The Relationship Between Therapist Personality and Theoretical Orientation

David J. Wagner
Western Michigan University

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THE RELATIONSHIP BETWEEN THERAPIST PERSONALITY
AND THEORETICAL ORIENTATION

David John Wagner, Ed.D.
Western Michigan University, 1989

This research project sought to examine the relationship between a therapist's personality and theoretical orientation. It was hypothesized that therapists with similar personalities would possess similar theoretical orientations.

Forty male and 22 female therapists from a variety of clinical settings participated in the study by volunteering to answer a one-page questionnaire and take the Myers-Briggs Type Indicator (MBTI), Form G. In addition to demographic data, the questionnaire asked the therapist to select one of six theoretical orientations which they felt best described them. Each orientation was briefly described and defined. The six orientations were: (1) psychodynamic, (2) behavioral, (3) cognitive, (4) person-centered, (5) existential, and (6) developmental.

A Kruskal-Wallis one-way analysis of variance was conducted to determine if a significant relationship existed between the variables personality and theoretical orientation. The $H$ value of the analysis was not significant at the .05 level. Kruskal-Wallis analyses were also conducted on the Extraversion-Introversion (E-I), Sensing-Intuition (S-N), Thinking-Feeling (T-F), and Judging-Perceiving (J-P) dichotomous variables, and on the Extraversion (E), Introversion (I), Sensing (S), Intuition (N), Thinking (T), Feeling (F), Judging (J),
Perceiving (P) variables separately. No significant differences were found. It was determined that the T-F and J-P dichotomies were most closely related to theoretical orientation, a finding that confirmed other studies.

The data from this study were compared with data collected by Myers & McCaulley (1985). In several areas, the two sets of data were found to be similar.
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The relationship between therapist personality and theoretical orientation

Wagner, David John, Ed.D.

Western Michigan University, 1989

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I would like to take this opportunity to thank those who so willingly assisted in the completion of this dissertation and my program of study. As committee chairperson, Dr. John Geisler has guided and encouraged me throughout, never failing to be supportive and attentive to my goals. I am truly indebted to him for his guidance and help, and for seeing it through to completion.

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David John Wagner
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CHAPTER I

BACKGROUND AND STATEMENT OF THE PROBLEM

Statement of the Problem

This research project sought to investigate the broad question: On what basis do therapists choose the theoretical orientation from which to operate? How does one therapist choose to practice therapy as a Freudian depth analyst, another as a non-directive Rogerian phenomenologist, and yet another as a Skinnerian behaviorist? More specifically, this project hypothesized that the therapist's personality is one determining factor in the choice of theoretical orientation. This project attempted to measure the relationship between theoretical orientation and personality traits as measured by the Myers-Briggs Type Indicator (MBTI) (Myers & McCaulley, 1985).

A number of factors have been suggested as possible determiners of theoretical orientation. Some have postulated the choice of theory has been persuaded by a favorite professor or writer (Hart, 1982), as a result of one's own experience as a client out of which the client-therapist seeks to practice therapy similarly to their therapist (Cummings & Lucchese, 1978; Steiner, 1978), as a result of the therapeutic training they received (Witzig, 1976), as a result of the assignment of a particular supervisor (Cummings & Lucchese, 1978), due to the therapist's personal disturbance (Ellis, 1978), "political, economic, socio-cultural influences" (Schwartz, 1978, p. 345), or as
a result of an individual’s "own life experience" (Steiner, 1978, p. 371). It is the premise of this research project that while the factors mentioned play a part, choice of a theoretical orientation is also a reflection of the therapist's personality. Stolorow & Atwood (1979) put forth this premise in their book, *Faces in a Cloud*:

A person's commitment to a particular personality theory is therefore a process rather different from what the popular canons of scientific method would lead one to believe. These canons conceive of the acceptance of a theory, or the rejection of it, in exclusively rational terms; they emphasize that acceptance or rejection is governed by a dispassionate evaluation of the system's logical coherence and consistency with empirical reality. In actuality, the process is considerably more involved. A serious confrontation with a theory of personality awakens a whole pattern of positive and negative subjective resonance in the individual, and his eventual attitudes toward the material will be profoundly affected by its degree of compatibility with his own personal reality. (pp. 18-19)

McConnaughy (1987) made the same point when he said, "Therapists select techniques and theories because of who they are as persons; the therapy strategies are manifestations of the therapist's personality" (p. 303). Later in the same article he stated: "It is essential to clarify that techniques (and theoretical orientations) are selected by individual therapists because of their personal appeal" (p. 309).

Strupp (1959) also alludes to the linking of personality and theoretical orientation when he stated, "the therapist's personality, attitudes, and values are very much in the picture at all times, and they color and influence the direction and quality of his therapeutic operations" (p. 349). Or again, "it is almost axiomatic that the therapist's personality and attitudes are the prime determiners of the character of his therapeutic operations" (Strupp, 1955, p. 1).
Stolorow & Atwood (1979) suggest that the theories of Freud, Jung, Reich, and Rank are themselves expressions of the personalities of these men. The possibility lends weight to the hypothesis of this project, that what we are impacts what we think, do, and the choices we make.

If therapists pick theoretical orientations intuitively, it follows that therapists with similar personalities would choose similar theoretical orientations. In terms of a personality test, it is possible to hypothesize that there is a relationship between the personality of the therapist and the choice of theoretical orientation out of which they practice therapy. It is the hypothesis of this project that similar kinds of therapists (e.g., behaviorists), will tend to cluster around a specific personality type or types on the MBTI.

Background of the Problem

Based on the work of Fiedler (1950a, 1950b, 1951), Sloane, Staples, Cristol, Yorkston & Whipple (1975), and Smith & Glass (1980), regarding the efficacy of therapy and the therapeutic relationship in therapy, there is evidence to suggest that theoretical orientation is of less significance to positive outcome in therapy than is the establishment of a therapeutic relationship that most closely approximates what Fiedler calls an ideal therapeutic relationship (1950a).

Smith & Glass (1980) in a classic study concluded: "The results of research demonstrate the beneficial effects of counseling and
psychotherapy. Despite volumes devoted to the theoretical differences among different schools of psychotherapy, the results of research demonstrate negligible differences in the effects produced by different therapy types" (p. 760). Luborsky, Singer & Luborsky (1975) reached the same conclusion in their Comparative Studies of Psychotherapies: "For comparisons of psychotherapy with each other, most studies found insignificant differences in proportions of patients who improved (though most patients benefitted). Our explanations...emphasize the common components among psychotherapies, especially the helping relationship with a therapist" (p. 995). Luborsky, Chandler, Auerbach, Cohen, & Bachrach (1971) stated, "Schools of treatment usually made no measurable difference" (p. 154).

There have been a number of research projects in addition to the Fiedler, Sloane et al., and Smith & Glass research cited earlier that points to the importance of the therapeutic relationship including Greenson (1969, 1971), Lazarus (1985), Luborsky (1975), Marguiles & Havens (1981), Schofield (1964), Stiles, Shapiro, & Elliott (1986), and Strupp (1959). It is of some value to quote directly from some of these studies to appreciate the content and forcefulness with which the therapeutic relationship is described. McConnaughy (1987) states, "the relationship becomes the crucible for change," (p. 311); Fairbairn (cited in Greenson, 1971) states: "The relationship existing between patient and analyst is more important than details of technique" (p. 215), and Fiedler (1950b) says, "the therapeutic relationship is the core of therapy" (p. 436).
These three characteristics of the therapist's behavior (empathy, unconditional positive regard, congruency) cut across the parochial theories of psychotherapy and can thus be considered as elements common to a wide variety of psychoanalytic, client-centered, and eclectic approaches to psychotherapy. (Truax, 1963, p. 256)

What we have learned that may be useful in conducting psychotherapy is that therapist-patients seek a personal relationship with their therapists—one in which they feel affirmed, appreciated, and respected by another human being whom they like, appreciate, and respect. (Grunebaum, 1983, p. 1338)

When a therapist tells a claustrophobic client, "I used to experience great anxiety in closed places until I learned to do X, Y, and Z," we have the hallmarks of good behavior—rapport, empathy, identification, specificity, and practice. (Lazarus, 1985, p. 1419)

The concept of the therapeutic relationship is an important one for this project. If there are no demonstrable differences between various theoretical orientations, the unique therapeutic relationship between client and therapist takes on added significance. The therapeutic relationship by definition involves the person(al)ity of the therapist and if choice of theoretical orientation rises from the therapist's personality, the therapeutic relationship and theoretical orientation are closely linked.

Fiedler's (1950a, 1950b) work suggests that the therapeutic relationship, not theoretical orientation is the determining factor in successful therapy. It follows that the very definition and meaning of a therapeutic or interpersonal relationship means that the therapist relates and interacts from the person(al)ity of who they are. Though therapeutic behaviors are often delineated by virtue of one's training, the instrumentation of those behaviors and techniques are operationalized through the personality of the individual therapist. Lending
support are studies such as Buckley, Karasu, Charles, & Stein (1979) who found that "therapists may prefer a value-free therapy as an ideal, but invariably bring their personal values into the treatment situation" (p. 218).

Anna Freud (quoted by Buckley et al., 1979) made similar observations when, commenting on the different ways psychoanalysts actually practice therapy, says, "no one has succeeded yet in investigating and finding the causes of these particular variations. They are determined, of course, not by the material, but by the trends of interest, intentions and shades of evaluation which are peculiar to every individual analyst" (p. 218).

Weiss (1973) notes, "In the course of interviewing the (analytic and behavioral) therapists, the author also became impressed with what seemed to be significant personality differences between the two groups" (p. 145). Coan (1973) agreed when he stated, "theoretical orientation is not just a cumulative product of all relevant environmental input...our positions are governed to a high degree by individual temperament" (p. 324).

O'Leary (1984) states," it is clear that personality variables of therapists may not only influence how effective they are as therapists, but what type of therapists they may become" (p. 23). Strupp (1959) agreed, by stating, "The therapist's theoretical orientation...is not accident. It is overdetermined and deeply rooted in one's biography" (p. 314). Barron (1978) states, "It seems to me that we can best understand the selection of a theory in terms of its relationship to personality" (p. 312).
There has been little research utilizing the MBTI to determine possible relationships between personality type and theoretical orientation. Hart (1982) found that, "Theoretical orientations of undergraduate psychology majors can be predicted by a knowledge of their scores on the MBTI" (p. 801). Levin (1979) and Zimrostrad (1987) found that some scores on the MBTI were indicative of different theoretical orientations. In addition, Carter (1982) found that Jungian typology offers a "viable description of the antecedents of metatheoretical positions (among therapists)" (p. 1658B).

The concept that therapists choose to practice therapy from their own personality structure, and the motivation for pursuing this research resulted from the author's search for his own theoretical orientation, and his experiences within an academic counselor education program.

Two aspects about the academic process in particular served as incentives for investigation of theoretical choices: (1) in some classes theoretical ideologies seemed to be presented in almost a cafeteria style, without sufficient regard for the procedures for making a theoretical choice, and (2) the theoretical bias of some instructors was presented as "Truth."

With respect to the first issue, the presentation of theoretical ideologies in a cafeteria style, the unanswered question seemed to be, "Now what?" Now that students know some differences between Rogers, Freud, Ellis, Skinner, and others, now what? Were students to choose an orientation, and if so, by what process was this choice to be made?
The second difficulty, the assumption that each instructor's orientation was Truth, focuses on the lack of encouragement for students to discover theoretical Truth for themselves. There appeared to be a lack of encouragement to process information about the various theoretical orientations through the students' own belief systems, values, personalities and intuitions. The process of choosing, the how of a choice of an orientation, was seldom discussed only the choices it was possible to make.

An article that spoke to these questions is one written by McConnaughy (1987) which, both in content and direction, expressed what this writer believes. McConnaughy begins his article, "The Person of the Therapist is Psychotherapeutic Practice," with a quotation from Ralph Waldo Emerson: "Use what language you will, you can never say anything but what you are" (p. 303).

As this writer grew in experience and confidence as a practicing therapist, as he read widely within the field of psychotherapy, and as he saw widely divergent styles and orientations succeed therapeutically with clients, he realized no single theory or style was right for everyone. McConnaughy (1987) describes this realization when he writes:

It was important to acknowledge that I could not be my supervisor, I could not be the authors whose techniques I read about, I could not be the master clinicians I observed on videotape or on stage. I could only be myself; I could only do what felt comfortable and solidly connected to who I am. (p. 303)

The realization that selection of therapeutic orientation and the practice of interpersonal psychotherapy could (and should) be "solidly connected to who I am" was an important one.
A related aspect of this learning process was the extensive reading of the works of Carl Rogers and Sigmund Freud. As these writers were read and assimilated, the writer felt a much stronger "pull" from Rogers than from Freud, a pull that included the intellectual aspects of Rogers' theory, but which seemed to go beyond the merely cognitive. It seemed to be an intuitive, personal reaction, perhaps similar in important ways to how therapists choose theoretical orientations.

Importance and Purpose of the Study

This project may have applications in the following areas:

1. Providing additional evidence that personality plays a part in the selection of theoretical orientation. The study of how and why therapists choose to do therapy has been largely neglected both in the research literature and in the academic field of counselor education and supervision. With the exception of four related investigations (Hart, 1982; Levin, 1979; Witzig, 1977; and Zimrostrad, 1987), there has been little research into the area of theoretical choice which might help answer the how and why of that choice. While the entire Winter 1978 issue of Psychotherapy: Theory, Research And Practice (vol. 15) was devoted to the topic of personality and theoretical orientation, most of the articles were individual authors' personal views on the topic. Three of the authors (Chwast, 1978; Steiner, 1978; and Walton, 1978) reported on research or surveys that were done in support of their position on the question. These articles are cited...
appropriately in this project. The other articles, while interesting, remain personal opinions of the authors.

Of equal concern and interest is the apparent lack of emphasis this area has received within counselor education programs. Based upon the author's experience and the lack of recent relevant journal articles about the process of choice leads one to conclude that this area has been little investigated or applied within academic training programs.

2. Providing information as to why therapists practice therapy the way they do, and why they choose the theoretical orientation they do. Given that different theoretical orientations call for different therapist responses, interpretations, and interventions, one's choice of a theoretical orientation impacts greatly on the techniques of doing therapy. It is important to develop research that helps answer the question of therapeutic choice in a controlled, scientific manner.

3. Congruence (authenticity) is considered a key therapeutic attitude by most theoretical orientations (Rogers, 1957; Truax & Carkhuff, 1967). Thus both therapists-in-training and therapists-in-practice need to be encouraged to examine their own theoretical orientation for personal congruency. Weiss (1973) has written: "Moreover, the more congruent an individual's personal values are with the training milieu within which he operates, the less he is likely to be bogged down with ideological encumbrances that distract him from being an effective therapist" (p. 149).

Lack of congruency may be one reason for lack of effective therapy on the part of some therapists; if the client experiences the lack of
authenticity and thus feels betrayed or cheated, he/she may terminate therapy or find it difficult to work well within therapy. If lack of congruency between therapeutic orientation and therapist personality is a cause of unsuccessful therapy, the research described here takes on added significance as it seeks to determine the relationship between personality and therapeutic orientation. Further, it suggests additional research possibilities as to the reasons unsuccessful therapy is unsuccessful.

4. Therapists-in-training can be offered encouragement to choose theoretical orientation by paying attention to several dimensions, including their own personality variables, and thereby make that selection less of a covert process.

5. Matching clients/counselors by types may have a positive effect on therapy outcomes (Allen, 1986; Mendelsohn, 1966). Mendelsohn (1966) states, "It is a tenable hypothesis that who the client is, is of less significance to counseling than with whom he is matched" (p. 234). Luborsky et al. (1980) found that "Therapist-selected patients did better than randomly selected patients" (p. 478). If such matching demonstrates that therapy outcomes improve, some matching might be done within mental health facilities.

Scope of Study

Theoretical orientation refers to the subjects' claimed conduct in therapy and counseling.
No prediction is made regarding which kinds of therapists will fall into which kinds of theoretical orientations, nor is this study intended to discuss or imply judgements concerning the relative merits of each theoretical orientation.
CHAPTER II

REVIEW OF THE LITERATURE

"The relationship between therapists personalities and choice of theoretical orientation appears as an overlooked and under-researched question" (Herron, 1978, p. 396). There have been few statistical investigations into the relationship between therapist's personality and theoretical orientation. While one issue of Psychotherapy: Theory, Research And Practice (Vol. 15, Winter, 1978) was devoted solely to this topic, only three of the articles (Chwast, 1978; Herron, 1978; Walton, 1978) reported results of statistical research. The other articles reported individual author's opinions.

In addition to the three investigations mentioned. Hart (1982), Levin (1978), and Zimrostrad (1987) have all reported some evidence that scores on the MBTI are related to theoretical orientation.

Hart (1982) sought to investigate "the individual or personal determinants of theoretical orientation" (p. 796). To investigate this, he gave the MBTI and the Theoretical Orientation Survey (TOS) developed by Coan to 181 junior and senior psychology majors.

Hart sought to test two hypotheses: (1) That the factors of the TOS which make up the concept "Objectivism" would be negatively correlated with MBTI scores on "Introversion" (I), "Intuition" (N), "Feeling" (F), and "Perceiving" (P), and (2) that the TOS factors which emphasize instincts and intuition would be positively correlated with
the same four MBTI categories (I, N, F and P). Support for the first hypothesis was found, but not for the second.

The Sensing pole of the Sensing-Intuition (S-N) dimension of the MBTI was found to contribute most to the subject's position on several theoretical factors of the TOS, all at the .01 level of significance. As a result of his work, Hart stated: "It can be concluded that theoretical orientations of undergraduate psychology majors can be predicted by a knowledge of their scores on the Myers-Briggs Type Indicator" (p. 801).

Levin (1979) tested 91 experienced therapists from five different self-reported theoretical orientations: (1) psychoanalytic-oriented, (2) behavioral, (3) Gestalt, (4) Rational-Emotive (RET), and (5) experiential. Using an ANOVA he found that the Thinking-Feeling (T-F) and Judging-Perceiving (J-P) dimensions of the MBTI revealed statistically significant differences among the five orientations. Behaviorists and RET therapists scored higher on the Thinking (T) pole while psychoanalytic, Gestalt and experiential types scored higher on the Feeling (F) dimension. Chi-square showed that RET and experiential therapists were at the opposite extremes of the T-F dimension. Gestalt and experiential therapists tended to be more Perceptive (P) while RET, psychoanalytic and behavioral were more Judging (J). All therapists were Intuitive (N) and RET, experiential and behavioral therapists tended to be Introverted (I), while Gestalt and psychoanalytic tended to be Extraverted (E).

Zimrostrad (1987), using MANOVA yielding both multivariate and univariate F tests, found that only the MBTI dimension of Thinking-
Feeling (T-F) \(F=2.27, \ p<.025\) was found to be predictive of either the behavioral or psychoanalytic theoretical orientation. No significant F scores were found with the E-I, S-N or J-P dimensions.

Herron (1978) discussed possible determinants of a therapist's theoretical orientation including what he calls "the visibility factor, the success factor, the adaptability factor, need satisfaction, and demand" (p. 396). Herron tested twenty-one doctoral level psychology students by administering the Personal Orientation Inventory (POI), developed by Shostrom and a questionnaire giving them a choice of three theoretical orientations, (1) humanistic (A), (2) behavioristic (B) and (3) psychoanalytic (C). The students were asked to give a 1 rating to their most preferred theoretical orientation, a 2 to the next preferred, and a 3 to the least preferred. Results showed that 13 students rated the orientations as CAB, 5 as ACB, and 1 BAC, making the psychoanalytic orientation the favored orientation, humanistic the next favored and behavioristic least favored. For the major orientation grouping of CAB, "all their subscales scores fell within the 50-60 standard score range, which is considered characteristic of self-actualizing people" (p. 400). Based on these results, Herron stated: "There is a suggestion in these results of a probable link between personality characteristics and choice of a theoretical orientation" (p. 400).

Walton (1978) conducted a factor analysis of the results of a semantic differential instrument and self-identified groups of therapists (behavioral, rational-emotive, psychodynamic, humanistic, eclectic). The semantic differential instrument was one which Walton constructed.
The basic unit of a semantic differential instrument consists of a concept at the top of a list of "semantically differentiated" adjective pairs, such as good-bad, strong-weak, etc. The adjective pairs are separated by a seven point scale. (p. 390)

The concepts tested by the instrument were: My Style of Relating to Clients; My Intuition; My Best Friend; My Initial Reaction to Strangers; My Style of Relating to Friends; My Rationality; and Myself (Walton, 1978). One hundred thirty-four respondents were used in the study.

Each response on the instrument was scored from 1 to 7 yielding a numerical value for each item for each subject. The 98 items were then subjected to a principal components analysis with a varimax orthogonal rotation. This procedure yielded eight factors: (1) Receptivity, (2) Complexity, (3) Calmness, (4) Initial Reaction to Strangers, (5) Intuition, (6) Best Friend, (7) Rationality, and (8) Seriousness.

Each respondent received a score on each of the eight factors. Then each respondent was classified according to his theoretical orientation and a one way analysis of variance was run on each of the eight factors. Scheffe's (1977) post hoc procedure was then used to identify significant differences between groups. (Walton, 1978, p. 391)

Analysis of variance on each of the eight factors yielded three items that discriminated among therapists theoretical orientation: (1) Complexity (p = .059), (2) Seriousness (p = .048), (3) Rationality (p = .059). On both Complexity and Seriousness, the critical difference was between rational-emotive and psychodynamic therapists, with psychodynamics viewing themselves as more serious and more complex. On Rationality, rational-emotive therapists were significantly higher.
than eclectic therapists. No other factors approached the .05 level of significance.

Walton's results demonstrate that groups of therapists have similar self-concept variables as measured by a semantic differential technique. Behaviorists were typically low in intuition when compared with the other orientations, rational-emotive therapists were high on rationality and low on complexity, psychodynamics were typically high on all factors, and eclectics were distributed throughout the descriptions, though they were rather low on the Rationality factor.

Chwast (1978) believed that choice of theoretical orientation was related to two conditions, opportunity and choice. He believed that "personality factors were very influential in their choices, but by no means did these seem to be the most determining ones" (p. 375). He felt that both choice and opportunity needed to be present for a therapist to choose an orientation. Chwast administered an eight-item questionnaire to "five colleagues who have had considerable practice as psychotherapists" (p. 376). The questionnaire was designed to explore to what extent the factors of choice and opportunity interacted in selection of theoretical orientation. Though he admits his sample size was small, he concluded that: "All of the psychologists interviewed saw their personalities influencing their choice of theoretical orientation or practice of therapy" (p. 379). He goes on to state, "Most also considered personality as more significant in this regard than opportunity" (p. 380).

Mendelsohn (1966) studied the relationship between the length of counseling and client and counselor personality conguence. Using the
MBTI to determine similarities and differences between clients and counselors and number of counseling sessions as the measure of length of counseling, Mendelsohn used analysis of variance to test the prediction that "Similarity between client and counselor leads to a greater number of counseling sessions" (p. 228). Similarity in MBTI personality type yielded an F of 5.44 (p< .05) while Client Type and Interaction yielded non-significant scores. Mendelsohn (1966) stated: "It is a tenable hypothesis that who the client is is of less significance to counseling than with whom he is matched" (p. 234).

Validity of the Myers-Briggs Type Indicator

Richek & Bown (1968) performed both a univariate and canonical correlation of the four MBTI preference scores: (1) Extraversion-Introversion (E-I), (2) Sensing-Intuition (S-N), (3) Thinking-Feeling (T-F), and (4) Judging-Perceiving (J-P), with the nine variables on the Bown Self-Report Inventory (SRI): (1) others, (2) self, (3) work, (4) children, (5) hope, (6) authority, (7) parents, (8) reality, (9) total score. The SRI was designed as a self-assessment instrument "in which subjects can record their own perceptions and feelings toward themselves and significant areas of their phenomenal worlds" (p. 59). The SRI consists of 48 items which represent the eight variables of the subject's phenomenal world. The eight items, as described by Richek & Bown (1968) are:

1. Self. Items express acceptance, liking and valuing of oneself--or the opposite.
2. Others. Items express acceptance, liking or valuing of peers or the importance of satisfactory relationships with peers to one's own sense of well-being—or the opposite.

3. Children. Items express acceptance, liking or valuing of children or the satisfaction derived by the subject in relationships with children—or the opposite.

4. Authority. Items express acceptance, liking or valuing of older persons outside the family who are in positions of authority with respect to the subject—or the opposite.

5. Work. Items express a valuing of work or accomplishment in terms of its intrinsic or self-enhancing satisfaction to the subject—or the opposite.

6. Reality. Items express acceptance or valuing of life as a process (including death) and feeling at home in, and relatively comfortable with a not always predictable world—or the opposite.

7. Parents. Items express acceptance or valuing of one's own relationship with parents to his own sense of well-being—or the opposite.

8. Hope. Items express an optimistic anticipation of the future or a sense of confidence that one will play a significant and satisfying role in future relationships and undertakings—or the opposite.

9. Total. The sum of all subscores which may be construed as the positiveness of the respondent's perceptions of his phenomenal world. (pp. 59-60)

Results of the univariate correlations showed that six of the nine SRI variables correlate at the .005 level of confidence with the E-I preference scores; four SRI scales correlate at the .025 level with S-N; three SRI at .025 with J-P; and only one SRI variable correlates at .025 with the T-F dichotomy. Richek & Bown state that, "Aside from those existing among the SRI variables and the extraversion/introversion scores, the eight statistically univariate correlations obtained in this study are deemed too low to possess predictive value in individual situations" (p. 61).
As a result of their investigations, Richel & Bown (1968) state: "The data of this study provide empirical evidence for the viability of the Myers-Briggs measures of the sensation/intuition and judging/perceiving typologies" (p. 63). They conclude: "Construct validity of both the SRI and the Myers-Briggs were supported by the data of this study" (p. 64).

Using "Second-Order factor structure of the MBTI," Strieker and Ross (1964b) used a 32 x 32 interfactor correlation matrix and found, "The four factor adequacy coefficients were each greater than .95" (p. 150). They conclude: "The results of this study support the construct validity of the Myers-Briggs Type Indicator" (p. 153).

Bradway (1964) correlated subject's MBTI scores with their scores on the Gray-Wheelwright Questionnaire, another instrument designed to identify Jungian personality types. The Gray-Wheelwright is similar to the Myers-Briggs in that it uses continuous scores to assign subjects to type categories; however, it has no J-P scale. Comparing scores on the two instruments, Bradway found that 95% received the same E-I classification, 75% the same S-N classification, 72% the same Thinking-Feeling (T-F) classification, and 54% of all subjects received identical classifications on all three dimensions on both tests. The proportion of agreement between the tests was significant at the .05 to the .001 level.

Strieker and Ross (1964b) also compared continuous scores of the two Jungian personality tests (Gray-Wheelwright and Myers-Briggs), using a sample of 47 male college students. They found correlations
of .79 (E-I), .58 (S-N), and .60 (T-F), and state, "All the product-moment correlations between the continuous scores for the corresponding scales on the two inventories were significant (p< .01)" (p. 628).

In a study by Ross (1966), factor analysis was used to correlate a variety of tests (36 in all) to the MBTI. Subjects were 319 male and 252 female high school students living in Massachusetts. Following the testing, "Intercorrelations were compared and a principal axis factor analysis carried out for the male and female groups separately" (p. 3). Ross found that commonality values "computed from their loadings on the nine factors common to the indicator and the other areas" (p. 13) ranged from .15 to .45 for males and from .25 to .56 for females. After conducting a number of predictive studies of the Myers-Briggs and other personality related factors, Ross concludes: "The results are consistent with an implication of Myers' theoretical position (and Jung's) that the variables E-I, S-N, T-F, and J-P are fundamental and connected with many aspects of personality, cognition and behaviour" (p. 13).

In a review of the literature, Carlyn (1977) cites numerous studies of scale validity and concludes: "The individual scales of the Myers-Briggs Type Indicator measure important dimensions of personality which seem to be quite similar to those postulated by Jung" (p. 471).

Carlson & Levy (1973) studied various aspects of the MBTI. They hypothesized that "introverted thinking" (IT) types as measured by the MBTI would be more effective in remembering "internalized, neutral
stimulus material" (p. 564), such as Digit Span tests while "extra­
verted feeling" (EF) types on the MBTI would be more effective in
remembering "novel, social, emotionally-toned stimulus material" (p.
564), such as the recognition of facial expressions. Using the Mann­
Whitney U test, IT types were significantly (p< .002) superior on the
Digit Span, while EF types were more accurate (p< .002) in the
recognition of facial expressions.

An ANOVA was also completed, and differences in Digit Span
(F=4.61, p< .05) and Memory for Faces (F=4.72, p< .05) demonstrated
significant differences. In a subsequent study Carlson (1980),
confirmed the differences between IT and EF types with respect to
"qualities of affective memory" (p< .025) (p. 805).

Carskadon & Knudson (1978), in comparing Myers-Briggs results with
O. J. Harvey's "This I Believe" test for conceptual systems, used chi­
square analyses for each MBTI scale. They state, "The analysis showed
significant findings on the Sensing/Intuition scale of the MBTI" (p.
485).

Cohen, Cohen, & Cross (1981) studied the construct validity of the
MBTI by having friends, relatives, or the subjects themselves, fill out
a Behavioral Style Inventory (BSI) and then take the MBTI. The stated
rationale: "If the typology exists, it should be recognizable by the
individuals themselves and by close friends or relatives" (p. 885).

Using the coefficient of agreement, Kappa, for nominal data, the
relationship between spouse appraisal of personality type and actual
types as measured by the MBTI all showed significant positive values
(E-I, Kappa=.70, p< .001; T-F, Kappa=.78, p< .001; S-N, Kappa=.43, p< .01). The J-P scale (Kappa=.08, p=ns) did not demonstrate a significant relationship. Cohen et al. conclude: "These three scales, E-I, S-N, T-F therefore received construct validational support" (p. 890).

**Reliability of the Myers-Briggs Type Indicator**

Stricker and Ross (1963) estimated internal-consistency of continuous scores to range from .34 to .73, and correlations for continuous scores ranged from .64 to .84.

Test-retest reliabilities by Stricker and Ross (1964a) for continuous scores were .73 (E-I), .69 (S-N), .48 (T-F), and .69 (J-P); all were significant (p< .01).

Stricker and Ross (1964b) also performed product-moment correlations between continuous scores for corresponding scales on the MBTI and the Gray-Wheelwright Psychological Type Questionnaire, an instrument used to measure Jungian personality types. All of the correlations were significant (p< .01), with correlations ranging from .58 (S-N), .60 (T-F), .79 (E-I), and .41 (J-P).

Tzeng, Outcalt, Boyer, Ware & Landis (1984) found alpha coefficients for MBTI scales to range from .74 to .85. Using correlations computed from the subject's scores on the eight preferences of the MBTI scales (E-I, S-N, T-F, J-P), they found there was "a strong (negative) relationship (r=-.84, p< .001) between the two dichotomous poles of each MBTI dimension" (p. 255).
Howes & Carskadon (1979) found reliability coefficients of .82 (E-I), .87 (S-N), .78 (T-F), and .81 (J-P) for continuous MBTI scores under conditions of artificially induced mood swings. They state, "The results of the present study were extremely supportive of the reliability of the MBTI" (p. 71).

McCarley & Carskadon (1983) reported 5-week test-retest reliabilities of continuous scores ranging from .77 to .89, depending on the scale.

Leiden, Veach & Herring (1986) compared scores of medical students on the long and short forms of the MBTI and found scale reliabilities of .41 (T-F), .63 (S-N), .64 (E-I), and .66 (J-P).

Inclan (1986) found split-half reliabilities of .77 to .97 on different language versions of the MBTI given to bilingual students.

Carskadon (1977) performed test-retest reliabilities of continuous scores on the MBTI using an eight-week interval. Pearson r formula calculations were used with separate scores for males and females. Coefficients ranged from .56 (males T-F) to .87 (females J-P) with all scores significant to the .01 level.

Webb (1964), using phi coefficients with the Spearman-Brown prophecy formula reported coefficients of .58 (E-I), .64 (S-N), .68 (T-F for boys), .43 (T-F for girls), and .84 (J-P).

Carlyn (1977) reported tetrachoric coefficients ranging from .70 to .81 (E-I), .82 to .92 (S-N), .66 to .90 (T-F), and .76 to .84 (J-P). She also reported split-half and Cronbach's Coefficient Alpha that yielded coefficients ranging from .76 to .82 (E-I), .75 to .87 (S-N), .69 to .86 (T-F), and .80 to .84 (J-P).
Levy, Murphy, & Carlson (1972) conducted three test-retest reliability studies which yielded coefficients for continuous scores ranging from .73 to .83 (E-I), .69 to .78 (S-N), .48 to .82 (T-F), and .69 to .82 (J-P). All of these scores are "statistically reliable" (p. 644).
CHAPTER III

METHODOLOGY AND PROCEDURES

Introduction

This research was designed to determine if a relationship exists between the personality traits of practicing therapists as measured by the Myers-Briggs Type Indicator (MBTI) and their expressed theoretical orientation. The hypothesis of this project was that such a relationship exists. To test this hypothesis, therapists were given both the MBTI and a questionnaire to fill out. From the information gathered, relationships between personality types and theoretical orientation were analyzed.

There is some evidence that "therapists select techniques and theories because of who they are as persons; the therapy strategies are manifestations of the therapist's personality" (McConnaughy, 1987, p. 303). Added to this are those studies which suggest that success in therapy is more dependent upon the therapeutic relationship between client and therapist than it is on a particular theoretical orientation (Smith & Glass, 1977).

Research Design

Practicing therapists selected at random were given two instruments to complete. The first was the MBTI, Form G, and the second a short questionnaire (Appendix A). The questionnaire gathered
demographic information as well as the therapist's preference for six theoretical orientations: (1) psychodynamic, (2) behavioral, (3) cognitive, (4) person-centered, (5) existential, and (6) developmental. Each theoretical orientation was defined and explained with a short description, and one or two major theoreticians were identified who historically have been closely linked with that particular orientation.

It is noted there is no separate category for those therapists who define themselves as "eclectics." Though some sources indicate as many as 50% of therapists identify themselves as eclectic (Garfield & Kurtz, 1977), most estimates seem to be in the 30-35% range (Prochaska & Norcross, 1983). Instructions to subjects indicated that therapists who consider themselves eclectic were to choose the one therapeutic orientation out of which they most frequently operate.

"Practicing therapist" is defined as one who has been employed full time for at least twelve months for the purpose of doing psychotherapy, or who has worked at least 20 hours per week for at least two years. At least one-half of their therapeutic time must be spent doing individual psychotherapy. The minimum level of education was a Masters Degree.

The null hypothesis states there is no difference between the scores on the MBTI of the six theoretical orientations, while the alternative hypothesis states that at least two of the six theoretical orientations will differ at the .05 level of significance.
Subjects

Therapists were selected from a number of mental health agencies, psychiatric hospitals, and private practitioners that live and work within an approximate 50 mile radius of Kalamazoo, Michigan. The writer presented the research project to these various agencies and groups. Participation in the project was completely voluntary. The following organizations participated: Kalamazoo Consultation Center, Family and Children Services of Kalamazoo, Gateway Villa (Kalamazoo, Michigan), Battle Creek Adventist Hospital, and Pine Rest Christian Hospital in Grand Rapids, Michigan. A number of private practitioners also participated.

A total of 62 therapists participated in the research.

The Myers-Briggs Type Indicator

Selection of the Myers-Briggs Type Indicator

The MBTI was used to determine personality type of the subjects. The selection of the MBTI was predicated on several considerations:

1. The MBTI is a short and relatively easy test to administer for determining differences in personality. The Manual for the MBTI estimates the test can be completed in approximately 30 minutes (Myers & McCaulley, 1985).

2. The personality classifications are non-pathological and therefore likely less threatening to test takers than those of other personality tests, for example, the Minnesota Multiphasic Personality Inventory (MMPI).
3. The MBTI is widely used in a variety of applications (Dilley, 1987; Handley, 1982; and Pinkney, 1983).

4. The MBTI has been extensively researched regarding reliability and validity (Bradway, 1964; Carlson, R., 1971; Carskadon & Knudson, 1978; DeVito, 1985; Mendelsohn, 1965; Richek & Bown, 1968; Siegel, 1963; and Stricker & Ross, 1963). All support its use. Carlson, R. (1980) states: "This instrument (MBTI) has established an impressive record of reliability and validity" (p. 802). Mendelsohn (1965) states, "The reviewer considers the instrument of considerable potential utility" (p. 147).

5. The MBTI can be both hand and machine scored (Myers & McCaulley, 1985). This consideration is important when gathering data over a period of time.

6. The MBTI measures four broad categories: (1) Extraversion-Introversion (E-I), (2) Sensing-Intuition (S-N), (3) Thinking-Feeling (T-F), and (4) Judging-Perceiving (J-P). Sixteen personality types based on these four categories have been developed (Appendix B).

7. All of the MBTI personality descriptions are positive in nature, and are seen in that light by the designers of the MBTI (Lawrence, 1982; Sundburg, 1965).

8. The MBTI is based upon the observations of "normal," that is, non-pathological individuals (Gray, 1949a). DeVito (1985) states: "The MBTI is probably the most widely used instrument for non-psychiatric populations in the areas of clinical, counseling, and personality testing" (p. 1030).
9. The MBTI personality categories are free of moral implications; no personality type is considered better than any other (Dilley, 1987; Gray, 1949a; Gray & Wheelwright, 1945).

10. Personality types are not affected by intelligence (Bruhn, Bruce, & Greaser, 1978; Gray, 1949a).

**Description of the Myers-Briggs Type Indicator**

The MBTI, Form G, is a self-report, forced-choice inventory of 126 items. The MBTI is based on C. G. Jung's theory of personality (Jung, 1971), and was developed to measure the variables in Carl Jung's personality typology (Carlyn, 1977). Lawrence (1982) describes psychological types as patterns in the way people prefer to perceive and make judgements, and are essentially the equivalent to the common interpretation of personality. "Jung believed that three basic polarities in the human psyche in fact define an individual's personality" (Buchanan & Taylor, 1986, p. 391). These patterns are divided into various mental processes which are measured by the MBTI.

The questions in the MBTI were chosen to represent the day to day differences in preferences which reflect Jung's basic personality types.

The MBTI is based on Jung's theory that most human behavior is not random, but orderly and consistent. "The underlying assumption is that every person has a natural preference for one or the other pole on each of four indices, analogous to a natural preference for right-or left-handedness" (Carlyn, 1977, p. 461).
Each choice in the MBTI was designed to be attractive to the types most likely to use it. The items ask which of two equally desirable ways to function an individual would prefer. Most people answer the questions according to their preference. By that is meant that a type describes how a person prefers to use his processes of perception and judgement, not that he or she could not act differently than their preferred type.

The MBTI has been widely used in a variety of business, educational and counseling settings. Mendelsohn & Geller (1963) demonstrated that client/counselor similarity as measured by the MBTI affects the outcomes of therapy. It has also been used as an instrument to measure attitudes about counseling (Mendelsohn, 1965); as a predictor of college performance (Stricker, Schiffman & Ross, 1965) and college majors (Goldschmid, 1967; Hart, 1982); as a tool to demonstrate differences in reading ability (Millott, 1974); to measure personality similarities between supervisors and supervisees (Handley, 1982); as a tool in career counseling (Pinkney, 1983); in aspects of counselor education programs (Dilley, 1987); and as an educational instrument in school systems (Lawrence, 1982).

The MBTI measures four scales: (1) an attitude scale of Extraversion-Introversion (E-I); (2) a preferred mode of perceiving, Sensation-Intuition (S-N); (3) a preferred mode of judging, Thinking-Feeling (T-F); and (4) a preferred way of dealing with the outer world, Judging-Perceiving (J-P).

The E-I index was designed to measure one's preferred attitude or orientation to life. The extravert orients primarily to the outer
world of people and things and tends to get caught up with what is happening around them (Carlyn, 1977). The extravert's primary orientation is outward; the extravert likes variety and action, and likes to have people around. Introverts give characteristic attention to subjective experience, to the inner world of concepts and ideas. They tend to be detached from the world around them (Carlyn, 1977). The introvert tends to think before taking action, and works contentedly alone.

The S-N index was designed to measure the individual's preferred way of perceiving things. Sensing types pay attention to the perceptions received through the sensory organs and prefer to deal with objective facts and concrete details. They prefer to use their five senses to find out about what is actually in the world. They are able to notice all the observable facts and "tend to become realistic, practical, observant" (Lawrence, 1982, p. A-2). They prefer to deal with objective facts and concrete details. Intuitive types tend to look at events in terms of their meanings, relationships, and possibilities. "If you like intuition...you grow expert at seeing a new possibility or solution. You tend to value imagination and inspiration" (Lawrence, 1982, p. A-2). They prefer to pay attention to the subliminal aspects of perceptions and tend to prefer abstractions and hunches.

The T-F index was designed to measure an individual's preferred way of judging or making decisions. Thinking types rely on an objective decision-making process using logical deduction and
induction. They prefer to use logic and rational analysis while impersonally judging whether something is true or false. "You tend to make your decisions by analyzing and weighing the facts, including the unpleasant ones" (Lawrence, 1982, p. A-2). Feeling types, on the other hand, rely on a subjective decision-making process which is produced by personal value judgements. They prefer to personalize decisions and pay attention to subjective impressions. "Feeling decides on the basis of personal values" (Lawrence, 1982, p. A-2).

The fourth dimension of personality, J-P was designed to measure an individual's preferred way of dealing with the outer world. Judging types are decisive, organized, task-oriented, and systematic. Perceptive types are process-oriented, spontaneous, adaptive and curious. They tend to be more interested in process than outcome.

One's personality type is determined by the combination of preferences which describe the test-taker. There are sixteen possible combinations of the four dimensions of personality (E-I, S-N, T-F, J-P) and these combinations are indicated by using the letters of the four preferred preferences (Appendix B). As an example, the combination ISTJ would indicate an introvert who prefers sensing and thinking and who uses mainly a judging attitude toward the outer world (Myers & McCaulley, 1988).

Each of the sixteen personality types is given a detailed explanation of what the specific type is like (Appendix B). It should again be emphasized that all sixteen personality descriptions or types are seen as positive. No single type or group of types is considered better than any other.
To summarize briefly, in Jung's theory of psychological types, all conscious mental activity occurs in two perception processes (Sensing/Intuition) and two judgement processes (Thinking/Feeling). Everyone uses all four processes, but we differ in how much and how well we use each of them. In every person, one of the processes is dominant and that process indicates the basic way the person addresses life. (Lawrence, 1982, p. 12)

For use in this project, the four broad categories and the sixteen personality types were both analyzed to determine possible relationships.

Reliability/Validity

There have been many studies which speak to the reliability and validity of the MBTI. While not all of the literature is in agreement with regard to its construct validity, most of the literature is favorable. Bradway (1964), Brooks & Johnson (1979), Carlson, J. (1989a), Carlson, R. (1980), Carlyn (1977), Carskadon (1977), Coan (1978), Cohen, Cohen, & Cross (1981), DeVito (1985), Richek & Bown (1968), Siegel (1963), Sundburg (1965), Thompson & Borrello (1986), and Tzeng, et al. (1984) all lend support to the validity and reliability of the MBTI, while Healy (1989a), Sipps (1985), and Strickler & Ross (1964a), suggest some caution in its use.

Carlson, R. (1980) speaks to the issues of construct validity of the MBTI and the usefulness of the test when she says, "Results of all three studies gave unambiguous support for (the construct validity) drawn from Jungian type theory" (p. 809). She adds: "Thus the findings add to the increasing body of evidence supporting the power and generality of type theory and the value of the MBTI as a sensitive indicator of psychological type" (p. 809).
Carlson, J. (1989a) also encouraged and defended the use of MBTI. While recognizing that "more and careful assessment of the strengths and weaknesses of the instrument" (p. 486) is needed, he concludes: "Recent criterion-based assessments of the MBTI remain...generally positive" (p. 486). In the same article, he stated, "The parallels between the descriptions of the individual from the test and the individual's own self-perceptions are often nothing short of uncanny to some clients on first assessment" (p. 484).

Scoring of the Myers-Briggs Type Indicator

Because the aim of the MBTI is to determine habitual choices between opposites, the questions are in forced-choice form. Each scored item has one answer weighted in favor of the opposing preference. Different weights have been assigned to certain answers in an attempt to offset social desirability bias (Myers & McCaulley, 1962).

The MBTI can yield two types of scores for each person, a dichotomous score and a continuous score.

Type-Category Scores

To determine the person's type, the points for each preference are totaled, yielding eight numerical scores. These eight scores are interpreted as four pairs of scores, with the larger of each pair indicating the preferred pole. The result is that a person is classified as one of sixteen possible types: ISTJ; ISFJ; INFJ; INTJ; ISTP; ISFP; INFP; INTP; ESTP; ESFP; ENFP; ENTP; ESTJ; ESFJ; ENFJ; ENTJ. (Appendix B).
Continuous Scores

Continuous scores are converted from the subject's preference scores by either subtracting the preference score from 100 (for the E, S, T, J variables), or by adding the preference score to 100 (for I, N, F, P variables) (Appendix E).

Intercorrelations of MBTI Scores

Many researchers have investigated the relative independence of the four scales of the MBTI by computing intercorrelations between the scales. In some cases, MBTI scores have been treated as dichotomous type categories and in other cases as continuous data.

Intercorrelations of Type-Category Scores

The relative independence of the dichotomous MBTI type categories was examined by Sticker & Ross (1963) and Webb (1964). In both cases, phi coefficients were used to estimate the intercorrelation among type categories. The results reveal a significant correlation between the S-N category and the J-P category (p < .01), indicating that sensors tend to be judging types and intuitors tend to be perceptive types. The E-I, S-N and T-F indices appear to be fairly independent of each other.

Intercorrelations of Continuous Scores

Testing both high school and college freshmen students, and dividing the results of male and female students thereby getting four
groups. Stricker & Ross (1963) found that phi coefficients ranged from .00 (S-N, T-F) to .31 (J-P, S-N) with only the J-P scale showing significant intercorrelations with S-N scale in all four groups, and with T-F in two groups (high school males and females) and with E-I in one group (college males).

Product-moment correlations between the continuous scores for pairs of scales were similar to the phi coefficients. Again, all the significant (p< .05) correlations involved the J-P scale, significantly related to the S-N in all four groups (correlations from .26 to .47), and to the T-F scale in three of the four groups (ranging from .18 to .20). The data indicate that E-I, S-N and T-F scales are independent of each other, with the J-P scale moderately related to the S-N and T-F scales.

Carlyn (1977) presents the results of 12 studies of the intercorrelations of continuous MBTI scores. The results are similar to the type-category results. The E-I, S-N and T-F scales appear to be relatively independent of each other, and the S-N scale appears to correlate consistently with the J-P scale. In many of these studies a significant correlation was also found between the T-F and J-P scales. Carlyn (1977) states:

Taken together, the findings with both type-category scores and continuous scores indicate that the Myers-Briggs Type Indicator measures three dimensions of personality which are relatively independent of each other: extraversion-introversion, sensation-intuition, and thinking-feeling. The instrument also measures a fourth dimension of personality, judgment-perception, which appears to be related to at least one of the other dimensions. (p. 463)
Reliability of the MBTI

Phi coefficients for type-category scores ranging from .55 to .65 (E-I), .64 to .73 (S-N), .43 to .75 (T-F), and .58 to .84 (J-P) have been reported (Myers & McCaulley, 1985; Webb, 1964). Using split-half reliabilities by calculating tetrachoric correlation coefficients and then using the Spearman-Brown prophecy formula scores have been reported ranging from .70 to .81 (E-I), .82 to .92 (S-N), .66 to .90 (T-F), and .76 to .84 (J-P) (Myers & McCaulley, 1985).

For continuous scores, using split-half procedures and Cronbach's Coefficient Alpha, coefficients ranging from .76 to .82 (E-I), .75 to .87 (S-N), .69 to .86 (T-F), and .80 to .84 (J-P) were found (Myers & McCaulley, 1985).

Test-retest reliability coefficients for continuous scores in Levy, et al. (1972) range from .73 to .83 (E-I), .69 to .78 (S-N), .48 to .82 (T-F), and .69 to .82 (J-P). They state: "The results of this study give considerable support for the use of the Myers-Briggs Type Indicator as a psychometrically stable instrument capable of reflecting important group differences" (p. 652). Webb (1964) found Spearman Brown prophecy reliabilities of .58 (E-I), .64 (S-N), .68 (T-F boys), .43 (T-F girls), and .84 (J-P).

McCarley & Carskadon (1983) found test-retest reliability coefficients for continuous scores of .86 (E-I), .85 (S-N), .77 (T-F), and .89 (J-P), and comment, "The test-retest reliabilities appear to be satisfactory" (p. 34).
Carlyn (1977) reports that test-retest data for MBTI type-category scores are "significantly higher than would be expected by chance" (p. 465). For continuous scores, she reports test-retest data "were all significant at the .01 level and appear reasonable for a self-report inventory" (p. 467).

The literature seems to support the validity and reliability of the MBTI as a useful instrument with which to measure personality types. It has been used for many years as an instrument of comparison and prediction, and appears appropriate for use in this project.

Procedures

Data Collection

The questionnaire, MBTI booklets and answer sheets, and stamped, self-addressed envelopes for the return of the information were distributed in person by the researcher to the various groups of potential subjects. The research project was explained and questions answered at that time. The following information was presented in a systematic and standardized manner:

1. The purpose and hypothesis of the research.

2. Participation was completely voluntary; each subject was free to participate or not.

3. The subjects were to choose a number, letter, or some combination of numbers and letters with which to identify that answer sheet and the questionnaire, thereby insuring anonymity and confidentiality.
4. The subjects were provided a stamped, self-addressed envelope with which to return completed information to the writer.

5. Questions presented by the subjects were answered. Data was collected by means of the stamped, self-addressed envelopes which were handed out at the time the researcher met with groups of potential subjects. The only identification used was the unique combination of numbers and letters which subjects selected and which were known only to them.

When therapists were not available to meet at one time within an agency, the material was distributed with a cover letter (Appendix D) which presented the same information to the subjects as the verbal presentation. Approximately 125 packets of information were distributed.

Data Analysis

Data was analyzed by means of the Kruskal-Wallis one-way analysis of variance by ranks.

For this project continuous scores were ranked in the application of the Kruskal-Wallis one-way analysis of variance test. These continuous scores ranged in value from 33 to 167 for each of the four dichotomous personality categories (E-I, S-N, T-F, J-P). In the event of ties, the tied scores were assigned the average of the ranks they would otherwise occupy.

Data was analyzed by the Western Michigan University VAX computer system utilizing the SPSSx program. By inserting the data into the
Kruskal-Wallis formula, the value of $H$ was determined. When $H$ had been determined, a table of $H$ values was used to determine if the value of $H$ was significant at the .05 level.

**Methodological Assumptions**

The assumption was made that subjects were honest in submitting their data and did not purposely skew their personality profiles. It was assumed that presenting the project to the subjects in person encouraged greater participation in the study than would a random mailing. A final assumption was that the six theoretical orientations offered as choices were distinct from each other.

**Limitations of the Study**

The MBTI is easily skewed, particularly by those to whom it is familiar (Braun, 1965), and there is some question as to the construct validity of the test (Stricker & Ross, 1964a), though most of the evidence supports its use. In addition, this research study provides six possible choices of theoretical orientation; more or less are possible.

It might have been well to draw from a wider geographical area, since all subjects worked within a 50-mile radius of Kalamazoo, Michigan. It is noted that the theoretical category "eclectic" was not used in this study, though 30-50% of therapists place themselves within that category (Prochaska & Norcross, 1983). Therapists that consider themselves eclectic were asked to choose one of the six orientations.
The contamination of research by the subject's expectations appears inevitable (Carlson, R., 1971). If the researcher makes known to the subjects the hypothesis of the study (which this project did), subjects may unconsciously try to give the researcher what he wants. No resolution to the dilemma is offered and honesty in this regard seems worth the risk and is more satisfactory than conducting a manipulative or deceptive study. R. Carlson (1971) states: "For that violation of human dignity experienced by subjects in manipulative-deceptive relationships equally demeans the psychologist who adapts to a norm of distrust, and come to confuse games with the pursuit of science" (p. 210).

Need and Rationale for the Present Study

Some of the drawbacks seen in the other studies mentioned, and some of the reasons this project is seen as unique include the following:

1. Generally only two theoretical orientations are studied, as seen in the Carter (1982) study in which "humanistic" and "behavioral" were examined, or the Zimrostrad (1987) study using only "behaviorism" and "psychoanalytic." This study differentiated among six separate orientations.

2. There have been a very limited number of studies conducted in the same vein as the present study. Most of these are at least ten years old.
3. A limited number of subjects in some studies, such as Chwast (1978), in which only five subjects were included in the research. Additionally, topics such as how therapists choose their own therapist (Buckley, Karasu & Charles, 1981; Grunebaum, 1983); how a behaviorist views the therapeutic relationship (Lazarus, 1985); how counselor education programs can teach new therapists to be too passive within therapy (Roskin & Rabiner, 1976); and the purpose of the first therapeutic session (Marguiles & Havens, 1981), impact upon this research.

There are a significant number of studies on the topics of how to make therapy more effective and how to test the outcomes of therapy to determine if a proposed treatment modality is more effective than others. It seems to be accepted that therapy works (Fiedler, 1950; Smith & Glass, 1980; Stiles, et al., 1986), but the how or why is not so certain. This study seeks to add to the body of information regarding why therapists do what they do in therapy.
CHAPTER IV

ANALYSIS AND EVALUATION

This chapter is composed of two sections. In the first section the statistical analysis of the data is explained. In the second section, the hypothesis is evaluated according to the results of the analysis.

Analysis

The design for this study consisted of analyzing the relationship between scores on the MBTI personality tests and choice of theoretical orientation. The hypothesis suggested was that therapist personality is related to selection of theoretical orientation.

A Kruskal-Wallis one-way analysis of variance was calculated and the level of significance was set at .05. Chi-square analyses were calculated for the four personality variables detailed in the Myers-Briggs Type Indicator to determine the relationship between subjects' personality type variables and their theoretical orientation. Crosstab tables and other descriptive statistics were developed for presentation.

Results

The data for the Myers-Briggs Type Indicator are summarized in Table 1. The total N = 62.
Table 2 reports the data for therapist self-selection of theoretical orientation. The mean age of participants was 41.5 years and mean years of experience 10.4 years.

Table 1
Personality Variables of the Myers-Briggs Type Indicator

<table>
<thead>
<tr>
<th>Type Variables</th>
<th>N</th>
<th>%</th>
<th>Type Variables</th>
<th>N</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>E</td>
<td>31</td>
<td>50</td>
<td>ISTJ</td>
<td>3</td>
<td>4.84</td>
</tr>
<tr>
<td>I</td>
<td>31</td>
<td>50</td>
<td>ISTP</td>
<td>0</td>
<td>0.00</td>
</tr>
<tr>
<td>S</td>
<td>12</td>
<td>19</td>
<td>ESTP</td>
<td>0</td>
<td>0.00</td>
</tr>
<tr>
<td>N</td>
<td>50</td>
<td>81</td>
<td>ESTJ</td>
<td>1</td>
<td>1.61</td>
</tr>
<tr>
<td>T</td>
<td>19</td>
<td>31</td>
<td>ISFJ</td>
<td>1</td>
<td>1.61</td>
</tr>
<tr>
<td>F</td>
<td>43</td>
<td>69</td>
<td>ISFP</td>
<td>2</td>
<td>3.73</td>
</tr>
<tr>
<td>J</td>
<td>44</td>
<td>71</td>
<td>ESFP</td>
<td>0</td>
<td>0.00</td>
</tr>
<tr>
<td>P</td>
<td>18</td>
<td>29</td>
<td>ESFJ</td>
<td>5</td>
<td>8.06</td>
</tr>
<tr>
<td>INFJ</td>
<td>7</td>
<td>11.29</td>
<td>ENFP</td>
<td>4</td>
<td>6.45</td>
</tr>
<tr>
<td>INFP</td>
<td>9</td>
<td>14.52</td>
<td>ENFJ</td>
<td>15</td>
<td>24.19</td>
</tr>
<tr>
<td>INTJ</td>
<td>9</td>
<td>14.52</td>
<td>ENTP</td>
<td>3</td>
<td>4.84</td>
</tr>
<tr>
<td>INTJ</td>
<td>9</td>
<td>14.52</td>
<td>ENTP</td>
<td>3</td>
<td>4.84</td>
</tr>
</tbody>
</table>

Note. E = Extraversion; I = Introversion; S = Sensing; N = Intuition; T = Thinking; F = Feeling; P = Perceiving; J = Judging.

It is noted in Table 2 that more than 40% of all therapists participating in this study identify themselves as Psychodynamic therapists. When therapists who identify themselves as Cognitive (29%)
and Developmental (19.4%) are added, 88.7% of all therapists in this study fall into three theoretical orientations.

Table 2

<table>
<thead>
<tr>
<th>Theoretical Orientation</th>
<th>N</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Psychodynamic</td>
<td>25</td>
<td>40.3</td>
</tr>
<tr>
<td>Behavioral</td>
<td>2</td>
<td>3.2</td>
</tr>
<tr>
<td>Cognitive</td>
<td>18</td>
<td>29.0</td>
</tr>
<tr>
<td>Person-Centered</td>
<td>3</td>
<td>4.8</td>
</tr>
<tr>
<td>Existential</td>
<td>2</td>
<td>3.2</td>
</tr>
<tr>
<td>Developmental</td>
<td>12</td>
<td>19.4</td>
</tr>
</tbody>
</table>

Analysis of Hypothesis

The hypothesis of this study was concerned with the relationship between therapist's self-selection of theoretical orientation and their personality as measured by the Myers-Briggs Type Indicator (MBTI). It was hypothesized that personality influenced selection of theoretical orientation, and therefore therapists with similar personality types would choose similar theoretical orientations.

H0: There are no significant differences between the MBTI continuous scores of behavioral, cognitive, psychodynamic, existential, developmental, and person-centered therapist populations.
H₀: There is a difference between the MBTI continuous scores of at least two of behavioral, cognitive, psychodynamic, existential developmental, and person-centered therapist populations.

The H obtained by the Kruskal-Wallis one-way analysis of variance (H = 10.362) was not significant at the .05 level. The level of significance was .4981 with 11 degrees of freedom.

Since the analysis of variance was found to yield nonsignificant results, the null hypothesis of no difference may not be rejected. This research project did not demonstrate a significant relationship between theoretical orientation and personality.

Additional Kruskal-Wallis analyses of variance tests were conducted with other variables. The relationship between theoretical orientation and degree (M.A./Ed.D.-Ph.D.), gender, age, years of experience, and type of degree (Psychology, Social Work, Counseling) were all tested. None of the analyses yielded significant results at the .05 level. Crosstabs and chi-square analyses were conducted on a wide variety of variables and relationships. None demonstrated significance at the .05 level.

Though none of the four dichotomous variables of the MBTI, (1) Extraversion-Introversion, (2) Sensing-Intuition, (3) Thinking-Feeling, and (4) Judging-Perceiving, were found to be statistically significant in relation to theoretical orientation, the variables of Judging-Perceiving (J-P) and Thinking-Feeling (T-F) were found to be more closely related to theoretical orientation than variables Sensing-Intuition (S-N) and Extraversion-Introversion (E-I). This confirms the findings of Levin (1979) who reported that the T-F and J-P dimensions
of personality type were statistically significant in differentiating among theoretical orientations. When considering the eight individual variables, (1) Extraversion, (2) Introversion, (3) Sensing, (4) Intuition, (5) Thinking, (6) Feeling, (7) Judging, and (8) Perceiving, the Thinking (T), Perceiving (P), and Sensing (S) variables were found to be more closely related to theoretical orientation than the other variables. None of the H values for dichotomous or individual variables were significant at the .05 level.

An examination of the six theoretical orientations with respect to the eight individual personality variables (E, I, S, N, T, F, J, P) shows that Cognitive therapists appear to be more Judging (J) when compared with the overall sample (83% compared with 71%). As described by Myers & McCaulley (1985), the Judging attitude is a person who is "concerned with making decisions, seeking closure, planning operations, or organizing activities" (p. 14). A person with this personality dimension "probably likes a planned, decided, orderly way of life better than a flexible, spontaneous way" (p. 54).

Developmental therapists appear to prefer Feeling (F) and Intuition (N) when compared with the overall sample (92% compared with 81% for F, and 92% compared to 69% for N). Myers & McCaulley (1985) in their Manual describe the Feeling dimension as being characteristic of a person who "relies on an understanding of personal values and group values" (p. 12), and "they have an understanding of people, a concern with the human as opposed to the technical aspects of problems, a need for affiliation, a capacity for warmth..." (p. 13). The other
orientations were less clear in their personality dimensions. Myers & McCaulley describe a person who prefers to use Intuition as "one who looks for possibilities and relationships; they are imaginative, creative, abstract" (p. 12). Table 3 illustrates these results and also points out that 83% of all subjects prefer Intuition compared with Sensing.

Table 3

<table>
<thead>
<tr>
<th>MBTI Preferences by Theoretical Orientation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Theoretical Orientation</td>
</tr>
<tr>
<td>---------------------------------------------</td>
</tr>
<tr>
<td>Orientation</td>
</tr>
<tr>
<td>---------------------------------------------</td>
</tr>
<tr>
<td>Psychodynamic</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>Behavioral</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>Cognitive</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>Person-centered</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>Existential</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>Developmental</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>Total</td>
</tr>
<tr>
<td></td>
</tr>
</tbody>
</table>

Note: E = Extraversion; I = Introversion; S = Sensing; N = Intuition; T = Thinking; F = Feeling; P = Perceiving; J = Judging.

Table 4 reports demographics of the six theoretical orientations with respect to degree, type of degree, gender, and mean age of the
sample. Thirty-six of 40 males (90%) identified their theoretical orientation as either Psychodynamic or Cognitive, while 19 of 22 female participants (86.4%) identified their theoretical orientation as either Psychodynamic or Developmental. These three orientations, Psychodynamic, Cognitive, and Developmental together account for 55 of 62 participants or 88.7%.

Table 4
Theoretical Orientation by Degree, Type of Degree, Gender, Age

<table>
<thead>
<tr>
<th>Degree</th>
<th>Kind of Degree</th>
<th>Gender</th>
<th>Age</th>
</tr>
</thead>
<tbody>
<tr>
<td>Theoretical</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Orientation</td>
<td>M.A./</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Doc.*</td>
<td>Psychology/</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Soc. Work/</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Counseling</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Psychodynamic</td>
<td>13/12</td>
<td>17/8</td>
<td>40.6</td>
</tr>
<tr>
<td>Behavioral</td>
<td>1/1</td>
<td>1/1</td>
<td>42</td>
</tr>
<tr>
<td>Cognitive</td>
<td>14/4</td>
<td>14/2</td>
<td>42.4</td>
</tr>
<tr>
<td>Person-Centered</td>
<td>3/0</td>
<td>1/2</td>
<td>39.3</td>
</tr>
<tr>
<td>Existential</td>
<td>2/0</td>
<td>2/0</td>
<td>49</td>
</tr>
<tr>
<td>Developmental</td>
<td>5/7</td>
<td>5/7</td>
<td>41.8</td>
</tr>
<tr>
<td>Total N</td>
<td>38/24</td>
<td>40/22</td>
<td>41.5</td>
</tr>
</tbody>
</table>

*Both Ed.D. and Ph.D. are included in this category.
**One subject listed Psychiatric Nursing in this category.

Comparisons were made of data collected in this study and data reported by Myers & McCaulley (1985) in their MBTI Manual. Three comparisons were made including type variables (E, I, S, N, T, F, J.
the sixteen personality types (Appendix B), and the most frequent personality types from each study. All of the data from Myers & McCaulley were taken from 359 individuals who classified themselves as "counselors" when taking the MBTI.

Table 5 reports the comparison of individual type variables. It is noted that percentages for the two groups appear to be similar, particularly in the E-I and T-F dichotomies.

Table 5

<table>
<thead>
<tr>
<th>Type Variable</th>
<th>Myers-Briggs Data</th>
<th>Project Data</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>N = 359</td>
<td>N = 62</td>
</tr>
<tr>
<td></td>
<td>N (% )</td>
<td>N (% )</td>
</tr>
<tr>
<td>E</td>
<td>200 (56)</td>
<td>31 (50)</td>
</tr>
<tr>
<td>I</td>
<td>159 (44)</td>
<td>31 (50)</td>
</tr>
<tr>
<td>S</td>
<td>118 (33)</td>
<td>12 (19)</td>
</tr>
<tr>
<td>N</td>
<td>241 (67)</td>
<td>50 (81)</td>
</tr>
<tr>
<td>T</td>
<td>85 (24)</td>
<td>19 (31)</td>
</tr>
<tr>
<td>F</td>
<td>274 (76)</td>
<td>43 (69)</td>
</tr>
<tr>
<td>J</td>
<td>170 (47)</td>
<td>44 (71)</td>
</tr>
<tr>
<td>P</td>
<td>189 (53)</td>
<td>18 (29)</td>
</tr>
</tbody>
</table>

Tables 6 and 7 illustrate that the similarities and differences of the two sets of data collected from the 62 subjects in this study are similar to that collected from the 359 subjects in Myers & McCaulley's study.
Table 6
Comparison of Sixteen Personality Types

<table>
<thead>
<tr>
<th>Type</th>
<th>Myers-McCaulley Data</th>
<th>Project Data</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>N = 359</td>
<td>N = 62</td>
</tr>
<tr>
<td></td>
<td>N</td>
<td>%</td>
</tr>
<tr>
<td>ISTJ</td>
<td>21</td>
<td>5.8</td>
</tr>
<tr>
<td>ISTP</td>
<td>4</td>
<td>1.1</td>
</tr>
<tr>
<td>ISFJ</td>
<td>20</td>
<td>5.6</td>
</tr>
<tr>
<td>ISFP</td>
<td>16</td>
<td>4.5</td>
</tr>
<tr>
<td>INFJ</td>
<td>28</td>
<td>7.8</td>
</tr>
<tr>
<td>INFP</td>
<td>50</td>
<td>13.9</td>
</tr>
<tr>
<td>INTJ</td>
<td>11</td>
<td>3.1</td>
</tr>
<tr>
<td>INTP</td>
<td>9</td>
<td>2.5</td>
</tr>
<tr>
<td>ESTP</td>
<td>4</td>
<td>1.1</td>
</tr>
<tr>
<td>ESTJ</td>
<td>18</td>
<td>5.0</td>
</tr>
<tr>
<td>ESFP</td>
<td>11</td>
<td>3.1</td>
</tr>
<tr>
<td>ESFJ</td>
<td>24</td>
<td>6.7</td>
</tr>
<tr>
<td>ENFP</td>
<td>84</td>
<td>23.4</td>
</tr>
<tr>
<td>ENFJ</td>
<td>41</td>
<td>11.4</td>
</tr>
<tr>
<td>ENTP</td>
<td>11</td>
<td>3.1</td>
</tr>
<tr>
<td>ENTJ</td>
<td>7</td>
<td>1.9</td>
</tr>
</tbody>
</table>
Table 7

Comparison of Most Frequent Personality Types

<table>
<thead>
<tr>
<th>Type</th>
<th>Myers-Briggs Data</th>
<th>Project Data</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Rank</td>
<td>%</td>
</tr>
<tr>
<td>ENFP</td>
<td>1</td>
<td>23.4</td>
</tr>
<tr>
<td>INFP</td>
<td>2</td>
<td>13.9</td>
</tr>
<tr>
<td>ENFJ</td>
<td>3</td>
<td>11.9</td>
</tr>
<tr>
<td>INFJ</td>
<td>4</td>
<td>7.8</td>
</tr>
</tbody>
</table>

Summary

The hypothesis tested was to determine the relationship between therapist's personality as measured by the MBTI and the theoretical orientation out of which therapists indicate they practice therapy. A Kruskal-Wallis one-way analysis of variance was employed.

The hypothesis that similar personality types had similar theoretical orientations was not confirmed. The $H$ value was not significant at the .05 level.

No significant differences in selection of theoretical orientation were found for the variables gender, degree, kind of degree, or age. Selection of therapist theoretical orientation does not appear to be significantly influenced by any of these factors singly.

Given the results of the data regarding the relationship between personality and theoretical orientation, this research project failed
to find any variables which by themselves significantly impacted the selection of theoretical orientation. On the basis of this project, it is concluded that variables other than those tested here may have a greater impact on that selection, or that a unique combination of all of the variables tested here plus others such as training, supervision, and internship experiences impact theoretical orientation in a communal way that was not investigated here. It is an area of investigation that deserves additional exploration and testing.
CHAPTER V

SUMMARY, CONCLUSIONS, AND RECOMMENDATIONS

The major purpose of this study was to explore and assess the specific relationship between the personality of practicing therapists as determined by the Myers-Briggs Type Indicator (MBTI) and the theoretical orientation out of which therapists practice therapy. In this chapter a summary of the study is presented, along with a discussion of the study and conclusions based on the analysis of the data. Finally, limitations of the study and implications for future research are discussed.

Summary

The purpose of this study was to investigate the generalized hypothesis that who a therapist is, that is, the kind of personality a therapist possesses is of significance in the selection of the theoretical orientation out of which a therapist practices individual psychotherapy.

A number of factors have historically been put forth as possible determiners of theoretical orientation, among them academic training, personal therapy, and the influence of a favorite teacher or author. Several authors were cited who believe that the therapist's own personality is the main contributing factor in the selection of theoretical orientation, including McConaughy (1987), Strupp (1959), and Solorow & Atwood (1979).
The work of Fiedler (1950a, 1950b, 1951), Smith & Glass (1980), and Sloane, et al. (1975) was discussed with regard to the apparent equality of all systems of psychotherapy and time was given to a discussion of the concept of the therapeutic relationship and its impact upon the effectiveness of therapy.

Several applications for the research undertaken in this study were put forward including the matter of therapist congruency, the matching of clients and counselors according to personality type, and the matching of supervisors and trainees according to personality type.

A number of related areas of the literature were reviewed in the current study: historical background, a discussion of the validity and reliability of the Myers-Briggs Type Indicator, and suggestions for possible continued research in this field of study.

A total of 62 subjects, therapists with either a masters or doctoral degree participated in this study. All of the subjects had practiced individual therapy full time for at least one year or part time for at least two years and worked in a mental health agency, psychiatric hospital, or were in private practice within a 50-mile radius of Kalamazoo, Michigan.

Two instruments were utilized to assess therapist personality and theoretical orientation.

The Myers-Briggs Type Indicator (MBTI) was utilized as a test to measure the personality type of participating therapists. This instrument is derived from Jung's theory of personality types. For purposes of this study the four dichotomous personality categories were
used: (1) E-I (Extraversion-Introversion), (2) S-N (Sensing-Intuition), (3) T-F (Thinking-Feeling), and (4) J-P (Judgement-Perception), as well as the sixteen distinct personality types described by the Manual (Appendix B). Subjects were asked to complete Form G of the MBTI and the results were then hand-scored according to instructions. Continuous scores on each of the four dichotomous categories were used.

A questionnaire (Appendix A) was prepared asking the subjects to choose one of six possible theoretical orientations they felt best described the orientation of the therapy they practiced. The six orientation choices were: (1) behavioral, (2) psychodynamic, (3) existential, (4) cognitive, (5) developmental, and (6) person-centered.

A Kruskal-Wallis one-way analysis of variance failed to demonstrate a significant relationship between theoretical orientation and personality type. Analyses were conducted on several groups of data including personality types (Appendix B), dichotomous personality variables (E-I, S-N, T-F, J-P), individual personality variables, E, I, S, N, T, F, J, P), degree (M.A./Ed.D.-Ph.D.), type of degree (Psychology, Social Work, Counseling), gender, and age. No significant H values were found.

It does appear that the J-P and T-F dichotomous personality variables are more closely related to theoretical orientation than other dichotomies, confirming the work of Levin (1979). It also appears that Cognitive therapists prefer Judging (J) more than the overall subject population, and that Developmental therapists prefer Feeling (F) and Intuition (N) more than the overall subject population.
Conclusions

This study failed to demonstrate a significant relationship between therapist's personality and theoretical orientation, and failed to lend support to the proposition that who a therapist is within the context of his/her personality is of significance as each therapist chooses a theoretical orientation out of which to practice individual psychotherapy.

It is also noted that it is possible to draw some global conclusions with regard to the subjects in this research. There were similarities in the responses of subjects which were seen in three of the four MBTI dichotomies. Most of the subjects preferred using Intuition (N) as opposed to Sensing (S) (80.6%), Feeling (F) as opposed to Thinking (T) (69.4%), and Judgement (J) as opposed to Perception (P) (71%).

Though this study did not demonstrate a statistically significant relationship between therapist personality and theoretical orientation, the concept has implications for other experimental investigations. In the field of counselor education it may prove of educational value to match supervisors and supervisees according to MBTI personality variables and then examine how the level of satisfaction with their supervisory experience compares with those who are randomly matched.

It should be noted that random matching of supervisors and supervisees provides students the opportunity to be exposed to a variety of theoretical orientations which may permit the student to better make his/her own selection or orientation.
It may also be valuable to conduct a longitudinal study of counselor education students utilizing the MBTI as it relates to the student's theoretical orientation upon entering a counselor education program and then again at six-month intervals to determine if theoretical orientations are subject to change, and if so, in what direction they change.

The matching of client and counselor according to MBTI personality types may have positive, negative, or no impact upon the outcome of individual psychotherapy when compared to random assignment of clients. Additional investigations into the importance of the therapeutic relationship to outcomes of therapy are worthy. Perhaps a replication and updating of some of the classic (Fiedler, 1950) studies cited in the literature could be undertaken.

All of the suggested studies touch upon the efficacy of psychotherapy. Studies which assist in the elaboration and clarification of how, why and if therapy works is of fundamental significance to the fields of psychology and counseling.

In exploring subjects' personality types, the dichotomies Thinking-Feeling (T-F) and Judging-Perceiving (J-P) were shown to be more closely related to theoretical orientation than were the dichotomies Extraversion-Introversion (E-I) and Sensing-Intuition (S-N).

Though this study did not provide strong evidence of a significant relationship between theoretical orientation and personality, it is hoped this study may encourage others to continue research along similar dimensions.
Limitations of the Study

The method and design of this study were weakened by possible difficulties related to subjects, instrumentation, and generalizability of the results.

Subjects

Subjects in this study were volunteers who agreed to participate in this research. This volunteerism introduced a selection bias into the sampling procedure which was likely magnified by the fact that subjects needed to self-administer and return both the MBTI and Questionnaire. It seems likely that specific MBTI personality types are less inclined to fill out and return this information than are other types, thus curtailing full representation in the subject pool. In this regard it is noted that none of the 62 subjects in this study were of the ISTP, INTP, ESTP, or ESFP personality types. While no firm conclusions can be drawn, it is noted that three of the four personality types are composed of the Sensing (S), Thinking (T), and Perceiving (P) variables. This evidence may provide the impetus to investigate how these variables impact volunteerism. A larger sampling of therapists may have filled some of the missing personality types, thereby permitting more precise statistical analysis.

It is also noted that 38 of 62 (62%) of the subjects had a Master's Degree (M.A.) and that 26 of 62 (40%) of the subjects were in the field of social work. Either or both of these factors may have influenced the results.
In attempting to isolate a single factor, personality, as it relates to theoretical orientation, the complexity of human choice may have been neglected. Other studies may wish to investigate the combination of factors such as classes taken, teachers taken, professional internships, etc. It is probable that many separate yet interrelated variables work together to bring the therapist to a particular orientation.

Geographical isolation may have contributed to the lack of significant results. Perhaps the presence of Western Michigan University at the center of the 50-mile radius from which subjects were drawn skewed the results.

Instrumentation

The MBTI is a personality measure of long-standing use and appears to have good validity (Myers, 1985). However, the MBTI is easily skewed, particularly by those who are familiar with it. A likely occurrence when administering it to practicing therapists as this study did. The four dichotomous variables used in this study (E-I, S-N, T-F, J-P) have varying degrees of validity (Richek & Brown, 1968; Stricker & Ross, 1964b) and thus conclusions drawn on any single dichotomous variable may be subject to some question.

Additionally, the MBTI yields sixteen specific personality categories based on the combination of the four dichotomous variables listed. In a sample population of 62, sixteen separate categories may be too many from which to achieve significant results.
The Questionnaire used (Appendix A) was one constructed by the author for this study. There are no reliability or validity studies available to support its use. It should be pointed out, however, that with the exception of one question regarding theoretical orientation preference (a forced-choice selection of one of six possibilities), all of the questions were demographic in content. The Questionnaire appears to have considerable face validity.

**Generalizability of Results**

While a broad spectrum of practicing therapists was sought in the subject pool, all subjects worked within a 50-mile radius of each other, perhaps skewing the results. Also a larger population would permit subjects to fill some demographic categories that were sparsely filled.

**Implications for Future Research**

The results obtained in this study provide additional information in the investigation of a possible relationship between personality and theoretical orientation.

As shown in Table 2, only three of the six theoretical orientations had more than three subjects. The three under-represented orientations accounted for only 11.2% of the total number of therapists (7 of 62). Renaming or combining some of the theoretical orientation categories may be helpful in future investigations, and an increased N would also be of benefit in achieving satisfactory representations.
If appropriate Ns are obtained in future research, a more detailed analysis of the 16 MBTI personality types could be undertaken. Only 12 of 16 personality types are represented in the 62 subjects. Additional detail might be obtained when examining aspects such as the type of degree therapists earned (psychology, social work, counseling), as well as a number of other variables which might be informative to study.

It may be possible to develop a more sophisticated questionnaire which may permit more powerful statistical techniques to be used, resulting in more complete and more detailed conclusions about the data. Other personality tests may be used offering additional and different insights into how personality is related to theoretical orientation. A multi-dimensional study which better considers the complexity of human choice may demonstrate significant results.

Overall, it is to be hoped that further research will continue to seek to understand the nature of therapy, the person of therapists, and how they interact upon each other.
Appendix A

Questionnaire
QUESTIONNAIRE

A. ID __________________(Any number, letter or combination of numbers and letters you choose; please put same ID on MBTI Answer Sheet)

B. SEX     Male ___ Female ___

C. NUMBER OF YEARS DOING INDIVIDUAL THERAPY _____

D. HIGHEST ACADEMIC DEGREE AWARDED
   Master's___Specialist___Ed.D. or Ph.D.____

E. TYPE OF DEGREE
   Social Work ___Psychology ___Counseling ___
   Other _____

F. AGE _____

G. Select the one theoretical orientation that best describes your approach to your therapeutic work in individual counseling. It is understood that all orientations have the best interests of their clients in mind.
   _____ Psychodynamic orientation: Human conflicts are understood to be intrapersonal as well as interpersonal, and the client's psychological dynamics are the basis for therapy. The orientation stands in the tradition of Freud, Jung, and moderate offshoots of these writers.
   _____ Behavioral orientation: Personality develops as a result of maturation and learning; behavior is a function of its consequences. It stands in the tradition of Skinner and Wolpe.
   _____ Cognitive orientation: Problems arise from the views and beliefs that people adopt about events or situations; it is educative as well as therapeutic. It stands in the tradition of Ellis.
   _____ Person-centered orientation: The growth potential of any individual will be realized in a relationship in which the therapist communicates realness, sensitivity and understanding. It stands in the tradition of Rogers.
   _____ Existential orientation: The nature and purpose of man, the meaning of anxiety, despair, grief, loneliness, isolation and death are discussed. It stands in the tradition of May and Yalom.
   _____ Developmental orientation: The self is understood to move through stages in development that reflect interactions with important others. The individual is the unique meaning-maker of his existence. It stands in the tradition of Kegan and E. Erickson.
Appendix B

MBTI Personality Categories
PLEASE NOTE:

Copyrighted materials in this document have not been filmed at the request of the author. They are available for consultation, however, in the author's university library.

These consist of pages:

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Appendix C

Human Subject Institutional Review Board Approval
Date: September 25, 1989
To: David J. Wagner
From: Mary Anne Bunda, Chair

This letter will serve as confirmation that your research protocol, "An Investigation of the Relationship Between Therapist Choice of Theoretical Orientation and Personality", has been received under the exempt category of review by the HSIRB. However, approval cannot be granted until the following items are addressed:

1. The Board needs a cover letter for the questionnaires or,
2. A copy of the script that will be read to people as they are handed the questionnaire.

The Board is looking for a statement that people are free to participate or not in the research.

Please submit the above changes to the HSIRB. Approval will be granted after receiving the requested changes in your research protocol.

xc: J. Geisler, Counselor Education and Counseling Psychology
Thank you for considering participation in this project.

The hypothesis of this research is that there is a relationship between a therapist's personality and their theoretical orientation. I believe therapists choose theoretical orientation out of the dynamics of their own personality. While there are likely other factors involved in choice of orientation, I believe personality is a significant factor.

To test this hypothesis, I am asking that you complete the enclosed Questionnaire (one short page), and the Myers-Briggs Type Indicator. Should you choose to participate, simply enclose the completed Myers-Briggs Answer Sheet, the Questionnaire, and the Myers-Briggs Booklet in the stamped, self-addressed envelope, and drop it in the mail. If you choose not to participate, please mail the information back to me so that I can reuse the items.

Please consider the following guidelines:

1. Participation is completely voluntary.
2. Participation is anonymous. Do not use your name at any time.
3. The Myers-Briggs will be hand-scored so you are free to use pen or pencil on the computer answer form.
4. You must have at least one year of experience as a full-time therapist, or two years of part-time experience, and one-half of your therapeutic work should be in individual therapy.

Your participation is very important to me. If you would like a copy of the results of this project, just mail me a separate request (to protect your anonymity) and I will see that you receive a copy of the results.

Thanks again for your help,

David J. Wagner
Appendix E
Conversion Table for MBTI Scores
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