember, let your mind be open and receptive to the information about the symbols. When I raise my arm you may begin to record your responses. When you have recorded all of your guesses and completed all the columns, place your envelope with the record sheet face down and place it at the side of your desk. Do not talk, just relax until the others have completed their sheets. I will signal when the time is up. Now let me see all eyes looking at me. Do not pick up your pencils until I raise my arm..."

The signal was given and subjects began to record their responses. Twenty minutes were allotted for the test. All subjects completed the test in 18 minutes. Test materials were checked and collected by the experimenter and an assistant who was called into the room when the test was completed. The test materials were placed in two cardboard boxes, taped securely and locked in a closet that could only be opened by the daytime department secretary.

Following the ESP Test, subjects were permitted to talk or smoke for five minutes. At a signal from the experimenter, subjects were alerted to return to their test ready positions. When all subjects were seated and quiet, the test record forms were distributed. The experimenter explained the necessity of maintaining a quiet relaxed atmosphere. After a few minutes of settling down it was evident that subjects were ready to begin the Empathy Test. The film of the test was switched on and the narrator repeated the standardized instructions for completing the test. The instructions indicated when to begin and end the test. The total time of the test was 36 minutes. All test materials were collected and accounted for.

The trainers were called back into the room after the tests were
collected. Each one gave a closing statement and thanked the subjects for participating in the study. The experimenter also thanked the subjects and advised them that they were free to leave or remain to talk with the trainers.

Treatment of the Data

The hypotheses tested in this study are stated in the null form below.

1. There is no significant statistical difference between the Empathy Test scores of the subjects trained in empathy skills and the subjects who receive no training.

2. There is no significant statistical difference between the Empathy Test scores of the subjects trained in meditation and the subjects who do not receive training.

3. There is no significant statistical difference between the Empathy Test scores of the subjects trained in empathy skills and the subjects trained in meditation.

4. There is no significant correlation between the Empathy Test scores and the ESP Test scores of the subjects trained in empathy skills.

5. There is no significant correlation between the Empathy Test scores and the ESP Test scores of the subjects trained in meditation.

6. There is no significant correlation between the Empathy Test scores and the ESP Test scores of the subjects who do not receive training.

7. There is no significant correlation between the Empathy Test scores and the ESP Test scores of all subjects including those in the training groups and the non-training groups.

In order to test the above hypotheses, the following procedure was followed.

The Empathy Test and the Zener ESP Test were checked and scored by three professional individuals, two psychologists and a school counselor.
This procedure was followed to insure the greatest degree of objectivity in scoring. All tests were triple checked for error. A final check of the test items was made by the experimenter to verify the accuracy of the scoring.

The data obtained from the tests was organized and entered into the computer at Atlanta University and again at Georgia Technical Institute to confirm the accuracy of the statistical programs used in the analysis. The level of significance for the statistical interpretations was set at .05.

A post-hoc t-test statistic for the treatment group means was obtained to determine the significance of the difference between the means. This treatment tested hypotheses I, II and III. A treatment by blocks, analysis of variance was used to determine the variance between the blocks and within the blocks.

A Pearson's Product Moment Correlation was calculated to measure the correlation between the Empathy Test and the Zener Test, and therefore, to test hypotheses 4, 5, 6, and 7. A test-retest reliability coefficient for the Empathy Test was calculated to obtain further information about the instrument. The analyses employed in this study were those appropriate to test the hypotheses stated.

This chapter has presented a description of the design of the experiment. A description of the locale of the study and the type of subjects was included in the chapter. The instruments used in the study was described and the justification for their use was explained. A summary of the experimental activities of the three groups has been provided. Finally, the method of collecting the data and the steps executed in treating the data were explained.
CHAPTER IV

PRESENTATION, ANALYSIS AND INTERPRETATION
OF THE DATA

The data are presented in this chapter. The data are organized in the same sequence as the null hypotheses are stated in the previous chapter.

The statistical test used for hypotheses 1 through 3 was the t-test for matched pairs. For hypothesis 3A, the statistical test used was a randomized block ANOVA. To test hypotheses 4 through 7, the Pearson Product Moment Correlation was used.

The present study has been executed to compare the effects of two different experimental treatments on the empathy scores of undergraduate subjects who plan to pursue careers in human service. The study also sought to determine if there was any relationship between the empathy scores of the subjects and their extra-sensory scores.

Introduction

Empathy training has been frequently employed to produce or increase empathy in helper trainees. The researcher assumed that meditation training might be as effective as empathy training in producing empathy in subjects who plan to enter human service careers. Assuming that empathy tests are valid, subjects trained in empathy should earn higher scores on empathy tests than subjects who do not receive training. One would also expect that subjects trained in meditation would earn higher scores on an empathy
test than subjects who did not receive training. On the other hand, it may be that one type of training may not be superior to another in developing empathy. If this be true, then empathy may be related to some other trait, in this instance, extra-sensory perception. To seek answers to these questions, the researcher carried out an experimental study whereby one group of subjects was trained in empathy, another in meditation while a third group served as a control. The raw test scores of the subjects are presented in Table V and Table VI.

The research sample consisted of 25 male and 17 female undergraduate subjects from the Atlanta University Center undergraduate colleges. By using the randomized block method of grouping subjects, all subjects had an equal chance of being assigned to any one of the experimental groups.

Table V
Distribution of Raw Scores on the Counseling Skills Evaluation Training Groups

<table>
<thead>
<tr>
<th>N</th>
<th>Empathy</th>
<th>Meditation</th>
<th>Control</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>1.22</td>
<td>1.35</td>
<td>1.48</td>
</tr>
<tr>
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<td>14</td>
<td>1.93</td>
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Table VI
Distribution of Raw Scores on the Zener ESP Test

<table>
<thead>
<tr>
<th>N</th>
<th>Empathy</th>
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<th>Control</th>
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<tbody>
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</tbody>
</table>

Figures 1 and 2 offer a graphic representation of the pattern of relationships between the empathy scores and the ESP scores of all subjects. The inverse relationship of the scores show a trend for subjects with better empathy scores to earn better ESP scores.

Figure 1  
Mean Scores on the CSE

Figure 2  
Mean Scores on the Zener
Hypothesis #1

There is no statistically significant difference between the mean empathy test scores of subjects who receive training in empathy skills and the subjects who do not receive training.

A *t* analysis of the test scores for subjects trained in empathy and subjects who received no training yielded a *t* value which is not significant at the .05 level. The mean empathy score for the empathy group was 1.476 while the mean score for the group that received no training was 1.565. Since there was no statistically significant difference between the empathy scores of the two groups, the null hypothesis is accepted. There appears to be no significant effect of the training on the empathy scores of the subjects. A tabulation of the *t* test is shown in Table VII.

Table VII

Comparison of Empathy Scores for the Empathy Group and the Control Group

<table>
<thead>
<tr>
<th></th>
<th>Empathy</th>
<th>Control</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>N</strong></td>
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<td>14</td>
</tr>
<tr>
<td><strong>Group Means</strong></td>
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<td><strong>Standard Deviations</strong></td>
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<td>.334</td>
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<td><strong>Percentile Ranks</strong></td>
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</tr>
<tr>
<td>Difference Between the Means</td>
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<tr>
<td><strong>Standard Error</strong></td>
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<td>.089</td>
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<tr>
<td><strong>Standard Error of the Difference Between the Means</strong></td>
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<td>.134</td>
</tr>
<tr>
<td><strong>dif</strong></td>
<td>13</td>
<td></td>
</tr>
<tr>
<td><strong>t Ratio</strong></td>
<td>.66</td>
<td></td>
</tr>
<tr>
<td><strong>P</strong></td>
<td>.519</td>
<td></td>
</tr>
</tbody>
</table>
Hypothesis # 2

There is no statistically significant difference between the mean empathy scores of the subjects trained in meditation techniques and the subjects who do not receive any training.

A $t$ analysis of the test scores for the subjects trained in meditation and subjects who received no training yielded a $t$-value of 2.31, with a $p < .038$. With 13 degrees of freedom this $t$ value is significant at the .05 level of confidence. The mean empathy score for the meditation group was 1.400 while the mean score for the group that received no training was 1.565. The scoring procedure for the empathy test is explained in Chapter III.

On the basis of the $t$-value obtained, the null hypothesis is rejected. There is a measurable effect of meditation training upon the empathy scores of subjects who received meditation training as compared to those who did not receive training. Table VIII illustrates the results of the $t$-test.

Table VIII

Comparison of Empathy Scores for the Meditation Group and the Control Group

<table>
<thead>
<tr>
<th>N</th>
<th>Meditation 14</th>
<th>Control 14</th>
</tr>
</thead>
<tbody>
<tr>
<td>Group Means</td>
<td>1.400</td>
<td>1.565</td>
</tr>
<tr>
<td>Standard Deviations</td>
<td>.241</td>
<td>.411</td>
</tr>
<tr>
<td>Percentile Ranks</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Difference Between the Means</td>
<td></td>
<td>.1643</td>
</tr>
</tbody>
</table>
Table VIII (Continued)

Comparison of Empathy Scores for the Meditation Group and the Control Group

<table>
<thead>
<tr>
<th></th>
<th>Meditation</th>
<th>Control</th>
</tr>
</thead>
<tbody>
<tr>
<td>N</td>
<td>14</td>
<td>14</td>
</tr>
<tr>
<td>Standard Error</td>
<td>.064</td>
<td>.110</td>
</tr>
<tr>
<td>Standard Error of the Difference Between the Means</td>
<td>.071</td>
<td></td>
</tr>
<tr>
<td>degrees of freedom</td>
<td>13</td>
<td></td>
</tr>
<tr>
<td>t Ratio</td>
<td>2.31</td>
<td></td>
</tr>
</tbody>
</table>

p < .038

Hypothesis # 3

There is no statistically significant difference between the mean empathy test scores of the subjects trained in empathy skills and the subjects trained in meditation.

When a t-value was computed for the subjects trained in empathy skills and the subjects trained in meditation, a value of t = .88 with p < .395 was obtained. With 13 degrees of freedom this t-value is not significant at the .05 level of confidence. This indicates that the different methods of training did not make a significant difference in the empathy scores of the meditation and empathy training groups. On the basis of this information, the null hypothesis is accepted. A representation of the t-test is given on Table IX.
Table IX
Comparison of Empathy Scores for the Meditation Group and the Empathy Group

<table>
<thead>
<tr>
<th></th>
<th>Meditation</th>
<th>Control</th>
</tr>
</thead>
<tbody>
<tr>
<td>N</td>
<td>14</td>
<td>14</td>
</tr>
<tr>
<td>Group Means</td>
<td>1.400</td>
<td>1.565</td>
</tr>
<tr>
<td>Standard Deviations</td>
<td>.241</td>
<td>.334</td>
</tr>
<tr>
<td>Percentile Ranks</td>
<td>.064</td>
<td>.089</td>
</tr>
<tr>
<td>Standard Error</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Difference Between</td>
<td>.0757</td>
<td></td>
</tr>
<tr>
<td>the Means</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Standard Error of the</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Difference Between</td>
<td>.086</td>
<td></td>
</tr>
<tr>
<td>the Means</td>
<td></td>
<td></td>
</tr>
<tr>
<td>degrees of freedom</td>
<td>14</td>
<td></td>
</tr>
<tr>
<td>t-Ratio</td>
<td>.88</td>
<td></td>
</tr>
</tbody>
</table>

P < .395

Hypothesis # 3-A

There is no statistically significant difference between the mean empathy scores of the meditation group, the empathy group and the group who received no training. A randomized block ANOVA yielded an F-ratio of 1.338 with 12,261 degrees of freedom. The ratio obtained is not significant, with a p < .280. On the basis of the F-ratio, it is concluded that the null hypothesis of no statistically significant difference between the three groups is accepted. Table X represents the results of the analysis. Table XI displays the means and standard deviations of the three groups.
Table X

Analysis of Variance of Empathy Test Scores for the Empathy, Meditation and Control Groups

<table>
<thead>
<tr>
<th>Source</th>
<th>SS</th>
<th>N</th>
<th>dif.</th>
<th>Mean Sq.</th>
<th>F</th>
<th>P</th>
</tr>
</thead>
<tbody>
<tr>
<td>Treatment</td>
<td>.189</td>
<td>3</td>
<td>2</td>
<td>.095</td>
<td>1.338</td>
<td>.280</td>
</tr>
<tr>
<td>Blocks</td>
<td>2.561</td>
<td>14</td>
<td>13</td>
<td>.197</td>
<td>2.784</td>
<td>.013</td>
</tr>
<tr>
<td>Error</td>
<td>1.840</td>
<td>26</td>
<td></td>
<td>.071</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>4.590</td>
<td>41</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Table XI

Group Means and Percentile Ranks of Empathy Test Scores

<table>
<thead>
<tr>
<th>N</th>
<th>Group</th>
<th>Mean</th>
<th>S.D.</th>
<th>% tile Rank</th>
</tr>
</thead>
<tbody>
<tr>
<td>14</td>
<td>Empathy</td>
<td>1.465</td>
<td>.411</td>
<td>30</td>
</tr>
<tr>
<td>14</td>
<td>Meditation</td>
<td>1.400</td>
<td>.241</td>
<td>40</td>
</tr>
<tr>
<td>14</td>
<td>Control</td>
<td>1.565</td>
<td>.334</td>
<td>20</td>
</tr>
</tbody>
</table>

Hypothesis # 4

There is no statistically significant correlation between the empathy test scores and the ESP test scores of the subjects trained in empathy skills.

The Pearson Product Moment Correlation was applied to the empathy test and ESP test scores of the subjects trained in empathy skills. An $r = -.06$ with a $p > .42$ reveals a non-statistically significant correlation between the empathy test scores and the ESP test scores of the subjects. The null hypothesis is accepted.
Hypothesis # 5

There is no statistically significant correlation between the empathy test scores and the ESP test scores of the subjects trained in meditation.

A computation of the correlation between the empathy test scores and the ESP test scores of the meditation training group yielded a value of \( r = -.425 \) with \( p < .65 \). This represents a non significant correlation between the empathy test scores and the ESP test scores of the subjects trained in meditation. On the basis of the above data, the null hypothesis is accepted.

Hypothesis # 6

There is no statistically significant correlation between the empathy test scores and the ESP test scores of the subjects who do not receive training.

The correlation test was applied to the empathy test scores and the ESP test scores of the subjects who did not receive training. A correlation of \( r = -.51 \) \((r^2 = .26)\) with \( p < .03 \) is significant. On the basis of this correlation, the null hypothesis is rejected.

Hypothesis # 7

There is no statistically significant correlation between the empathy test scores and the ESP test scores of all subjects including those in the training groups and those in the group that did not receive training.

The correlation for the empathy and ESP test scores of all subjects was \( r = -.37 \) with \( p < .008 \). This is a statistically significant correlation. The null hypothesis is rejected.
Interpretation of the Data

The findings of this study do not agree with the findings of Reddy, Truax and Payne, Weiss and Kapp. In their research findings, subjects trained in empathy revealed significantly higher scores on empathy tests than subjects in the control groups. In the present study, subjects trained in empathy did not earn significantly higher scores than the subjects in the control group. The empathy training group earned a mean score of 1.465 as compared to a mean score of 1.56 for the control group. The lower mean score of the empathy group indicates that the subjects performed better than the control group.

Although the statistical findings do not support hypothesis # 1, the trend toward better scores for the subjects trained in empathy is not inconsequential. The data are sufficient to influence the researcher to undertake additional research utilizing the selected design and the same methods of training. The length of the training would be extended, however, recognizing the limitations of 16 hours training as compared to 48 or 60 hours.

The findings regarding the impact of meditation training indicates that this method had a positive effect on the empathic performance of the subjects in the study. The lower mean score of the meditation group, as compared to the control group is an indication that the former group displayed more empathy on the test administered. These findings are in agreement with conclusions reached by other researchers. For example, Paul Leung reported that subjects trained in Zen Meditation demonstrated higher

empathy than subjects trained in external concentration.  

Bradford Smith reported that meditation increased empathic feelings in the individuals he observed. Similar conclusions were asserted by Keefe, Lesh, and Le Shan.

The higher mean scores on empathy earned by the subjects trained in meditation as compared to the control group pointed to the benefits of meditation training. Considering the fact that the subjects practiced meditation for such a short period of time, further research efforts might extend the training period with the possibility of producing even higher empathy levels.

A non-significant correlation between the empathy and ESP scores of the empathy training group shows there is no relationship between the variables studied. In view of the fact that correlation coefficients for small groups are often unstable, utilizing a larger sample might confirm or refute the lack of relationship between empathy and ESP.

The nature of extra-sensory perception is viewed as an essentially non-cognitive process. It shows little stability in individuals who do not demonstrate the ability consistently. Individuals who earn high score on extra-sensory perception have earned statistically significant scores throughout many laboratory studies. It is through the observation of sub-

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1 Leung, "Comparative Effects of Training in External and Internal Control on Two Counseling Behaviors":227-31.

2 Smith, Meditation: The Inward Art, p. 112.


jects over many ESP trials that reliable conclusions can be made about extra-sensory ability. Future research investigations of extra-sensory perception should consider the importance of cumulative scores.

Several studies have been conducted to study the relationship between extra-sensory perception and other psychological and personality variables. In many instances, only after several replications were significant relationships established. The lack of consistency in the correlations between empathy scores and extra-sensory scores for the empathy and meditation group should not discourage further research efforts to investigate the relationship between empathic ability and extra-sensory ability.

A non-significant correlation between the empathy test scores and the ESP test scores of the meditation group indicates that there is no relationship between the two variables for the subjects in that group.

It is interesting to note that subjects in the control group earned the lowest mean scores of all subjects on the empathy test and the ESP test. The significant correlation between the test scores of the subjects suggests that there is a relationship between empathy and extra-sensory perception scores for the control subjects in spite of their low scores. The nature of this relationship may become more explicit in future research studies of ESP and empathy in the same subjects.

The significant correlation between the empathy and ESP scores of the total group of subjects further supports the relationship between the

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two variables. If both of these abilities are present in prospective human service professionals, then they could be beneficial in their helping activities.

Summary of Interpretation

Empathy training did not have a significant effect on the empathy performance of the subjects who received training as compared to the control group. Meditation training, however, seemed to have a significant effect on the empathy performance of the subjects trained in meditation as compared to the control group. Neither empathy training nor meditation training seemed more effective in developing empathy in the subjects who received training in those methods.

There appears to be a positive relationship between the empathic ability and the extra-sensory ability of subjects who did not receive training. There is also a positive relationship between the empathic ability of the total group of subjects in the study.

An understanding of the findings presented above may be facilitated by a comparison of the subjects in this study with the normative group upon which the measuring instrument (CSE) was standardized. Inspection of the pre-training scores shows that the subjects of the study did not approximate the performance of the normative populations. Comparisons are presented below for the total study group, males and females and for the two general career choice groups.

Table XII illustrates the pre-training empathy scores and percentile ranks for the three groups of subjects. Table XIII provides a frequency table of the pre-training empathy scores and percentile ranks for
the total group. As seen from Table XII the three groups of subjects were essentially equal in empathic skills as measured by CSE.

Table XII

Distribution of Pre-Training CSE Scores and Percentile Ranks by Groups

<table>
<thead>
<tr>
<th>Score</th>
<th>% tile Rank</th>
<th>Score</th>
<th>% tile Rank</th>
<th>Score</th>
<th>% tile Rank</th>
</tr>
</thead>
<tbody>
<tr>
<td>127</td>
<td>55</td>
<td>059</td>
<td>95</td>
<td>130</td>
<td>50</td>
</tr>
<tr>
<td>135</td>
<td>50</td>
<td>136</td>
<td>45</td>
<td>132</td>
<td>50</td>
</tr>
<tr>
<td>140</td>
<td>45</td>
<td>139</td>
<td>45</td>
<td>144</td>
<td>40</td>
</tr>
<tr>
<td>145</td>
<td>40</td>
<td>145</td>
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<td>145</td>
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<tr>
<td>150</td>
<td>40</td>
<td>147</td>
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<td>152</td>
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<td>155</td>
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<td>160</td>
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<td>166</td>
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<td>163</td>
<td>30</td>
<td>169</td>
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<td>172</td>
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<td>184</td>
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<td>5</td>
<td>183</td>
<td>5</td>
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<tr>
<td>191</td>
<td>5</td>
<td>190</td>
<td>5</td>
<td>187</td>
<td>5</td>
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<tr>
<td>216</td>
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<td>207</td>
<td>5</td>
<td>200</td>
<td>5</td>
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<tr>
<td>14</td>
<td></td>
<td>14</td>
<td></td>
<td>14</td>
<td></td>
</tr>
</tbody>
</table>

Table XIII

Frequency Distribution of the Percentile Ranks of Pre-Training CSE Scores

<table>
<thead>
<tr>
<th>CSE Score</th>
<th>Norm % tile</th>
<th>Sample of Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>82</td>
<td>95</td>
<td>1</td>
</tr>
<tr>
<td>88</td>
<td>90</td>
<td>0</td>
</tr>
<tr>
<td>92</td>
<td>85</td>
<td>0</td>
</tr>
<tr>
<td>102</td>
<td>80</td>
<td>0</td>
</tr>
<tr>
<td>106</td>
<td>75</td>
<td>0</td>
</tr>
<tr>
<td>110</td>
<td>70</td>
<td>0</td>
</tr>
<tr>
<td>117</td>
<td>65</td>
<td>0</td>
</tr>
<tr>
<td>121</td>
<td>60</td>
<td>0</td>
</tr>
<tr>
<td>129</td>
<td>55</td>
<td>0</td>
</tr>
<tr>
<td>132</td>
<td>50</td>
<td>3</td>
</tr>
<tr>
<td>137</td>
<td>45</td>
<td>8</td>
</tr>
</tbody>
</table>
Table XIII (Continued)

Frequency Distribution of the Percentile Ranks of Pre-Training CSE Scores

<table>
<thead>
<tr>
<th>CSE Score</th>
<th>Norm % tile</th>
<th>Sample of Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>147</td>
<td>40</td>
<td>7</td>
</tr>
<tr>
<td>155</td>
<td>35</td>
<td>7</td>
</tr>
<tr>
<td>163</td>
<td>30</td>
<td>2</td>
</tr>
<tr>
<td>166</td>
<td>25</td>
<td>3</td>
</tr>
<tr>
<td>170</td>
<td>20</td>
<td>1</td>
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<tr>
<td>174</td>
<td>15</td>
<td>2</td>
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<tr>
<td>178</td>
<td>10</td>
<td>0</td>
</tr>
<tr>
<td>182</td>
<td>5</td>
<td>9</td>
</tr>
</tbody>
</table>

All except two of the subjects obtained an empathy score at the 50th percentile or below. The subjects scores represent the lower range of scores that may be obtained on the CSE. There is no obvious explanation as to why these subjects were all relatively low in empathy. Research has reported that individuals in clinical training programs often show a deterioration of their empathy functioning levels at the end of training. Since undergraduate study does not provide specialized training for most human service professionals, one might expect subjects to reveal levels of empathy more like those in the normative group used for the CSE Standardization. It has not yet been determined why an important trait like empathy is not expressed at high levels by aspiring helpers.

Table XIV presents the pre-training CSE scores and percentile ranks of the subjects according to sex.

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Carkhuff, Kratovil and Friel, "The Effects of Professional Training": 68-74.
Table XIV

Distribution of CSE Scores by Sex

<table>
<thead>
<tr>
<th>Female CSE Scores</th>
<th>Male CSE Scores</th>
</tr>
</thead>
<tbody>
<tr>
<td>059</td>
<td>135</td>
</tr>
<tr>
<td>130</td>
<td>136</td>
</tr>
<tr>
<td>132</td>
<td>139</td>
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<tr>
<td>144</td>
<td>140</td>
</tr>
<tr>
<td>145</td>
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</tr>
<tr>
<td>147</td>
<td>145</td>
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<td>158</td>
</tr>
<tr>
<td>166</td>
<td>160</td>
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<tr>
<td>176</td>
<td>160</td>
</tr>
<tr>
<td>184</td>
<td>163</td>
</tr>
<tr>
<td>185</td>
<td>165</td>
</tr>
<tr>
<td>200</td>
<td>172</td>
</tr>
<tr>
<td>216</td>
<td>176</td>
</tr>
</tbody>
</table>

**Median = 154**  
**Median = 160**

Psychology measures used in research are often looked at with the objective of comparing male and female subjects on a particular variable. The median empathy score for the female subjects in this study was 1.54. The median score for male subjects was 1.61. The median scores for the
male and female subjects placed at the 30th and 40th percentiles when compared with the norms in the test manual. This finding disagrees with research reporting that female subjects exhibit higher empathy levels than male subjects.\(^1\) In this instance there was not a large difference between the male and female scores on empathy. This fact may have been influenced by the generally low empathy scores of all the subjects.

Table XV shows the career choices of the subjects and their pre-training CSE scores. For purposes of comparison, the subjects' career choices were grouped as "psychologically oriented" and "other oriented."

Table XV

<table>
<thead>
<tr>
<th>Subject</th>
<th>Psychology Oriented Occupation</th>
<th>CSE Score</th>
<th>Other Occupation</th>
<th>CSE Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Psychologist</td>
<td>059</td>
<td>1</td>
<td>Teacher</td>
</tr>
<tr>
<td>2</td>
<td>Psychologist</td>
<td>136</td>
<td>2</td>
<td>Teacher</td>
</tr>
<tr>
<td>3</td>
<td>Psychologist</td>
<td>139</td>
<td>3</td>
<td>Teacher</td>
</tr>
<tr>
<td>4</td>
<td>Psychologist</td>
<td>140</td>
<td>4</td>
<td>Teacher</td>
</tr>
<tr>
<td>5</td>
<td>Psychologist</td>
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<td>Teacher</td>
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<tr>
<td>6</td>
<td>Psychologist</td>
<td>145</td>
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<td>Teacher</td>
</tr>
<tr>
<td>7</td>
<td>Psychologist</td>
<td>149</td>
<td>7</td>
<td>Teacher</td>
</tr>
<tr>
<td>8</td>
<td>Psychologist</td>
<td>150</td>
<td>8</td>
<td>Doctor</td>
</tr>
<tr>
<td>9</td>
<td>Psychologist</td>
<td>152</td>
<td>9</td>
<td>Teacher</td>
</tr>
<tr>
<td>10</td>
<td>Psychologist</td>
<td>153</td>
<td>10</td>
<td>Teacher</td>
</tr>
<tr>
<td>11</td>
<td>Counselor</td>
<td>156</td>
<td>11</td>
<td>Nurse</td>
</tr>
<tr>
<td>12</td>
<td>Psychiatrist</td>
<td>157</td>
<td></td>
<td></td>
</tr>
<tr>
<td>13</td>
<td>Psychologist</td>
<td>158</td>
<td>13</td>
<td>Lawyer</td>
</tr>
<tr>
<td>14</td>
<td>Psychologist</td>
<td>160</td>
<td>14</td>
<td>Teacher</td>
</tr>
<tr>
<td>15</td>
<td>Psychologist</td>
<td>160</td>
<td>15</td>
<td>Teacher</td>
</tr>
<tr>
<td>16</td>
<td>Psychologist</td>
<td>163</td>
<td>16</td>
<td>Radio</td>
</tr>
<tr>
<td>17</td>
<td>Psychiatrist</td>
<td>169</td>
<td></td>
<td>Announcer</td>
</tr>
<tr>
<td>18</td>
<td>Psychologist</td>
<td>169</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Table XV (Continued)

Career Choices of Subjects and Pre-Training CSE Scores

<table>
<thead>
<tr>
<th>Subject</th>
<th>Psychology Oriented Occupation</th>
<th>Score</th>
<th>Other Subject</th>
<th>Occupation</th>
<th>Score</th>
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</thead>
<tbody>
<tr>
<td>19</td>
<td>Psychologist</td>
<td>183</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>20</td>
<td>Psychologist</td>
<td>184</td>
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<td></td>
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Median = 154
Median = 159

Studies cited earlier in this paper have reported that individuals in human service professions who express high levels of empathy are more effective in their work. Rogers states that the most important factor in being a therapeutic helper is to understand the client from the latter's own point of view. Subjects in the present study who have chosen a career in a psychologically oriented profession do not reveal a higher median score than subjects who have chosen a non-psychologically oriented career. We note again the low empathy scores of most of the subjects in the study. It seems expedient to conclude that one cannot make generalizations about the empathy performance of the present sample in relation to other samples with similar characteristics.

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The problem involved in this study was to determine the effects of two different training modalities upon the empathic skills of 42 undergraduate college students who had selected some helping profession as a career goal. An experimental design was developed wherein the 42 subjects were randomly assigned to two experimental groups and a control group. One experimental group was given 16 hours of didactic instructions in empathy skills, the other experimental group was subjected to 16 hours of training in meditation. The control group participated in music listening activities during the training period. Post-test empathy scores for the two experimental groups were compared to each other and to the control group.

It was also posited that different interpersonal skills may exist within a single individual in comparable amounts. This probability led to efforts to determine the relationship between empathic ability and extra-sensory perception, which is the ability to perceive through other than the usually identified senses. To obtain the ESP scores the Zener ESP Test was administered to the three groups of subjects. The next step was to find the coefficients of correlation between the ESP scores and the empathy scores.
Important concepts pertinent to the study are defined below:

**Meditation** - the process of stilling the mind and turning the attention inward toward the subtle levels of the mind.

**Empathy** - the ability of a helper to perceive and feel into the helpees problem situation and communicate the quality of that feeling in an accurate manner.\(^\text{152}\)

**Extra-sensory perception** - the awareness of and response to an external event or influence without utilizing the traditional five senses.

**Didactic** - the method of teaching or training individuals in a direct, expository manner.

**Experiential** - a method of conveying knowledge or information through the senses and experience.

This study was limited to the extent that the subjects in the sample were not practicing as human service professionals and the findings of the study cannot actually predict how they will perform in future professional activities. The study was further limited by the fact that the empathy test did not yield a high test-retest reliability coefficient for the subjects in the study.

The data of the study were analyzed in the following manner:

1. Group means were computed for the empathy test scores and ESP scores of the subjects.

2. A test re-test reliability coefficient was computed for the empathy test scores of all subjects.

3. A randomized block analysis of variance was computed and the appropriate significance levels were determined.

4. The empathy test mean scores for each group were analyzed by the \(t\)-test of significance.

5. A Pearson Product Moment Correlation was computed for the empathy test scores and the ESP scores of each group independently.

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6. A Pearson Product Moment Correlation was computed for the empathy test scores and the ESP scores of the total group.

Findings

Testing of the hypotheses of the study resulted in the following findings:

1. A _t_-ratio of .66 with 13 degrees of freedom and _p_ > .519 was not significant at the .05 level when the mean empathy scores of the empathy group and the control group were compared.

2. A _t_-ratio of 2.31 with 13 degrees of freedom and _p_ < .038 was significant at the .05 level when the mean empathy scores of the meditation group and the control group were compared.

3. A _t_-ratio of .88 with 13 degrees of freedom and _p_ > .395 was not significant at the .05 level when the mean empathy scores of the meditation group and the empathy group were compared.

4. An _F_-ratio of 1.338 was not significant at the .05 level, for the empathy scores of the empathy, meditation, and control group.

5. An _r_ of -.06 with _p_ > .42 was not significant when the empathy scores and the ESP scores of the empathy group were correlated.

6. An _r_ of -.425 with _p_ > .065 was not significant when the empathy scores and the ESP scores of the meditation group were correlated.

7. An _r_ of -.51 with _p_ < .03 was significant when the empathy scores and the ESP scores of the control group were correlated.

8. An _r_ of -.37 with _p_ < .008 was significant when the empathy scores and the ESP scores of all subjects were correlated.

Conclusions

Within the limitations of the study the following conclusions may be drawn:

1. The null hypothesis of no significant difference between the empathy scores of the empathy group and the control group is accepted. Subjects trained in empathy did not earn significantly higher scores than subjects who did not receive training.
2. The null hypothesis of no significant difference between the empathy scores of the meditation group and the control group is rejected. Meditation training indicates a trend toward influencing higher empathy performance for subjects trained in the technique.

3. The null hypothesis of no significant difference between the empathy scores of the empathy group and the control group is accepted. Empathy training did not have a significant effect on empathy scores.

4. The null hypothesis that there is no significant difference between the mean empathy scores of the empathy, meditation, and control group is accepted. There were no significant interaction effects of the total group of subjects.

5. The null hypothesis of no significant correlation between the empathy scores and the ESP scores of the empathy group is accepted. Subjects on the whole did not show similar levels of performance on the empathy test and the ESP test.

6. The null hypothesis of no significant correlation between the empathy scores and the ESP scores of the meditation group is accepted. There is no relationship between the empathy test performance and the ESP test performance of the subjects who received meditation training.

7. The null hypothesis of no significant correlation between the empathy test scores and the ESP test scores of the control group is rejected. There is a positive relationship between the empathy test performance and the ESP test performance of the subjects in the control group.

8. The null hypothesis of no significant correlation between the empathy test scores and the ESP test scores of the empathy, meditation and control groups combined is rejected. There is a positive relationship between the empathy test performance and the ESP test performance of the total group of subjects in the study.

Implications

The analysis and interpretation of the data in this study supports the following implications:

1. Short term training methods to develop empathy skills may not produce significant results for all samples.

2. Didactic empathy training does not seem to be significantly better than other types of training in producing empathy.
There is a need to continue the development of empathy assessment instruments in view of the fact that their construct validity and accuracy of measurement is not firmly established.

The positive effects of meditation training on empathy performance would make it expedient to use meditation as an adjunct method in training programs.

It would be expedient to conduct further research using a randomized block design with a larger sample of subjects to determine the influence of sample size on the experimental outcomes.

From the data collected in the study, extra-sensory ability is positively related to empathic ability. Further research should be conducted to better understand how to exploit this relationship.

It would seem beneficial to provide a variety of activities and methods to help trainees to become aware of and to utilize their extra-sensory ability as a helping tool.

Observing that a 16 hours training period could reveal some significant findings regarding empathic ability, a training period of 50 to 60 hours might yield even more significant findings about the training methods.

The results of this study have introduced some areas of inquiry that merit further research. The recommendations are as follows:

1. Further research studies employing the Counseling Skills Evaluation Empathy Test should be conducted to learn more about its potentials as an accurate measuring instrument for empathic ability in trainees and practitioners.

2. It would be beneficial to replicate the present study using the same research design with a larger sample of subjects with similar characteristics and administering some other measure of empathy.

3. The use of meditation training in short or long term training should be considered by trainers as an effective method of enhancing empathic ability.

4. Short term training periods should be extended to 50 or 60 hours with the possibility of obtaining more significant findings about the training methods used in the study.
5. Further research should be conducted to investigate methods for enhancing extra-sensory perception.

6. An effort should be made to identify and develop other instruments or methods of verifying the existence of extra-sensory perception.

Other researchers should consider the possibility that the use of the CSE as the criteria for grouping subjects may influence experimental outcomes. The present research was based on the assumption that such influence, if any, would be negligible, or if there is an influence, the three groups would be equally affected.
BIBLIOGRAPHY

Books


Articles


**Unpublished Works**


Etherero Akine Segune  
137 Lorenzo Drive, S.W.  
Atlanta, Georgia 30311  

Married, 2 Children  
Date of Birth: 1938

Educational

Wiley College  1962  B.S.  Major: Psychology
Pomona State College  1966  M.A.  Major: Psychology
Atlanta University  1978-80  Major: Social Work

Professional

1965  Psychiatric Technician  Veterans Administration Hospital
1966  Community Organizer  Los Angeles, E00
1968  Director  Watts Youth Center
       Los Angeles, California
1970  Social Services Coordinator  Gwinnett County EOA
       Gwinnett, Georgia
1974  Founder-Director  The Saturday School
       Atlanta, Georgia
1975  Clinical Coordinator  Reality House
       Atlanta, Georgia

Consultations

A.D.A.S.S.
New African Republic
Black Student Association
Georgia Mental Health Association
Morehouse College Community Psychology Program
RESUME

GWENDOLYN JOHNSTON ROQUEMORE
P. O. Box 41221
Atlanta, Georgia 30331
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EMPLOYMENT

1979-       Assistant Professor of Psychology, Morehouse College
1977-78    Chairman, Morehouse College Department of Psychology
1974-77    Director, Morehouse College Community Psychology and Drug
           Counselor Training Program
1973-78    Instructor, Spelman College; Atlanta, Georgia (Psychology and
           Educational Psychology)
1973-74    EPDA Fellow (Child Success Consultant), Moreland School, Atlanta,
           Georgia
1973-74    Instructor, Shaw University; Raleigh, North Carolina
           University Without Wall Staff
1973-74    Administrative Assistant, Park Street Teacher Corps.; Atlanta,
           Georgia
1969-72    Counselor, Somerset County College, North Branch, New Jersey
1964-69    Teacher, Roosevelt Intermediate School; New Brunswick, New
           Jersey
1959-61    Teacher, McKinley School; New Brunswick, New Jersey
1957-59    Teacher, Glen Gardner School; Glen Gardner, New Jersey
1957-58    Social Caseworker, New Jersey Bureau of Children's Services;
           Camden, New Jersey
1954-55    Head Counselor, State Home for Girls; Trenton, New Jersey
1978       Licensed Marriage and Family Counselor, State of Georgia # 241
1978       Training Consultant, Creative Living Associates, Atlanta, Georgia
SUMMER AND PART-TIME EMPLOYMENT

1978 Research Interviewer, University of Wisconsin Urban Homicide Project
1978 Behavioral Science Planning Assistant, Morehouse Medical School Atlanta, Georgia
1977 Crisis Counselor - Atlanta University Crisis Center, Atlanta, Georgia
1975-76 Interne - Women's Alcoholism Treatment Program, Atlanta, Georgia
1976 Therapy Assistant - University Clinic, Atlanta, Georgia
1973 Coordinator of Counseling Internes, Atlanta University Behavior Modification Project (The Challenge School)
1967-69 Director, Washington Boro Head Start; Washington, New Jersey (O.E.O. Grant)
1963 Research Assistant - Rutgers Center for Alcohol Studies; New Brunswick, New Jersey
1964-68 Interviewer - Rutgers Urban Studies Center; New Brunswick, New Jersey
1965 Psychiatric Technician - Greystone Hospital; Morris Plains, New Jersey
1965-66 Remedial Reading Instructor - New Brunswick Public Schools; New Brunswick, New Jersey
1964 Interviewer - Research Assistant, Rutgers Sociology Department; New Brunswick, New Jersey

EDUCATION

B.A. Douglass College; New Brunswick, New Jersey
Major: Psychology
Minor: Sociology

M.ED. Rutgers University; New Brunswick, New Jersey
Major: Education

M.A. Newark State College (Now Kean College); Union, N. J.
Major: Student Personnel Services
Resume - 3
Gwendolyn Johnston Roquemore

EDUCATION (CONT'D.)

1976  
Foundations of Truth; Atlanta, Georgia - Metaphysical Studies
Ph.D. (ABD) Atlanta University; Atlanta, Georgia
Major: Guidance and Counseling

1976  
Morehouse College - Facilitation Training 'Eclectic Approaches to Counseling Ethnic Minorities

1977  
Morehouse College - Transactional Analysis

1978  
Hillside Truth Center, Atlanta, Georgia: Meditation

1978  
T M Society - Atlanta, Georgia: Transcendental Meditation

1979  
Creative Living Associates, Atlanta, Georgia

1975  
Prince Church of God; Cleveland, Ohio
Theology and Evangelism
(Ordained 1975)

1975  
Foundation of Truth; Atlanta, Georgia
Psychic Phenomena

1976  
Gestalt Therapy - Morehouse College, Atlanta, Georgia

1974  
Atlanta Metaphysical Institute; Atlanta, Georgia
Astrology Workshop

1976  
Morehouse College - Counseling Minority Clients

1970  
Reverend Alice Winn; Jersey City, New Jersey
Palmistry

1958  
National Institute of Graphology; Saint Louis, Missouri
Graphology Correspondence Course

1956  
Trenton State College; Trenton, New Jersey
Educational Exceptional Children
Art
Reading Curriculum

PROFESSIONAL ORGANIZATIONS

A.P.G.A. American Personnel and Guidance Association

A.N.W.C. Association for Non-White Concerns
PROFESSIONAL ORGANIZATIONS (CONT'D.)

N.J.P.G.A. New Jersey Personnel and Guidance Association
A.P.A. (Membership Applied for)
N.A.C.W. National Association for College Women
S.E.S.S. Society for Ethnic and Special Studies
A.B.P.S.I. Association of Black Psychologists
A.B.W.A. American Business Women's Association
M.A.M.H. Mental Health Association
Y.W.C.A. Young Women's Christian Association
S.E.P.A. Southeastern Psychological Association
G.E.A. Georgia Educational Association
A.A.U.P. Association of University Professors
A.A.U.W. American Association of University Women

HONORS AND SCHOLARSHIPS

New Jersey Scholarship (4 years)
Project Now Fellow; Newark State College
Psi Chi-National Honorary Psychology Society
Kappa Delta Pi; Honorary Education Society
EPDA Fellow; Atlanta University
Graduated with commendation; Newark State College (2 years)
Black Student Union Award
Douglass College Debating Society
COMMUNITY ACTIVITIES

Board of Trustees - M.A.C.A.D.; Atlanta, Georgia

Community Advisory Board - Hunter Street Drug Center; Atlanta, Georgia

Advisory Board - Dekalb Mental Health Center Drug Program

Volunteer Committee - Georgia Mental Health Association

Resources Committee - Hillside Cottages Adolescent Treatment Center

Volunteer - The Challenge School; Atlanta, Georgia

Board of Trustees - Hillcrest Civic League; Washington, New Jersey

Board of Directors - Council on Battered Women; Atlanta, Georgia

E.O.A. Drug Advisory Board, Atlanta, Georgia

Board of Directors - The Family Meditation Center; Atlanta, Georgia

Member - Hispanic American Task Force; Atlanta, Georgia

Board of Directors - Chrysallis Adolescent Treatment Center; Atlanta, Georgia

Board of Directors - Hillside Cottages; Atlanta, Georgia

Advisory Board - Creative Living Associates, Atlanta, Georgia

CONSULTATIONS

Elizabeth, New Jersey Head Start Program

NORNESCAP Head Start; Phillipsburg, New Jersey

Tuskegee Institute Drug Training Program
CONSULTATIONS (CONT'D.)

North Carolina Central - Community Psychology
Fulton County Family and Children's Services
A.D.A.S.S.
Atlanta University Alcoholism Training Program
E.O.A. Drug Program
Florida Memorial Program
Minority Drug Abuse Conference; Los Angeles, California
Harambee House Drug Treatment Center
SAATAEP: Atlanta, Georgia
State of Georgia - School of Alcoholism Education; Athens, Georgia
Atlanta University - School of Education; Atlanta, Georgia
National Council on Alcoholism Education; Dallas, Texas
Southside Comprehensive Health Center; Atlanta, Georgia
Georgia Department of Human Resources; Albany, Georgia
East Alabama Mental Health Committee; Opelika, Alabama
Atlanta University Graduate School Practicum; Atlanta, Georgia
The Challenge School; Atlanta, Georgia
Women's Therapeutic Alcoholism Training Program
Women United; Philadelphia, Pennsylvania
Spelman College - Freshman Orientation Program, Spelman College, Atlanta, Georgia
Unicoi Drug Conference
Hobbies

Research of Occult Sciences and Parapsychology
Palmistry
Creative Writing
Lyric Composition
Voodoo Research
Joseph Hampton

TRAINER

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Married, No Dependents

Date of Birth: September 17, 1941

Health: Excellent

Educational

Monroe High School
Albany, Georgia
1959 Diploma

Morehouse College
Atlanta, GA
1963 B.S.
Major: Mathematics
Minor: Physics
1972 M.S.W.
Major: Social Work

Educational

Atlanta University
Atlanta, GA
Class Valedictorian
Cum Laude

Professional

7/63-11/65
Psychiatric Assistant
Emory University/Psychiatric Unit
Atlanta, GA

/66- /69
Lieutenant
U.S. Naval Reserves

12/69- 9/70
Social Work Technician
Georgia Regional Hospital
Atlanta, GA

6/71- 9/71
Mental Health Technician
South Central Community

3/72-10/73
Outreach Center Director
Mental Health Center/Atlanta, GA

10/73- 3/74
Associate Director,
South Central Community
Outreach Center

8/77-Present
Coordinator,
Mental Health Center/Atlanta, GA
Alcohol Program

1/77-Present
Founder, Executive
Southside Community Health Center
Director
Atlanta, GA

1/80-Present
Instructor,
Creative Living Associates
Mental Health
Atlanta, GA

License: Georgia Marriage and Family Counselor

Publications: Monogamy Must Go!!! 1977 (Pending); Blackness—Social Work—
Mental Health: A New Frontier for the Black Worker 1977 (Pending); and
Relaxation: The First Step Beyond Therapy—The First Step Toward Self
Fillment, 1977 (Pending).

Consultancies, Training and Volunteer Experience available upon request.

Skills and Training: Social Work Administration; Research; Curriculum
Design; Community Organization; Clinical Evaluation and Treatment; Supervision;
Budget Preparation and Maintenance.
SYNOPSIS OF PROFESSIONAL EXPERIENCE

7/63-11/65 Emory University Psychiatric Unit
Atlanta, GA

Responsibilities: Kept detailed charts; made case presentation and assisted in training of Psychiatry, Psychology and Social Work Interns.

10/63-4/66 United States Naval Reserve
4/66-10/69 United States Air Reserve

Responsibilities: Administration; training and leadership for division of ninety-nine (99) men on shipboard duty.

12/69-9/70 Georgia Regional Hospital
Atlanta, GA

Responsibilities: Providing social services for forty (40) adult patients, family therapy, case histories and summaries; participation in diagnostic and treatment conferences; forming clinical groups; and assisting in limited development and research.

6/71-9/71 South Central Community
Mental Health Center
Atlanta, GA

Responsibilities: Same as above. Supervision of two (2) Mental Health Assistants.

3/72-10/73 South Central Community
Mental Health Center

Responsibilities: Providing administrative and clinical supervision for staff of seven (7); coordination of the multidisciplinary clinical team; assistance in program development and research; coordination of center activities with the community; social and health agencies; provided social work services. Field Instructor to social work, and guidance and counseling students.

10/73-3/76 South Central Community
Mental Health Center
Atlanta, GA

Responsibilities: The development of policy, direction, coordination and administration for five (5) mental health outreach centers (twenty-seven staff members); handled budgeting, supplies, equipment and rentals; provided
supervision for performance evaluation, planning by objectives, data processing, and case records; coordinated outreach center activities with other program components and other health, social and community organizations; provided administrative support to neighborhood mental health advisory committees; prepared written and verbal reports. Field Instructor to social work, community psychology, and mental health associates students.

1977 to present
Atlanta Southside Community Health Center Alcohol Rehabilitation Program, Atlanta, GA

Coordinator, Alcohol Program

Responsibilities: Program development; administrative supervision; clinical evaluation and treatment. Oversaw and organized a variety of group and community programs; initiated Alcohol Anonymous, Al-anon, and Al-teen groups; provides liaison with existing agencies, community education on alcoholism and alcohol abuse; provide clinical supervision to the multidisciplinary team; participated in the planning and program development of the mental health center as a whole. Field Instructor for social work students.

1/80 to present
Atlanta Junior College
Atlanta, GA

Instructor

Responsibilities: Teacher of group dynamics (Mental Health Course)

INSTITUTE FOR CREATIVE LIVING ASSOCIATES PROGRAM

Institute brochure outlining courses and training available on request. Independent tape courses costs and titles available on request.

SYNOPSIS OF TRAINING AND VOLUNTEER EXPERIENCE

10/70-5/71 Betmar-Lavilla Mental Health Center of the South Central Community Mental Health Center, Atlanta, GA

Social Work Student Field Placement

Responsibilities: Casework, group work, and community organization. Responsible for case diagnosis and treatment, record keeping, report writing research, community meetings, organizing and supporting committees, and participation in community projects.

9/71-3/72 City of Atlanta—Mayor's Office
Atlanta, GA

Social Work Student Placement

Responsibilities: Policy making, planning, and administration; answering mail.