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**EFFECTS OF COMMUNICATION TRAINING ON
SATISFACTION WITH SOCIAL SUPPORT SYSTEMS
AND LEVELS OF SELF-ESTEEM**

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EFFECTS OF COMMUNICATION TRAINING ON
SATISFACTION WITH SOCIAL SUPPORT SYSTEMS
AND LEVELS OF SELF-ESTEEM

An Abstract
Presented to the
Graduate and Research Council of
Austin Peay State University

In Partial Fulfillment
of the Requirements for the Degree
Master of Science

by
Monica Gorham Darcy

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ABSTRACT

The purpose of this study was to examine the influence of communication skills training on self-esteem and satisfaction with social support systems. Skills training was provided in Human Interaction classes and data were collected early and late in Spring semester 1991. Austin Peay State University undergraduate students were asked to volunteer from two Human Interaction classes and two General Psychology classes. Participants completed the Social Support Questionnaire (Sarason, Levine, Basham & Sarason, 1983) and the Coopersmith Self-Esteem Inventory (Coopersmith, 1981). Data were analyzed using a mixed analysis of variance and Pearson correlation coefficients. Results suggest partial support for the hypothesis that skills training provided in Human Interaction made a significant difference in satisfaction with social support but not with self-esteem. More importantly, results reveal a three way interaction of class (Human Interaction or General Psychology), student (traditional or non-traditional), and test (pretest or posttest). Results also indicate a positive correlation between satisfaction with social support systems and self-esteem.


To the Graduate and Research Council:

I am submitting herewith a Thesis written by Monica Gorham Darcy entitled "Effects of Communication Training on Satisfaction with Social Support Systems and Levels of Self-esteem." I have examined the final copy of this paper for form and content, and I recommend that it be accepted in partial fulfillment of the requirements for the degree Master of Science with a major in Guidance and Counseling.

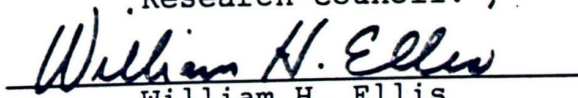

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CHAPTER 1

Introduction

Learning the art and science of counseling is an exciting and formidable task. There are very few hard and fast rules about what "works" when it comes to counseling. The objectives of counseling have been defined by the Division of Counseling Psychology of the American Psychological Association (1956) as a process to assist individuals in overcoming obstacles to their personal growth, wherever these may be encountered, and to assist in achieving optimum development of their personal resources. The processes through which a counselor or therapist attempts to pursue these goals with an individual are many and varied.

Research investigating the efficacy of counseling is complicated by many factors. Reports of improvement differ when clients rather than therapists respond to evaluation. The standards by which improvement is measured do not lend themselves easily to universal definitions, and since improvement is a fairly subjective state, it remains difficult to define and to measure. Reviews of research examining the effectiveness of therapy often conclude with gross generalizations that, overall, individuals who participate in counseling improve more than individuals who do not. In other words, individuals who participate in

counseling are more likely to notice improvement than those individuals who experience spontaneous remission (Garfield, 1981).

In a review of what is effective in psychotherapy, Garfield (1981) summarized many studies and concludes that there is very little difference in the outcome of various types of therapy. Whether a counselor approaches clients with a psychodynamic, behavioral or cognitive focus, there is no conclusive evidence that one method is more successful than another at promoting personal growth or achieving optimal development. Actually commonalities rather than differences are apparent in analyses of counseling techniques.

Researchers attempting to decipher what is helpful to individuals seeking assistance from professional mental health agencies conclude that despite differences in approach, the presence of a warm and caring relationship with a therapist is what makes therapy successful. It becomes apparent in study after study that it is the relationship that heals in the sense that clients repeatedly cited therapist characteristics such as warmth, genuineness, empathy, acceptance, respect, attentiveness and understanding as factors in effective therapy (Patterson, 1985; Yalom, 1985).

This idea of comparable effectiveness is remarkable considering the variance in technique used by therapists of

different philosophies and training. It is also noteworthy that the empathic characteristics mentioned above can be delivered in a therapeutic setting by trained professional therapists and untrained nonprofessionals with the same result (Wills, 1987). These sorts of findings in research about counseling and its effectiveness lead to a search for common factors that promote personal growth and optimum development of personal resources in the counseling setting.

Statement of the Problem

From the vague findings of what makes a difference in counseling, one might conclude that counselors adopt therapeutic approaches according to their personalities, background, training and convictions rather than what is the most effective form of therapy for the client. Whatever school of thought predominates in their approach, one area of focus warrants close attention by counselors. Social support systems are available to people in everyday interactions and they can serve many functions in peoples' lives. Support can come in many forms such as sharing tasks and feelings, and exchanging information and affection (Vaux, 1988). Social support systems are commonly referred to as networks which suggests that assistance is available through many channels for many purposes. The broadness and complexities of such a system and how to make it work most efficiently can be a

beneficial focus for all types of counseling.

There has not been a great deal of research surrounding counseling techniques and social support networks, however, the advantages for studying social support interventions are apparent in many areas (Gottlieb, 1988). Social support networks provide a buffering effect from the influence of stress and negative life events on an individual's health (Litwak, et al., 1989). Developing strong network ties can be less costly than reliance on professional agencies for feelings of self-esteem and value. Working with the natural resource of friends and family also has "ecological validity" in that it is more acceptable, accessible and culturally valid than the services offered by mental health practitioners (Gottlieb, 1988).

Further reasoning for work with social support networks comes from the political and professional arena. For political reasons, support interventions can empower the people and promote an atmosphere of self-help. A mental health practitioner would promote such interventions because it would ameliorate poor social relationships and reinforce professional treatment (Gottlieb, 1988). One final reason this sort of approach is appealing is because it provides an element of self-control through which people can improve their own lives rather than suggesting only the experts can help.

Because of the overall benefit that can be derived by increasing satisfaction with social support networks, it would seem appropriate to explore counseling approaches that ameliorate that area. Since counseling techniques are so varied and yet their outcomes are so similar, it is possible that the effectiveness of any technique could be improved by incorporating a program that works with social support networks.

Purpose and Importance of the Study

For these various reasons, the focus of this paper is to examine social support networks and one intervention technique which may be instrumental in bringing about positive change in an individual's support system. Specifically, this research will focus on communication skills training and its influence on self-esteem and satisfaction with social support networks. The results of such work should suggest whether this sort of approach is appropriate for incorporation into a counseling program.

Although counseling interventions from different theoretical fields cover a wide variety of techniques and areas of focus, social support systems appear to warrant attention by any counselor. They have positive influences on health, they are available in natural networks, and they work parallel to counseling programs by enhancing personal growth and development. Exploring ways to promote this ability to seek and receive appropriate and satisfying

assistance from social support networks is a challenge that this paper will undertake. These conclusions suggest the efficacy of such a program and the soundness of incorporating it into counseling interventions.

Statement of Hypotheses

Two hypotheses were tested in this study:

HYPOTHESIS 1: Self-esteem and satisfaction with social support systems will show greater increase with communication skills training provided in a Human Interaction class than in a control group of General Psychology.

HYPOTHESIS 2: Self-esteem and satisfaction with social support systems are positively correlated.

CHAPTER 2

Review of Literature

The topics of social support and social support networks are researched in many different ways. Some authors have acknowledged social support for its buffering effect, meaning that support networks provide an emotional bonding which helps to buffer the experience of stress and maintain an individual's health (Litwak et al., 1989; Pilisuk, Boylan, & Acredolo, 1987). Cohen and Wills (1985) continue with a stress-coping model which posits that psychological distress and the impact of negative life events are lowered by the support provided by network members. This study on social support and mental health examined the perceived supportiveness of relationships and how social support serves to buffer or reduce the effects of stress by activating coping resources that counteract the adverse consequences of stressors.

Litwak et al. (1989) also indicate that social support is beneficial to individuals in the reduction of mortality. This effect is achieved by the provision of instrumental help, information, advice and an emotional bonding that buffers stress and directly affects physiological functions such as blood pressure and the immune system.

Other social support research attempts to develop

optimal matching models which balance types of support needed to best assist an individual to cope with certain stressors (Cutrona, 1990). Determining what types of support are most advantageous for what types of problems is broadened in research that examines how social support networks serve to provide tangible and emotional aid to individuals. Mitchell (1989) suggests that the presence of such support lowers some individuals' need for mental health care services.

The idea that the presence of social support in an individual's life can have a positive, therapeutic influence as well as promoting overall better health and mental health is an intriguing one. Nieminen (1986) suggests that what occurs in an individual's support system may influence the amount they use mental health services. The implication seems to be that individuals with satisfactory relationships in marriage, employment or positive social relations have access to support to assist them with life's circumstances or stresses. Sherbourne (1988) states that when defined as social resources, the more support a person has the less likely they are to use mental health services. The stress-coping model (Cohen & Wills, 1985) suggests that a high level of informal social support is correlated to a low level of help-seeking from professional agencies. Determining what may be useful for bolstering that feeling of support in an individual's life

seems like a desirable goal of research with social support systems.

Wills (1987) reviewed many recent studies on the prevalence of help-seeking behaviors and concluded that individuals turn to informal rather than formal sources of support on a ratio of 2 to 1. This suggests that people prefer self-help or reliance on social support over dependence on formal or professional organizations. Various writings describe informal support as individuals from intimate and family relationships as well as people from the workplace, neighbors, and acquaintances. Formal support is viewed as coming from professional agencies or mental health facilitators. Further distinctions about whom individuals turn to for assistance with practical or emotional problems are revealed in the research by Tausig and Michello (1988). They indicate that people seek strong ties in social support systems such as family, friends and acquaintances over weak ties in their networks such as professionals and agencies whatever the problem may be. Litwak et al. (1989) further suggest that a primary group such as family, friends and neighbors is more commonly relied upon for support than formal organizations.

These lines of research suggest that individuals receive the assistance they need from social support systems rather than from professionals or mental health agencies. If people are not receiving what they need from

professionals, or not even turning to professionals, the question arises as to how counseling services can better link people to their natural network. Intervention methods could come in the form of preventive treatment in which training is received before there is a problem. Another strategy would be a reactive approach which would respond to individual needs at the time of request.

Whether an intervention program is preventive or reactive, there still needs to be an initial evaluation of an individual's social support system. Research into the subjective appraisal that individuals have of their support networks is limited. Sarason, Sarason, and Pierce (1990) stress the importance of an individual's perception of what constitutes a support network and how satisfied they are with that construct. Research done with an instrument titled the Social Support Questionnaire (Sarason, Levine, Basham & Sarason, 1983) measures social support networks with the number of people to whom individuals can turn for support as well as how satisfied individuals are with that number. This emphasis on an individual's perceptions of support seems to be the most appropriate because it enters the subjective world of the individual and allows researchers to understand their experience of their supportive relationships (Vaux, 1988).

If an individual rated his or her level of perceived support as high, an interpretation of this rating would be

that the person feels accepted and confident that the support system would be available in times of stress. This confidence that an individual is worthy of others' attention is related to another measure - self-esteem. Previous research investigating the relationship of social support systems and self-esteem suggests that high self-esteem and high levels of satisfaction with support are positively correlated (Hobfoll, Nadler & Lieberman, 1986; Sarason et al., 1983). Further support for the relationship between social support networks and self-esteem comes from the research by Sarason et al. (1991) which investigates the relationship of perceived social support and self-perception. The results suggest that individuals who rate their networks high also score high on feelings of competence and interpersonal success. Those who rate their perceived social support as low are accompanied by beliefs that they are inadequate and not socially acceptable.

Supportive relationships provide esteem or emotional support through instances of good empathic listening (Wills, 1987). Attentiveness and acceptance by network members shows individuals they are understood and serves as a balance for the adverse influences of negative life events. Heller, Swindle and Dusenbury (1986) further examine the role of social support as esteem support during stressful as well as everyday experiences. In this way,

they attempt to see how networks influence coping as well as how they interact with an individual's health. Their conclusions are that support enhances a person's feeling of being cared for, of being valued by others and that others are there for them if needed. With this line of inquiry, the authors suggest that the main effect of social support on well-being and as a stress buffering effect is to enhance individual self-esteem and make people feel better overall. Further inquiry into how to build this element in a person's life seems warranted.

One instrument with which to measure social support is the Social Support Questionnaire (SSQ). Sarason et al. (1983) developed this test to measure the number of people to whom people can turn with problems (N) as well as how satisfied they are with that number (S). Research done with the SSQ (Sarason, Sarason & Shearin, 1986) reveals the stability of the N scale and the S scale over time. In attempting to establish social support as a stable personality characteristic, Sarason et al. (1986) show that the S scale shows more fluctuation than the N scale, however these measures are still more stable than other state oriented affective measures.

This research suggests that social support satisfaction is stable and is perhaps a steady measure of personality characteristics. It seems more probable, however, that this study revealed this type of result

because of its construction. This research was done as a simple test-retest situation. No interventions were attempted to see if the N or S levels would change.

Current research in the area of effective interventions with social support networks which does examine before and after differences is limited and vague. In a review of current interventions, Gottlieb (1988) reveals that there are presently two major approaches to building support for individuals: connect individuals more strongly to a member of a natural network or bond an individual with a new network such as a support group. Common approaches to support interventions include befriending an individual with a new tie such as Big Brother or Big Sister programs or more directed, didactic support interventions in which network members are taught how to be help-givers to assist the individual in need. The philosophy behind such interventions is to strengthen networks by conveying information about role performance and promoting the delivery of service of adaptational resources. This view of networks as feedback systems contrasts the premise of this paper which focuses on social support networks as interactive systems.

With an interactive focus, the premise is that the individual in need must build the skills necessary to make a difference in their own network. The social support network has the capacity to be helpful, but the individual

must learn how to access this support. One study (Kirkham & Schilling, 1989) which followed a similar premise contrasted treatments delivered to mothers of handicapped children. The effectiveness of a skill building intervention was compared to a more traditional support group and results revealed improved coping and communication skills as well as greater satisfaction with social support networks in the skills-building group. Although the two groups had similar aims of providing support, the skill building intervention was more successful at enhancing social support network satisfaction.

Along this same line of active skill building interventions with support networks, there is limited research which more closely approximates the development of self-sufficiency which is the focus for social support networks in this paper. Hobfoll and Freedy (1990) discuss workshops they have developed which deal with social support skills and building confidence in seeking support. Although untested, the goal of such programs is to develop coping skills which allow individuals to feel better about the support available to them. Other research has investigated developing skills of open discussion, frank communication, and affective release in network therapy (Schoenfeld, Halevy-Martini, Hemley-Van der Velden & Ruhf, 1985) as important elements of positive change in social

support networks. This study intended to develop skills so that responsibility for support shifted from the counselor's hands back to the natural network. The results showed a significant decrease in mental health service usage for those who participated in the intervention. Effects such as those sought in these two studies would be desirable in promoting self-help through network interaction.

A network stimulation project (Benum, Anstorp, Dalgard & Sorensen, 1987) provided further research aimed at building skills in order to develop self-sustaining social networks. This study identified a high risk group in a neighborhood with an unstable population and few services for social interaction. Through a process of developing and strengthening self-esteem, teaching how to give and receive social support and teaching how to function as a member of a group, this project revealed positive preliminary results. Through various means of evaluation, the researchers conclude that the participants in the intervention group improved their social networks and increased their quality of life and self-esteem. This type of research supports the hypothesis that support system intervention can have a positive influence on self-esteem and satisfaction with networks.

In another small study of women at risk for child maltreatment, Richey, Lovell and Reid (1991) suggest

similar intervention techniques for improving social support network interactions and self-esteem. This research involved weekly group sessions including training strategies of group discussion, reinforcement of relationship skills, and included topics such as giving positive and negative feedback. Results indicated noteworthy increases in satisfaction with support from friends and slight improvement in self-esteem. These results help to further substantiate the importance of self-esteem and social support network interventions through a skill-building model.

The purpose of this research was to begin investigating a specific program of social support intervention involving skills building training. Communication training delivered through Human Interaction classes will increase satisfaction levels with social support networks and levels of self-esteem. If levels of self-esteem and satisfaction with social support networks increase after participation in a class like Human Interaction, it would seem to further substantiate previous research dealing with support network interventions. In this way, this paper will examine whether interpersonal communication skills are an important first step to improving one's feeling about self as well as increasing satisfaction with support from others.

Skills training interventions such as communication skills training would seem to assist individuals to be able to reach out to their support networks. It would seem that learning to communicate more effectively with those members in a social support group would increase individuals' abilities to turn to their network for support and subsequently increase their satisfaction with that network. Focusing on changes that may occur after participating in a psychology course such as Human Interaction provides a beginning point from which to determine the effectiveness of communication training on levels of self-esteem and satisfaction with social support networks.

Human Interaction has a curriculum that focuses on building communication skills. It would seem that participation in a course which deals with skills for initiating relationships, skills for expressing self and for expressing emotions, skills for maintaining relationships and skills for building supportive climates as well as methods to manage interpersonal conflict (Ratliffe & Hudson, 1988) would be related to an increase in self-esteem and satisfaction with social support systems. Classroom experience involves actual practice and application of skills through group discussion and interaction. Skills are further enhanced through workbook exercises. The results of this research may support

further inquiry into the effectiveness of such a communication intervention.

To attempt to discriminate between the effect of communication training and the growth experience of college, scores from students in General Psychology were used as a control. The emphasis of such a general education class is not centered around communication skills training, and if students from these classes also showed increased satisfaction with social support networks and levels of self-esteem, it will be unclear if communication training or school participation contributed to the increase.

CHAPTER 3

Methodology

Subjects

Four classes of Austin Peay undergraduate students were tested during Spring semester 1991. Students from two classes of General Psychology, and two classes of Human Interaction, were asked to volunteer for this research. Scores from volunteers who were concurrently enrolled in both classes were disregarded.

There were 116 volunteers ranging in age from 18 to 43. Students over age 25 were classified as nontraditional and of the 54 students from Human Interaction classes 14 were nontraditional while 11 of the 62 students from General Psychology classes could be classified as nontraditional.

Materials

The Social Support Questionnaire (SSQ; see Appendix A) has 27 questions pertaining to social support networks. With questions such as "Whom can you count on to console you when you are very upset?" (Sarason et al., 1983), the SSQ requires two responses: (a) list the number of people to whom you can turn and upon whom you can rely with this problem (N) with a maximum of nine, and (b) on a scale of 1 to 6 with 1 being most dissatisfied and 6 being most

satisfied, rate how satisfied you are with this group of social supports (S). SSQ N scale measures the perceived availability of social support and represents the total number of individuals listed across each of the SSQ items. The SSQ S score assesses satisfaction with perceived available support using a 6 point Likert scale.

The SSQ has been chosen because of the importance of the S scale, but also because of its reliability and validity measures. Sarason et al. (1983) report the findings of studies with college students which show test-retest correlations for N and S at .90 and .83 respectively with a 4 week interval. Validity was assessed with relationships to other personality measures. The SSQ N and S scales showed negative correlations for anxiety and depression scores and a positive correlation for levels of optimism. Sarason, Shearin, Pierce and Sarason (1987) have conducted further research supporting construct and discriminant validity of the SSQ.

The Coopersmith Self-Esteem Inventory Adult Form (SEI; Coopersmith, 1981) is a widely used self-report questionnaire which presents respondents with generally favorable or generally unfavorable statements about the self to which respondents indicate like me or unlike me. Although it is criticized for its lack of normative data necessary for clinical interpretations, this 25 item test is highly recommended for research purposes (Peterson,

1985; Sewell, 1985) and praised for reliability, stability and construct validity (Peterson, 1985). The test provides a total SEI score as well as four embedded categories, but for the purposes of this research, only the general score was used.

Design and Procedure

The Social Support Questionnaire (Sarason et al., 1983) and Coopersmith's Self-Esteem Inventory (Coopersmith, 1981) were administered during the second week of the semester to the students of two classes of Human Interaction and two classes of General Psychology. Students were asked to read and sign an Informed Consent Statement (see Appendix C). The students were identified by a student identification number comprised of their birthday day and month. Tests and Informed Consent Statements were separated immediately as students submitted forms to the researcher.

Students were retested with the same test instruments during the last week of classes in Spring semester 1991. This pretest-posttest research design was employed to determine change of scores of SSQ N, SSQ S and SEI.

CHAPTER 4

Results

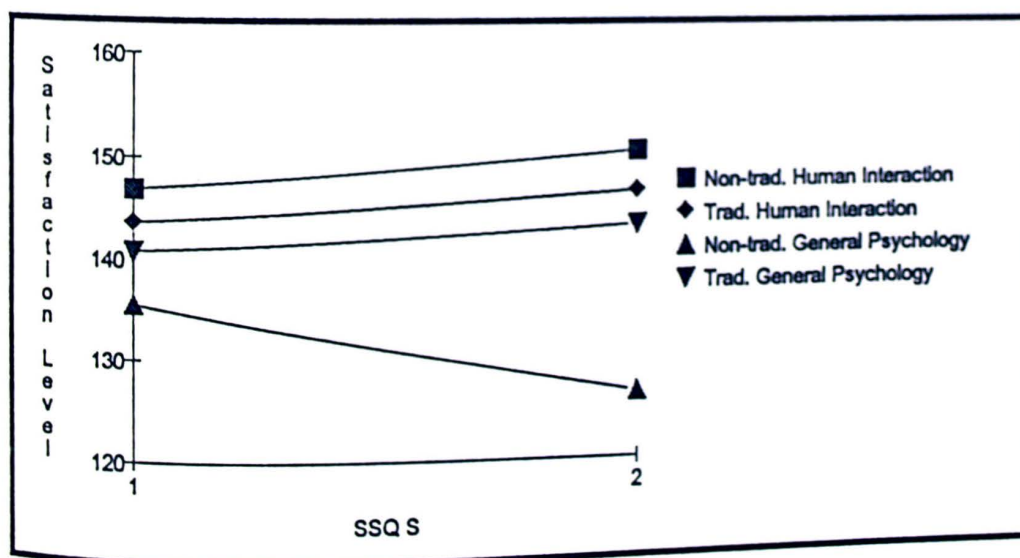
Data were analyzed using a $2 \times 2 \times 2$ mixed analysis of variance. Results assess the effect of test (pretest/posttest), class (Human Interaction/General Psychology), and student (traditional/non-traditional). In the analysis of the Social Support Questionnaire satisfaction levels (SSQ S), there was a significant difference when considering class. This measure of the between subject manipulation of class, $F(1, 104) = 7.829, p < .006$ indicates that it made a difference in SSQ S scores if the responses came from Human Interaction volunteers or General Psychology volunteers.

There are three other significant results in the SSQ S pre and posttest scores. There is an interaction in the between subject manipulation of class and student, $F(1, 104) = 4.007, p < .048$. This suggests that a difference in scores depended on the class students were in and whether participants were traditional or non-traditional students. Another interaction result appears by class and by test, $F(1, 104) = 5.542, p < .021$. This suggests that performance on the SSQ S scores differed according to what class the students attended as well as the early semester or late semester testing.

An analysis of SSQ S scores by test, class and student was significant. This three-way interaction is displayed in Figure 1. These interaction results alter the interpretation of previous results and will be discussed more in depth. While this interaction suggests a significant difference, $F(1, 104) = 4.645$, $p < .034$, Tukey's HSD post hoc analysis revealed only one significant difference. Initially there was no significant difference in the performance on the SSQ S scale for the four groups. Posttest results show that there was a slight increase for three groups in this study while there was a slight decrease for one group. The non-traditional, General Psychology students had significantly lower scores in the posttest results than the other three groups.

FIGURE 1

SSQ S PRE AND POSTTEST SCORES EXAMINED
BY CLASS AND TYPE OF STUDENT



Similar analyses were performed with the SSQ N and the SEI, self-esteem scores. SEI showed a significant difference with pre and posttest scores, $F(1, 112) = 7.134$, $p < .009$ with a mean pretest score of 71.393 and a mean posttest score of 75.250. There were no significant differences for manipulation of class or student. The SSQ N showed no significant difference by class, student or test.

To test the relationship of self-esteem to social support network number and satisfaction correlation coefficients were computed. These results are presented in Table 1.

TABLE 1

CORRELATION MATRIX FOR PRE AND POSTTEST SCORES OF SOCIAL
SUPPORT NETWORK NUMBER (SSQN), SATISFACTION (SSQS),
AND SELF-ESTEEM (SEI)

	SEI1	SEI2	SSQN1	SSQN2	SSQS1
SEI1					
SEI2	0.735				
SSQN1	0.345	0.419			
SSQN2	0.316	0.382	0.794		
SSQS1	0.357	0.433	0.377	0.379	
SSQS2	0.393	0.504	0.377	0.382	0.794

N=99

All coefficients are significant at the .01 level.

An examination of this data indicates a significant positive relationship between self-esteem (SEI) and social support network number (SSQN) and satisfaction (SSQS). This is true for pre and posttest scores. There is also a significant positive relationship between the social support satisfaction scores (SSQS) and the number scores (SSQN).

CHAPTER 5

Discussion and Conclusions

The results of this study provide partial support for the hypothesis that there would be greater improvement of satisfaction with social support systems in Human Interaction classes than in General Psychology classes. For the measure of self-esteem, however, while there was improvement in reported self-esteem, there was not a significant difference between Human Interaction and General Psychology classes.

More interesting than these performance improvements, however, is the three-way interaction that revealed a difference in scores for the non-traditional, General Psychology students. Their drop in performance on the satisfaction scores of the Social Support Questionnaire raises some questions. Since other non-traditional students and other General Psychology students did not show a similar decrease, it is important to postulate what may have made the difference.

The premise of this paper has been that communication skills training would provide skills necessary to improve satisfaction with social support networks as well as increase self-esteem. What appears to have happened in this study is that the skills building training provided in Human Interaction classes may not have served as a curative

influence in the participants' lives, but rather it may have had a preventive effect. In other words, the increase in satisfaction with social support systems did not occur to the extent this study anticipated, but the non-traditional student who did not participate in Human Interaction seems to have suffered from not receiving this communication skills training.

One explanation may be that non-traditional students not receiving supplemental training in communication became discouraged with their support systems during the 16-week semester. Without the benefit of new relationship and interactive skills, they were less able to garner satisfaction from their existing support system. Traditional, General Psychology students who did not show this drop in performance may not have encountered some of the varied stressors which surround the college experience of the non-traditional student. Further research into the differences of these two types of students may reveal more specifically how their college experiences can be stimulated to provide the most positive results.

Overall, the improvement in the satisfaction with social support network scores of the Human Interaction classes was less than anticipated. The fact that there was improvement is encouraging nonetheless. With further research into specifically what skills and interventions are most productive in communication skills training, a

counseling program could potentially be more successful in improving satisfaction with social support systems. With the appropriate training, it seems plausible that participants in a program could increase their own ability to satisfy their needs with their natural support network.

Although there was not a significant difference in self-esteem scores between Human Interaction and General Psychology students, the results of this study correlating high levels of self-esteem to high satisfaction with social support are also encouraging. If the program of communication skills building were to be successful in increasing satisfaction with social support systems and self-esteem is positively correlated to that measure, it still remains hopeful that self-esteem would also increase with such a program.

Although the designers of the Social Support Questionnaire have not researched this correlation, it is interesting to note that as the number of members in a social support network increases so does the satisfaction level. This study focused on increasing only the satisfaction level because it seemed to be a more appropriate measure of an individual's subjective appraisal of their network. With this new information, it might be wise to incorporate friendship-building techniques with communication skills training to increase the number as well as the satisfaction level with social support

The benefits of working with social support systems range from practical to political. Social support systems exist in everyday interactions making them a readily available area for improvement. Their positive influences on health and their relationship to good feelings about self suggest that they are worthy of increased attention in the counseling field. Working with such an area can promote self-sufficiency and remove responsibility for health and well-being from the hands of professional mental health facilitators and put it in the hands of the individual. Although the skills building program examined in this paper did not have the full effect that had been anticipated, this study does provide some results that suggest its applicability to counseling techniques. Through further research into what types of training are most beneficial with social support networks, counseling programs could provide interventions that link individuals successfully with their natural support networks. This process seems worthwhile when considering the objectives of counseling as defined by the Division of Counseling Psychology of the American Psychological Association (1956). Improving satisfaction with social support systems seems to be one way to assist individuals in overcoming obstacles to their personal growth and to assist them in achieving optimum development of their personal resources.

APPENDIXES

SSQ
Social Support Questionnaire

Identification Number: _____ (birthday day/month)
 Age: _____ Gender: _____
 Class in school: Freshman _____ Sophomore _____ Junior _____ Senior _____
 Anticipated Grade in this class: _____

INSTRUCTIONS:

The following questions ask about people in your environment who provide you with help or support. Each question has two parts. For the first part, list all the people you know, excluding yourself, whom you can count on for help or support in the manner described. Give the person's initials and their relationship to you (see example). Once you have listed someone's initials and relationship to you the first time, there is no need to repeat the relationship unless it improves clarity. Do not list more than one person next to each of the letters beneath the question.

For the second part, circle how satisfied you are with the overall support you have.

If you have no support for a question, circle the words "No one," but still rate your level of satisfaction. Do not list more than nine persons per question.

Please answer all questions as best you can. All your responses will be kept confidential.

EXAMPLE:

Who do you know whom you can trust with information that could get you in trouble?

No one	1) T.W. (brother)	4) T.W. (father)	7)
	2) L.W. (friend)	5) L.R. (employer)	8)
	3) R.S. (friend)	6)	9)

How satisfied?

6	5	4	3	2	1
very	fairly	a little	a little	fairly	very
satisfied	satisfied	satisfied	dissatisfied	dissatisfied	dissatisfied

Please answer all of the questions on the front and back of these three pages.
 There are 27 questions.

1. Whom can you really count on to listen to you when you need to talk?
- | | | | |
|--------|----|----|----|
| No one | 1) | 4) | 7) |
| | 2) | 5) | 8) |
| | 3) | 6) | 9) |

How satisfied?

6	5	4	3	2	1
very	fairly	a little	a little	fairly	very
satisfied	satisfied	satisfied	dissatisfied	dissatisfied	dissatisfied

2. Whom can you really count on to help you if a person whom you thought was a good friend insulted you and told you that he/she didn't want to see you again?
- | | | | |
|--------|----|----|----|
| No one | 1) | 4) | 7) |
| | 2) | 5) | 8) |
| | 3) | 6) | 9) |

How satisfied?

6	5	4	3	2	1
very	fairly	a little	a little	fairly	very
satisfied	satisfied	satisfied	dissatisfied	dissatisfied	dissatisfied

3. Whose lives do you feel you are an important part of?

No one	1)	4)	7)
	2)	5)	8)
	3)	6)	9)

How satisfied?

6	5	4	3	2	1
very	fairly	a little	a little	fairly	very
satisfied	satisfied	satisfied	dissatisfied	dissatisfied	dissatisfied

4. Whom do you feel would help you if you were married and had just separated from your spouse?

No one	1)	4)	7)
	2)	5)	8)
	3)	6)	9)

How satisfied?

6	5	4	3	2	1
very	fairly	a little	a little	fairly	very
satisfied	satisfied	satisfied	dissatisfied	dissatisfied	dissatisfied

5. Whom could you really count on to help you out in a crisis situation, even though they would have to go out of their way to do so?

No one	1)	4)	7)
	2)	5)	8)
	3)	6)	9)

How satisfied?

6	5	4	3	2	1
very	fairly	a little	a little	fairly	very
satisfied	satisfied	satisfied	dissatisfied	dissatisfied	dissatisfied

6. Whom can you talk with frankly, without having to watch what you say?

No one	1)	4)	7)
	2)	5)	8)
	3)	6)	9)

How satisfied?

6	5	4	3	2	1
very	fairly	a little	a little	fairly	very
satisfied	satisfied	satisfied	dissatisfied	dissatisfied	dissatisfied

7. Who helps you feel that you truly have something positive to contribute to others?
- | | | | |
|--------|----|----|----|
| No one | 1) | 4) | 7) |
| | 2) | 5) | 8) |
| | 3) | 6) | 9) |

How satisfied?

6	5	4	3	2	1
very	fairly	a little	a little	fairly	very
satisfied	satisfied	satisfied	dissatisfied	dissatisfied	dissatisfied

8. Whom can you really count on to distract you from your worries when you feel under stress?

No one	1)	4)	7)
	2)	5)	8)
	3)	6)	9)

How satisfied?

6	5	4	3	2	1
very	fairly	a little	a little	fairly	very
satisfied	satisfied	satisfied	dissatisfied	dissatisfied	dissatisfied

9. Whom can you really count on to be dependable when you need help?

No one	1)	4)	7)
	2)	5)	8)
	3)	6)	9)

How satisfied?

6	5	4	3	2	1
very	fairly	a little	a little	fairly	very
satisfied	satisfied	satisfied	dissatisfied	dissatisfied	dissatisfied

10. Whom could you really count on to help you out if you had just been fired from your job or expelled from school?

No one	1)	4)	7)
	2)	5)	8)
	3)	6)	9)

How satisfied?

6	5	4	3	2	1
very	fairly	a little	a little	fairly	very
satisfied	satisfied	satisfied	dissatisfied	dissatisfied	dissatisfied

11. With whom can you be totally yourself?

No one	1)	4)	7)
	2)	5)	8)
	3)	6)	9)

How satisfied?

6	5	4	3	2	1
very	fairly	a little	a little	fairly	very
satisfied	satisfied	satisfied	dissatisfied	dissatisfied	dissatisfied

12. Whom do you feel really appreciates you as a person?

No one	1)	4)	7)
	2)	5)	8)
	3)	6)	9)

How satisfied?

6	5	4	3	2	1
very	fairly	a little	a little	fairly	very
satisfied	satisfied	satisfied	dissatisfied	dissatisfied	dissatisfied

13. Whom can you really count on to give you useful suggestions that help you to avoid making mistakes?

No one 1) 4) 7)
 2) 5) 8)
 3) 6) 9)

How satisfied?

6 5 4 3 2 1
 very fairly a little a little fairly very
 satisfied satisfied satisfied dissatisfied dissatisfied dissatisfied

14. Whom can you count on to listen openly and uncritically to your innermost feelings?

No one 1) 4) 7)
 2) 5) 8)
 3) 6) 9)

How satisfied?

6 5 4 3 2 1
 very fairly a little a little fairly very
 satisfied satisfied satisfied dissatisfied dissatisfied dissatisfied

15. Who will comfort you when you need it by holding you in their arms?

No one 1) 4) 7)
 2) 5) 8)
 3) 6) 9)

How satisfied?

6 5 4 3 2 1
 very fairly a little a little fairly very
 satisfied satisfied satisfied dissatisfied dissatisfied dissatisfied

16. Whom do you feel would help if a good friend of yours had been in a car accident and was hospitalized in serious condition?

No one 1) 4) 7)
 2) 5) 8)
 3) 6) 9)

How satisfied?

6 5 4 3 2 1
 very fairly a little a little fairly very
 satisfied satisfied satisfied dissatisfied dissatisfied dissatisfied

17. Whom can you really count on to help you feel more relaxed when you are under pressure or tense?

No one 1) 4) 7)
 2) 5) 8)
 3) 6) 9)

How satisfied?

6 5 4 3 2 1
 very fairly a little a little fairly very
 satisfied satisfied satisfied dissatisfied dissatisfied dissatisfied

18. Whom do you feel would help if a family member very close to you died?
- | | | | |
|--------|----|----|----|
| No one | 1) | 4) | 7) |
| | 2) | 5) | 8) |
| | 3) | 6) | 9) |

How satisfied?

6	5	4	3	2	1
very	fairly	a little	a little	fairly	very
satisfied	satisfied	satisfied	dissatisfied	dissatisfied	dissatisfied

19. Who accepts you totally, including both your worst and your best points?
- | | | | |
|--------|----|----|----|
| No one | 1) | 4) | 7) |
| | 2) | 5) | 8) |
| | 3) | 6) | 9) |

How satisfied?

6	5	4	3	2	1
very	fairly	a little	a little	fairly	very
satisfied	satisfied	satisfied	dissatisfied	dissatisfied	dissatisfied

20. Whom can you really count on to care about you, regardless of what is happening to you?
- | | | | |
|--------|----|----|----|
| No one | 1) | 4) | 7) |
| | 2) | 5) | 8) |
| | 3) | 6) | 9) |

How satisfied?

6	5	4	3	2	1
very	fairly	a little	a little	fairly	very
satisfied	satisfied	satisfied	dissatisfied	dissatisfied	dissatisfied

21. Whom can you really count on to listen to you when you are very angry at someone else?
- | | | | |
|--------|----|----|----|
| No one | 1) | 4) | 7) |
| | 2) | 5) | 8) |
| | 3) | 6) | 9) |

How satisfied?

6	5	4	3	2	1
very	fairly	a little	a little	fairly	very
satisfied	satisfied	satisfied	dissatisfied	dissatisfied	dissatisfied

22. Whom can you really count on to tell you, in a thoughtful manner, when you need to improve in some way?
- | | | | |
|--------|----|----|----|
| No one | 1) | 4) | 7) |
| | 2) | 5) | 8) |
| | 3) | 6) | 9) |

How satisfied?

6	5	4	3	2	1
very	fairly	a little	a little	fairly	very
satisfied	satisfied	satisfied	dissatisfied	dissatisfied	dissatisfied

23. Whom can you really count on to help you feel better when you are feeling generally down-in-the-dumps?

No one 1) 4) 7)
 2) 5) 8)
 3) 6) 9)

How satisfied?

6 5 4 3 2 1
 very fairly a little a little fairly very
 satisfied satisfied satisfied dissatisfied dissatisfied dissatisfied

24. Whom do you feel truly loves you deeply?

No one 1) 4) 7)
 2) 5) 8)
 3) 6) 9)

How satisfied?

6 5 4 3 2 1
 very fairly a little a little fairly very
 satisfied satisfied satisfied dissatisfied dissatisfied dissatisfied

25. Whom can you count on to console you when you are very upset?

No one 1) 4) 7)
 2) 5) 8)
 3) 6) 9)

How satisfied?

6 5 4 3 2 1
 very fairly a little a little fairly very
 satisfied satisfied satisfied dissatisfied dissatisfied dissatisfied

26. Whom can you count on to support you in major decisions you make?

No one 1) 4) 7)
 2) 5) 8)
 3) 6) 9)

How satisfied?

6 5 4 3 2 1
 very fairly a little a little fairly very
 satisfied satisfied satisfied dissatisfied dissatisfied dissatisfied

27. Whom can you really count on to help you feel better when you are very irritable, ready to get angry at almost anything?

No one 1) 4) 7)
 2) 5) 8)
 3) 6) 9)

How satisfied?

6 5 4 3 2 1
 very fairly a little a little fairly very
 satisfied satisfied satisfied dissatisfied dissatisfied dissatisfied

APPENDIX B
Permission for Social Support Questionnaire

UNIVERSITY OF WASHINGTON
SEATTLE, WASHINGTON 98195

Department of Psychology NI-25

November 7, 1990

Ms. Monica Darcy
3327 Carrie Drive
Clarksville, Tennessee 37042

Dear Ms. Darcy:

Enclosed are copies of the long and short forms of the Social Support Questionnaire and articles which you requested. You have my permission to use them.

I have also enclosed some related articles.

Good luck!

Sincerely,

A handwritten signature in dark ink, appearing to read "Irwin G. Sarason". The signature is fluid and cursive, with the first name "Irwin" being more prominent and the last name "Sarason" written in a more compact, flowing style.

Irwin G. Sarason, PH.D
Professor and Chair

IGS:bj

Enc.

APPENDIX C

INFORMED CONSENT STATEMENT

The purpose of this investigation is to provide information about the influence of communication training on social support networks and self-esteem. Your responses are confidential. At no time will you be identified nor will anyone other than the investigators have access to your responses. There are no potential hazards which may occur from participation in this research. The demographic information collected will be used only for purposes of analysis. Your participation is completely voluntary, and you are free to terminate your participation at any time without penalty.

The scope of this project will be explained fully upon completion.

Thank you for your cooperation.

I agree to participate in the present study being conducted under the supervision of a faculty member of the Department of Psychology at Austin Peay State University. I have been informed, either orally or in writing or both, about the procedures to be followed and about any discomforts or risks that may be involved. The investigator has offered to answer any further inquiries as I may have regarding the procedures. I understand that I am free to terminate my participation at any time without penalty or prejudice and to have all data obtained from me withdrawn from the study and destroyed. I have also been told of any benefits that may result from my participation.

NAME (PLEASE PRINT)

SIGNATURE

DATE

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