The Relationship of Treatment Team Interpersonal Communication to Staff to Client Relationships in a Residential Treatment Setting

Martin L. Mitchell
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THE RELATIONSHIP OF TREATMENT TEAM INTERPERSONAL
COMMUNICATION TO STAFF TO CLIENT RELATIONSHIPS
IN A RESIDENTIAL TREATMENT SETTING

by

Martin L. Mitchell

A Dissertation
Submitted to the
Faculty of The Graduate College
in partial fulfillment of the
requirements for the
Degree of Doctor of Education
Department of Educational Leadership

Western Michigan University
Kalamazoo, Michigan
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THE RELATIONSHIP OF TREATMENT TEAM INTERPERSONAL COMMUNICATION TO STAFF TO CLIENT RELATIONSHIPS IN A RESIDENTIAL TREATMENT SETTING

Martin L. Mitchell, Ed.D.
Western Michigan University, 1982

The purpose of this study was to determine the nature of the relationship between treatment team interpersonal communication and staff to client relationships in a residential treatment setting. Through the use of the Staff Environmental Survey and the Youth Environmental Survey, questions pertaining to treatment team interpersonal communication were correlated to questions pertaining to staff to client relationships.

The subjects utilized for the study were the staff and clients of The Starr Commonwealth Schools' residential treatment program located in Albion, Michigan.

The responses of subjects from 14 treatment teams were correlated to the responses of subjects from 14 groups of clients. Spearman rank order correlations were calculated to investigate the relationship between treatment team interpersonal communication and staff to client relationships.

The findings revealed that a relationship did exist between these two variables. Treatment team interpersonal communication was related to eight staff to client relationship factors.

The recommendations made, as a result of the findings, included practical applications as well as research implications.
practical perspective, administrators of residential programs were encouraged to develop those organizational attributes which encourage treatment personnel to promote effective communication and strong relationships among staff and clients. From a research perspective, several recommendations for further study of these factors were suggested. Included among these was the recommendation for replications of this study in other residential treatment programs.
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CHAPTER I

THE PROBLEM

Introduction

Bower (1969) studied youth in a variety of settings and found that approximately 10% of today's youth require special attention due to behavioral difficulties. The problems of our increasingly complex society seem to be taking their toll on today's youth. In another study by Cavan and Ferdinand (1975), they found that the highest rates of arrests appear to be occurring among children between 11 and 16 years of age. In this same study, they found that boys were predominately distinguished by crimes involving aggression and girls by sex related crimes.

It is apparent that the problems of today's youth are on the increase. Each year over 220,000 youth experiencing behavior disorders are placed in approximately 2,400 child care settings in the United States (Kadushin, 1974; Pappenfort, Kilpatrick, & Roberts, 1973).

Kauffman (1977) stated:

Children with behavior disorders are those who chronically and markedly respond to their environment in socially unacceptable and/or personally unsatisfying ways but who can be taught more socially acceptable and personally gratifying behavior. (p. 23)

More study of these settings and the staff and youth within them is critical in order to improve the services for today's
troubled youth. The communication among treatment staff and the relationships between staff and clients are two such areas discussed in the next two sections.

Improved Staff Interpersonal Communication Through Teamwork

Within the hundreds of child care settings, commonly referred to as residential treatment facilities where troubled youth are placed, two predominant organizational structures are utilized. In one, a departmentalized structure, staff and clients respond to many departments and their communication is often disrupted because of the numbers of people with which to communicate. In the second, a treatment team structure, staff and clients relate to smaller units and thus communication is enhanced because those involved relate to fewer people.

In residential treatment settings which utilize a departmentalized structure, departments such as education, child care, social work, and recreation are the prime focus for staff energies. Staff loyalties are directed to their specific area of expertise or academic background. For example, within a departmentalized setting, the department of education staff may operate in total isolation of the departments of child care, social work, and recreation. Very little if any communication exists between departments but is rather oriented within departments. When communication does exist, it frequently is diluted because staff must relate to high numbers of coworkers within and outside their department.
From a client perspective, a departmentalized structure can be very frustrating and confusing. Staff from one department may establish certain rules and expectations for clients while staff of another department may have quite different expectations. This process not only erodes the effectiveness of staff to clearly communicate their mission with clients, but also undercuts their credibility and ability to establish effective staff to client relationships.

In other residential treatment settings where a team structure is utilized, treatment teams rather than departments are the prime focus of staff loyalties and energies.

The use of treatment teams represents a distinct departure from a departmentalized system approach and maximizes primary group relations among co-workers. Garner (1982) suggested that through effective teamwork, many roadblocks to communication may be eliminated.

Teamwork or teamwork primacy as described by Vorrath and Brendtro (1974) is central to the structure of many residential treatment organizations. Through teamwork, the interpersonal communication of staff is enhanced. The following are foundations of teamwork as adapted from Vorrath and Brendtro (1974) and Brendtro and Ness (1982).

1. Teamwork is the highest administrative priority and other administrative objectives are secondary.

2. Staff teams are organized around discreet groups of youth. Those staff who have regular direct contact with youth are included on the team.
3. By minimizing the total number of adults who serve each group of youth, primary group relationships are maximized.

4. Teams become the new organizational unit with responsibility for and authority to implement the program. Departmental loyalties become secondary and are replaced by the team unit. Loyalties are to the youth to be served rather than a departmental discipline.

5. Power and authority is invested in all team members. Thus the hierarchy of an organization must implement the function of teams. Ideally teams relate only to one higher authority.

6. By using the team model, it is possible to minimize or eliminate the need for middle management since teams assume many of the responsibilities previously handled by middle managers.

7. Programs are reconceptualized as smaller self-contained units of service. No more than 10 and no fewer than five team members is an ideal range of size.

8. Diversity of staff backgrounds will enhance a team's development. A balanced team including those staff members with significant regular youth contact is essential.

9. Working hours of staff are arranged so that team members can meet weekly for at least 2 hours. All team members share the responsibility of being chairperson or secretary for team meetings. A structure designed to keep staff on task is essential.

10. The agency director has regular contact with teams. While offering input, the director must be careful to allow teams enough "rope" to make their own decisions. Team members and the agency director must communicate openly around issues related to team
11. The ability to develop confidence and strength in other team members is a measure of importance of team members. Staff development is of major importance. Team members must share responsibilities equally and be open to constructive critiquing.

12. Any issue, whether treatment, administration, or personnel, is an appropriate topic for teams within realistic parameters.

One of the primary purposes for using a team structure is to improve interpersonal communication among staff. Adler (1981) stated that interpersonal communication involves a small number of staff who work closely together and who have a great deal of access to each other. Interpersonal communication is an ongoing transaction between people who send and receive through verbal and nonverbal messages.

Treatment teams are considered "free circle groups" with respect to their communication networks, according to Mears (1974). In this situation, all team members converse frequently and equally with all other members of the team.

The definition of a treatment team has two basic components. The first, treatment, is much like the term education, according to Whittaker (1979). Treatment refers to: "teaching the child something about the reasonable limits of his own behavior, and, at the same time, providing him with the opportunity to acquire competence in a whole range of life skills" (p. 10).

The second component, team, is defined as a number of persons associated together in work or activity. Whitehouse (1951) defined
teamwork as "an interacting partnership of professions which specialize in client needs" (p. 45). Others (Jaques, 1970, cited in Wagner, 1977; Nagi, 1975; Patterson, 1959; Szasz, 1970) have contributed to the knowledge base regarding teams and the nature of team process. They describe the interdependency of individuals collectively striving to achieve a common goal.

In settings which utilize a team concept, all staff who work with a specific group of clients must serve on a treatment team. So doing, communication between these professionals is greatly enhanced. Teams make better decisions and make more productive use of time because everyone having an influence on clients must work together on a treatment plan. All staff disciplines, education, counseling, and child care, are represented on a treatment team. From a client perspective, the treatment team structure often eliminates communication problems among staff, which may cause frustration and confusion at a client level. The rules and expectations established by staff are consistent because anyone having regular contact with clients must be a member of the treatment team (Garner, 1982; Golin & Ducanis, 1981, Maier, 1970; Vorrath & Brendtro, 1974).

Improved Client Outcomes Through Effective Staff to Client Relationships

The relationships between residential treatment staff and their clients are critical in establishing an environment which is conducive to the social, emotional, and educational growth of the clients (Beistek, 1957; Trieschman, Whittaker, & Brendtro, 1969; Hollis, 1965; Perlman, 1979).
A definition of relationship which is consistent with many writers is offered by Rogers (1961). He stated:

My interest in psychotherapy has brought about in me an interest in every kind of helping relationship. By this term I mean a relationship in which at least one of the parties has the intent of promoting the growth, development, maturity, improved functioning, improved coping with life of the other. The other, in this sense, may be one individual or a group. To put it in another way, a helping relationship might be defined as one which one of the participants intends that there should come about, in one or both parties, more appreciation of, more expression of, more functional use of the latent inner resources of the individual. (pp. 39-40)

Rogers explained that this definition includes a variety of situations involving people establishing relationships with other people. He stated:

Now it is obvious that such a definition covers a wide range of relationships which usually are intended to facilitate growth. It would certainly include the relationship between mother and child, father and child. It would include the relationship between physician and his patient. The relationship between teacher and pupil would often come under this definition, though some teachers would not have the promotion of growth as their intent. It includes almost all counselor-client relationships, or personal counseling. (p. 40)

Patterson (1974) in his description of a continuum of psychological helping relationships stated:

A basic variable is the place or importance of the personal relationship in the helping process. A personal relationship—or a psychological relationship—is involved in every helping relationship, even if the information is conveyed in an apparently impersonal manner, as through the printed word.

Some kind of relationship is involved in every helping process; that is, a good personal relationship is a necessary part of the process. In many kinds of helping processes, the relationship is not sufficient, however. The helper provides information, direction, guidance, resources, instruction. Thus, in teaching, or re-education,
or remedial education, a good relationship is necessary for effective teaching and learning; it is the medium through which teaching is achieved. (p. 10)

Collectively, these authors suggest that relationship may be thought of as a situation where staff has the intent of promoting growth, development, maturity, improved coping, and functioning in the life of clients.

Relationship building between staff and clients in residential treatment settings is believed to be one of the most influential factors in providing effective services to clients (Aichorn, 1935; Combs, Avila, & Purkey, 1978; Dahms, 1978; Redl, 1966; Rogers, 1961; Trieschman et al., 1969; Whittaker, 1979). While almost any book or journal article written on residential treatment or services to problem youth may mention the importance of relationship building between staff and clients, very little research has been conducted to determine those factors which influence the relationship building process.

The Problem Statement

It has been suggested that teamwork enhances the interpersonal communication among staff. But what impact does this have upon the ability of the staff to help the clients? It has also been suggested that effective staff to client relationships improve the probability of better client outcomes. But what are the factors that improve staff to client relationships?

These are among the many important questions to be answered about residential treatment. While the concept of utilizing the
treatment team structure is frequently practiced, little research exists to support the use of this structure, even though many professional organizations regard it as a very progressive step in residential treatment. The study of staff to client relationships has been similarly neglected.

The following question, therefore, is an outgrowth of the above discussion. What is the nature of the relationship between treatment team interpersonal communication and staff to client relationships in a residential treatment setting?
Teamwork and Interpersonal Communication

Lacks, Landsbaum, and Sterns (1970) designed a study which investigated the communication process of treatment teams in a children's psychiatric unit. Results of this study indicated that improvement of team member's communication skills enhanced team performance. Performance was measured on the basis of the number and the quality of team communications as they related to providing services to clients.

There is growing interest in the use of treatment teams versus departmental approaches in treatment settings. The team structure offers the possibility of better communication and, as indicated in the Lacks et al. study, improvement in team communication may enhance team performance.

Barnard (1938), many years ago, stressed that the primary function of an executive should be the development and maintenance of an effective system of communication. Recent emphasis on teamwork suggests that greater attention is being paid to Barnard's advice and we find that, today, organizations are working to improve their effectiveness through better communication. Most teamwork in the helping professions evolved from the need for professionals of various disciplines to pool their ideas in helping a common client. By
working together on teams rather than on a departmentalized basis, treatment staff often find that they are more efficient and effective. Through the support and reinforcement team members experience, because of close communication with their co-workers, teams provide a broader base of service to clients. Wagner (1977) studied team performance in relation to the services provided to clients. He concluded that:

Although early research contrasting individual and group performance is inconclusive, recent studies suggest that teams provide a more holistic response to clients and that teams are inclined to make riskier decisions than practitioners not operating on teams. (p. 206)

Stone (1970), in writing about various barriers to effective teamwork, emphasized the importance of open and free communication. She stressed that successful teams, meaning those which achieved their goals, implement certain necessary processes to assure desired results. Stone suggested that if the following processes are implemented, team success can be achieved.

1. Freedom of communication; meaning that the process of interpersonal communication must be shared and open to all those who serve on the team.

2. Shared responsibility for decision making and leadership; meaning that rather than hierarchial relationships existing within the team, all members take equal responsibility for decision making and leadership.

3. Respect for individual functioning; meaning that each team member will have different ways of achieving goals and yet each method should be respected and supported by fellow team members.
4. Encouragement of both independent and interdependent work relationships between staff; meaning that staff must be encouraged to take self-direction while at the same time being conscious of how their individual actions influence the team and, therefore, must be consistent with the team.

5. Development of congenial interpersonal feelings and role consensus among staff members; meaning that staff must strive to work closely with each other and yet challenge each other. In addition, team members must understand each others' roles and agree with the responsibilities of those roles.

6. Continuous evaluation of clinical function in light of shared reality; meaning that teams must constantly evaluate what they are doing and what they are capable of achieving, given their resources.

These six areas suggested by Stone are at least indirectly related to the interpersonal communication processes. They suggest that productive interpersonal relations among team members are a prerequisite to effective treatment of clients.

Haselkorn (1958), who has researched team performance as it relates to the treatment of clients, suggested that three obstacles to interpersonal collaboration exist within treatment teams. Like Stone, her findings indicate that teams must overcome barriers in order to be effective with clients. These are communication barriers, status problems, and special vested interests by individuals within the team. Haselkorn's findings are closely related to Stone's suggestions because of the heavy emphasis on interpersonal
relationship building through effective communication.

Recent research conducted by Settles and Crisler (1978a) investigated the relationship between improved team functioning and the effects this had on staff to client relationship variables such as support, personal problem orientation, staff control of clients, and the rates of return to the residential facility by clients.

Settles and Crisler (1978a) defined their teams by the following statement: "The theoretical underpinning for team structure and function is that the team should consist of all those individuals who, in combination with each other, create the environment in which the clients live" (p. 2).

The basic premise of their work was that those teams with extensive training, resulting in improved team interpersonal communication, would have better relationships and more productive outcomes with clients than those without training.

In their research, they found that clients served by an experimental team responded differently than those served by a control team. Experimental teams received 9 months of training. Control teams received none. The following were their results:

As measured by the Rehabilitation Institution Environment Scales (Moos, 1974), significant differences were obtained as follows:

Support: Clients of the trained team reported greater staff and client support than clients of the control teams.

Personal Problem Orientation: Clients of the trained team report more involvement in their personal problems and feelings, and greater effort to understand them than the control team's clients.
Staff Control: The clients of the trained team report less staff effort to maintain control, formulate rules, and schedule activities than the clients of the control team.

At about the same time, the clients of the trained team represented the only group with a 100% return to the facility program after the holiday season recess. (pp. 4-5)

The research by Settles and Crisler (1978a) is significant because it measures various components of treatment team functioning, such as communication, and the relation of these factors to the ability of staff to develop therapeutic relationships with clients.

The literature on interpersonal communication applies to a variety of work settings. While the research findings related to the general topic of interpersonal communication are not specifically related to residential treatment teams, the findings can be generalized to that area.

Feingold (1976), for instance, categorized those aspects perceived to be dimensions of communicative effectiveness by reviewing typical prescriptions for effective communication. It was found that five general categories were most frequently mentioned.

1. Effective communicators are perceived as being adept at creating messages.

2. Effective communicators are perceived as being similar to the receiver.

3. Effective communicators are perceived as being able to adapt communication to changing situations.

4. Effective communicators are perceived to be committed to others.
5. Effective communicators are perceived as being adept at receiving messages.

Feingold's findings are closely aligned with those previously mentioned and support the concept that effective communicators possess a variety of skills. Effective treatment team staff must also be able to adjust to various situations which require flexible communicative responses.

Wiemann's (1977) research suggested that competent communicators are perceived as: (a) other-oriented, (b) flexible, and (c) interaction-oriented. Again, through a close inspection of all the literature regarding treatment team function and interpersonal communication, it is found that similar prerequisites exist for groups of people to work and communicate effectively. As Knapp (1978) suggests, the mere fact that someone is working hard to communicate effectively alone insures that certain behavioral conditions will exist. Knapp stated:

The desire to communicate effectively is probably as important, if not more important, than all the behavioral prescriptions we might employ. If we strongly desire to have a person or a group of persons understand something, believe something, or do something, it is not at all unlikely that the necessary behavioral techniques will follow. (p. 297)

Perhaps the words of Koehler, Anatol, and Applbaum (1976) summed up the situation best when they applied their thoughts to organizations in general. They stated:

Organizations exist because some objectives can be achieved only—or at least more efficiently—through coordinated activity of two or more individuals. In fact, an organization may be defined as a structured system of relationships that coordinates the efforts of a group of
people toward the achievement of specific objectives. Coordinating the actions of two or more individuals toward the achievement of a common goal is a problem for any organizational unit. It is only with the effective use of communication that coordination can be achieved. (pp. 3-4)

Staff to Client Relationships and Client Outcome Behaviors

Much has been written which supports the notion that staff to client relationships are a critical component of comprehensive treatment. In recent works by Combs et al. (1978), they trace the early history of counseling and suggest that today's perspective of the staff to client relationship is much different than in the past. In the infancy of counseling practice, it was assumed that the advice given by counselors made the difference in client attitudes. Theories of being directive or nondirective were often argued with the conviction that any change in client health was due to the methods of the counselor. Today, however, it is believed that the relationship between client and counselor is probably the most significant aspect of the client-counselor process. Combs et al. (1978) stated, "We are beginning to understand that the relationship does more than simply facilitate; it teaches as well" (p. 180).

While the relationship between the staff and client cannot be viewed as the end-all to treatment, it is the common factor that exists when one person is attempting to influence another (Perlman, 1979).

Hollis (1965) spoke of the corrective relationship with children. Through the process of staff modeling for children, the adult
can have a powerful impact on changing the child's self-image. The relationship process of modeling can be viewed in all stages of a child's development.

The results of recent research by Moos (1980), shows evidence that students experience greatest satisfaction in classrooms where both a personal student-teacher relationship exists in combination with expectations for hard work.

Truax and Carkhuff (1967) cited early leaders in the human services profession, such as Munroe (1955), Arieti (1961), and Noyes (1964), for their strong endorsement of the importance of relationship in a therapeutic situation.

Truax and Carkhuff (1967) encouraged treatment personnel to be "spontaneously themselves," "deeply genuine," and "authentic with their clients" (p. 32).

The following studies and documentation were extensively reviewed because a fundamental premise offered in Chapter I is that staff to client relationships do have an influence on outcome behaviors of clients.

Rogers (1961) has studied and written extensively in the field of psychotherapy. As a result of this interest, he has written much about the helping relationship. He describes relationship as a situation where "at least one of the parties has the intent of promoting the growth, development, maturity, improved functioning, and improved coping with life of the other" (pp. 39-40). Rogers also believed that this type of relationship can be found between mother and child, father and child, physician and patient, teacher and...
pupil, and counselor and client.

In reviewing various research studies related to the characteristics of helping relationships and their influence on outcome behaviors, Rogers indicated that a strong staff to client relationship can produce significant positive outcome behaviors. The following studies are among those Rogers cited as evidence to the fact that strong staff to client relationships have been shown to improve positive client outcome behaviors.

In a study by Whitehorn and Betz (1954), the degree of success achieved by resident physicians working with schizophrenic patients was investigated. Their findings revealed that those physicians that developed a person-to-person relationship with patients were more successful in creating positive behavior change than those who tended to be distant and did not value the relationship with patients.

Another study that Rogers (1961) cited as evidence was a study conducted by Heine (1950). Heine studied various therapies to determine the success of each therapy. The psychoanalytic, client centered, and Adlerian approaches were used for comparison.

Heine's study revealed that clients achieved similar levels of success with all three methods, but found that clients felt the changes were not due to the particular therapy used, but rather because of the relationship they had developed with their counselor.

As Rogers (1961) stated:

When asked what accounted for the changes which had occurred, they expressed some differing explanations, depending on the orientation of the therapist. But their
agreement on the major elements they had found helpful was even more significant. They indicated that these attitudinal elements in the relationship accounted for the changes which had taken place in themselves: the trust they had felt in the therapist; being understood by the therapist; the feeling of independence they had had in making choices and decisions. The therapist procedure which they had found most helpful was that the therapist clarified and openly stated feelings which the client had been approaching hazily and hesitantly. (p. 43)

A study which used some of Rogers's premises regarding quality therapy for clients looked at the areas Rogers regarded essential. Halkides (1958) researched what she viewed to be necessary conditions for therapeutic change. As Rogers (1961) stated:

She started from a theoretical formulation of mine regarding the necessary and sufficient conditions for therapeutic change. She hypothesized that there would be a significant relationship between the extent of constructive personality change in the client and four variables: (a) the degree of empathic understanding of the client manifested by the counselor; (b) the degree of positive affective attitude (unconditional positive regard) manifested by the counselor toward the client; (c) the extent to which the counselor is genuine, his words mouthing his own internal feeling; and (d) the extent to which the counselor's response matches the client's expression in the intensity of affective expression. (pp. 47-48)

The findings of this study revealed, according to Rogers (1961), that a high degree of empathic understanding was associated at a .001 level of significance, with the more successful cases. A high degree of unconditional positive regard associated with the more successful cases also produced a strong correlation at a .001 level of significance. Rogers (1961) stated:

Without trying fully to integrate the findings from these various studies, it can at least be noted that a few things stand out. One is the fact that it is the attitudes and feelings of the therapist, rather than his
theoretical orientation, which is important. His procedures and techniques are less important than his attitudes. It is also worth noting that it is the way in which his attitudes and procedures are perceived which makes a difference to the client, and that it is this perception which is crucial. (p. 44).

In a study by Schwartz (1973), peer and authority effects in a correctional community were compared in relation to inmate outcome behavior.

The inmates, the term used to describe the population of delinquent boys at Glen Mills School in Pennsylvania, participate in a reeducation program designed to develop appropriate behaviors.

A major portion of Schwartz's (1973) study investigated the degree of inmate liking, friendliness, and close relations with staff correlated to outcome behaviors. The findings showed that "good relations with the staff suppress the undesirable functions of inmate group affiliation (because they are directly correlated with it)" (p. 244).

The results of this study support the findings mentioned by Rogers (1961) in that positive staff to inmate relations do have a positive impact on productive inmate outcome behaviors.

A study by Parloff (1961) attempted to relate patient change to the quality of the therapeutic relationship. This study was reviewed by Meltzoff and Kornreich (1970). They stated:

Twenty-one primarily psychoneurotic patients were treated in small groups by two therapists for twenty sessions. The quality of the relationships for each group was measured by three trained observers using the array of statements developed by Fiedler. These statements were correlated with those of Fiedler's Ideal Therapeutic Relationship. The criteria of change were measures of discomfort, ineffectiveness, and objectivity or
self-understanding. Criteria measures were obtained after the fourth and twentieth sessions. Three of the fourteen correlations between change and the therapeutic relationship were significant. Fourteen patients completed the program. The dropouts had the poorest relationships in contrast to the other members of the group. This extremely detailed study offers support for its hypothesis that patient change is related to the quality of the therapeutic relationship, but the support is limited by the very few patients and therapists and by the questionable validity of the measures of therapeutic relationships. (p. 458)

Meltzoff and Kornreich (1970) also reported on extensive research in the field of psychotherapy. In their discussions of the therapeutic relationship in relation to outcomes of clients, they explain that much of the research favors the notion that there is a relationship between the two variables, but also caution that the research data are sparse and inconclusive at this point. They do support the practice, however, that a good therapeutic relationship is necessary for desired client outcomes.

In unpublished field research conducted by The Starr Commonwealth Schools of Albion, Michigan, in 1981, it was found that statistically significant relationships existed between staff to client relationships and various measures of client outcomes. Their findings reveal that the degree to which clients perceived their staff to value the importance of client families correlated to low rates of client unplanned dismissals and low rates of truancy.

The degree to which clients perceived that their staff worked hard to make sure clients had contact with families showed a correlation at .003 to the percentage of unplanned dismissals. This same variable correlated at a .02 level of significance to the percentage
of truancies.

In a study by the Child Welfare League of America (Russo & Shyne, 1980), 168 agencies throughout the United States were surveyed. Of the 168 agencies surveyed, 158 operated residential treatment facilities. Each facility was asked to complete a questionnaire relating to questions on the "usual" methods of coping with children's behavior. In their study, researchers noted the frequency with which various methods were used to deal with children's behaviors. The highest possible frequency a method could receive was 2,304. This number was calculated by multiplying the number of agencies which responded to the questionnaire, 144, by the number of behaviors, 16, for which a method could possibly be used (144 x 16 = 2,304). While none of the methods used for dealing with children's behavior received a unanimous rating of 2,304 points, one method received by far the highest frequency of usage. This was the method listed in the survey as the "talk" method. This method included discussion of any sort with clients, individually or in group. The "talk" method compared to other methods (withholding privileges, addition of chores, physical restraint, medication, and secure confinement) is considered a "relationship" method.

The "talk" method was employed alone or in combination with other methods in response to every one of the behaviors listed in the study except fire setting and destruction of property. The "talk" method was mentioned over 1,600 times and was the method listed most frequently for common situations.
In this same study, 42% of the respondents stated that they were very satisfied with the methods they used in coping with disruptive behavior and 55% said they were somewhat satisfied. In other words, 97% of the respondents were at least somewhat satisfied with the "talk" or relationship method for its effectiveness in dealing with disruptive behavior.

In a separate part of the survey, "developing consistent relationships" and "counseling" were listed 69% of the time as being the most successful means in coping with disruptive behavior. It should be noted that these responses were write-in answers with no parameters set as to what the responses could be.

The methods listed most frequently as least successful were: restriction of privileges, physical restraint, inconsistency, excessive talk/lecturing, and staff anger. The researchers also reported that many respondents stated that they placed much importance on planful intervention as well as relationships with staff and peers. In their narrative, they stated: "We subscribe to the theory that behavior control begins with milieu, relationships, and program activities." (Russo & Shyne, 1980, p. 46).

A theme frequently mentioned in this survey was the importance to residents of peer group and staff relationships as well as the need for sound programming. The determinants of successful management of problematic behavior appeared, in the opinion of many, to be not only dependent upon the type of method used but also upon the attitudes and skills of the individuals involved in implementing them. (Russo & Shyne, 1980, p. 68)

A treatment team's ability to communicate effectively among its own members may have an impact on the relationship developed between
treatment team members and their clients. This process could also evolve inversely. If staff and clients have better relationships, then communication among team members may be enhanced.

Regardless of the nature of this relationship, as a result of the references cited what is known is that as staff and client relationships improve, the probability of client outcome behaviors is increased. This concept can be viewed in Figure 1.

Summary of Cited Literature

The field of counseling and psychotherapy has divided its research into two areas among others, outcome research and process research. Outcome research, according to Ivey and Simek-Downing (1980), is concerned with what happens to clients as a result of treatment. Process research is concerned with examination of the nature of treatment and singling out those areas which produce effective outcomes.

Ivey and Simek-Downing stated: "Process research is particularly critical for the practitioner, because it specifies variables and behaviors which are useful in deciding which treatments (skills, qualities, theories) are most likely to help a particular client" (p. 390).

This research study is viewed to be process-oriented. Certainly outcomes are important, but in this case, two critical variables related to process will be investigated: team interpersonal communication and staff to client relationships.
Figure 1

Client Outcome Behaviors in Relation to Staff to Client Relationships
As cited previously, teamwork evolved from the need of professionals to pool their ideas in helping clients. Much of the research to date has examined certain factors of teamwork in relation to improved services to clients (Lacks et al., 1970). These studies, for example, have looked at the relationship between individual versus team structures and the impact each method has on clients (Wagner, 1977). Others, such as Haselkorn (1958) and Stone (1970) have suggested obstacles to effective interpersonal team communication which influence the therapeutic impact on clients. In each of these cases, teamwork was directly related to outcomes.

Documentation and studies relating to research on staff to client relationships and their relation to client outcome behavior has been cited. These included studies by The Child Welfare League of America (Russo & Shyne, 1980); studies cited by Rogers (1961) including research by Whitehorn and Betz (1954), Heine (1950), and Halkides (1958). Studies were also included by Schwartz (1973), Parloff (1961), and research conducted at The Starr Commonwealth Schools in 1981. In each of these cases, staff to client relationships were directly related to client outcomes.

In reviewing this literature, it is apparent that significant questions about treatment team interpersonal communication in relation to staff to client relationships need to be answered. Through examination of the cited literature, one finds that researchers frequently suggest further probing of these two variables. In particular, the study conducted by Settles and Crisler (1978a) called for investigation of these variables. Their study focused on team
factors in relation to staff and client relationship variables and also included some outcome information.

Research Hypothesis

The hypothesis for this study is that there is a relationship between treatment team interpersonal communication and staff to client relationships in a residential treatment setting. Given the hypothesis for this study, through empirical investigation, one would expect to find that treatment teams with more effective interpersonal communication would have better relationships with their clients. The following specific subhypotheses are proposed for investigation.

1. There is a relationship between the perception that staff are friendly and easy to talk to and factors of team interpersonal communication.

2. There is a relationship between the perception that staff keep their promises and factors of team interpersonal communication.

3. There is a relationship between perceived staff respect and factors of team interpersonal communication.

4. There is a relationship between perceived staff care and factors of team interpersonal communication.

5. There is a relationship between the perception that staff are fair and reasonable and factors of team interpersonal communication.

6. There is a relationship between the perception that staff enjoy working with clients and factors of team interpersonal communication.
There is a relationship between the perception that staff trust clients and factors of team interpersonal communication.

There is a relationship between the perception that staff are fun people to be around and factors of team interpersonal communication.

There is a relationship between the perception that staff don't find fault when clients do not do things wrong and factors of team interpersonal communication.

There is a relationship between the perception that staff don't lose their tempers and factors of team interpersonal communication.

There is a relationship between the perception that staff don't have favorites and factors of team interpersonal communication.

There is a relationship between the perception that staff praise and encourage clients and factors of team interpersonal communication.

There is a relationship between the perception that staff make sure clients have contact with their families and factors of team interpersonal communication.

**Significance of the Study**

Because of the importance placed on team interpersonal communication and relationship building, it seems appropriate that further investigation occur in order to provide more knowledge to the growing field of residential treatment.
Some practical applications for this study, should the hypothesis be supported, are to improve team communication skills, thus creating a greater impact on helping children; to provide useful information for administrators supervising treatment teams; to encourage further study of the existing knowledge base related to team interpersonal communication and relationship building; and to synthesize the vast knowledge regarding these critical components of residential treatment.

If the nature of the relationship between factors of team interpersonal communication and factors of staff to client relationships appears to be significant, this would be useful knowledge for the field of residential treatment. While the field of residential treatment would intuitively support the hypothesis of this study, very little empirical data exist to fully substantiate these premises. If the hypothesis is supported, further studies investigating these variables would be encouraged and necessary.
CHAPTER III

METHODOLOGY

Introduction

Staff to client relationships are critical in establishing an environment which is conducive to the emotional, social, and educational growth of youth in a residential treatment setting (Biestek, 1957; Hollis, 1965; Perlman, 1979; Trieschman et al., 1969). Relationships between staff and clients are cultivated through many interactions and many factors have an impact on the ability of staff to establish useful relationships with clients.

Interpersonal communication within treatment teams may have an impact on the staff to client relationship building process. The nature of the relationship between treatment team interpersonal communication and staff to client relationships is the basic question of this study.

Population and Subjects

In order to test the hypothesis, the staff members of 14 treatment teams and the clients of 14 groups from The Starr Commonwealth Schools of Albion, Michigan, were selected as subjects.

The Starr Commonwealth Schools is a multiservice agency that serves youth and their families in three states, Michigan, Indiana, and Ohio. The Michigan program operates a residential treatment
facility serving approximately 160 youth and their families. The youth placed at the Michigan campus are characterized as youth having behavior disorders and their families are often torn by social and economic pressures.

While Starr Commonwealth's residential program in Albion, Michigan, is similar to many of the hundreds of residential programs throughout the United States, it is also very unique because of the way the organization is structured and services are delivered. In 1970, the structure of the program was reconceptualized into a treatment team concept. This structure facilitates communication flow throughout an organization and is in sharp contrast to more traditional structures which often emphasize a departmentalized chain of command.

Starr Commonwealth's program in Albion, Michigan, has an organizational structure which includes 14 treatment teams which work directly with 14 groups of youth in residence at the school. One group of staff members work with one specific group of students. Administrators supervise a small number of teams in order to keep the communication channels open and effective. The Starr Commonwealth organizational chart for Albion, Michigan, can be viewed in Figure 2.

The client population was composed of youth ranging in age from 10-17 years. While degrees and types of behavior exhibited varied, all client subjects exhibited some degree of behavioral disorders warranting their placement in a residential treatment setting.
Figure 2

The Starr Commonwealth Schools Organizational Chart
The staff serving on treatment teams worked with a specific group of students and represented a variety of backgrounds and experiences. Team make-up consisted of degreed and nondegreed personnel; young, intermediate, and older aged personnel; and males and females.

All subjects, staff and clients, were associated with The Starr Commonwealth Schools of Albion, Michigan. The populations were 87 team members and 157 clients with client subjects all being males. Table 1 shows the descriptive data related to the populations studied.

Instrumentation and Data Analyses

Starting in 1976, The Starr Commonwealth Schools Research Department, in cooperation with the Michigan Evaluation and Resource Center, Ann Arbor, Michigan, developed and refined the survey instruments utilized in this study. The instruments were developed after an exhaustive search was conducted in an effort to find a means of measurement which would meet the unique needs of this institution. It was found that no existing instrument sufficed. As a result, the staff and administration worked jointly to develop the Staff Environmental Survey (SES) and the Youth Environmental Survey (YES). (See Appendices A and B.)

These surveys were developed so that the data might help in making the living and working situations of both staff and clients more satisfying and productive as well as provide useful data for research.
Table 1
Descriptive Data Related to the Populations Studied

<table>
<thead>
<tr>
<th>Treatment team &amp; client group</th>
<th># staff</th>
<th># staff males</th>
<th># staff females</th>
<th># clients</th>
<th>Average client age</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>6</td>
<td>3</td>
<td>3</td>
<td>10</td>
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<td>2</td>
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<tr>
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<td>12</td>
<td>15.6</td>
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<td>2</td>
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<td>6</td>
<td>5</td>
<td>1</td>
<td>12</td>
<td>15.75</td>
</tr>
<tr>
<td>Totals</td>
<td>87</td>
<td>50</td>
<td>37</td>
<td>157</td>
<td></td>
</tr>
</tbody>
</table>

Average age of all 157 clients: 15.1
The Staff Environmental Survey contains 82 questions and responses are on a 5-point scale. The Youth Environmental Survey contains 56 questions and responses are also on a 5-point scale.

The Michigan Evaluation and Resource Center is a nonprofit organization in Ann Arbor, Michigan, which collects and stores data for a variety of human services organizations throughout Michigan and other states. The staff of this organization has extensive background in research and evaluation and include personnel with doctoral or master's degrees. Through consultation, the Michigan Evaluation and Resource Center staff were instrumental in the development of the two surveys used in this study.

Since 1976, the instruments have been tested to determine their usefulness and utility. Evaluations of the instruments were conducted by program administrators to determine if the survey tools coincided with their subjective evaluations of the staff and client functioning. There was unanimous agreement between all program administrators who were involved in the evaluation that the instruments accurately reflect the environmental conditions among the staff and clients at The Starr Commonwealth Schools. Users of the instruments felt that the instruments had content validity and measured the characteristics which were designed to be measured. However, no statistical evidence is available to support the accuracy and stability of the scores derived from the surveys.

The academic credentials of this administrative group consisted of doctorate and master's degreed personnel. Their areas of expertise included psychology, social work, education, criminology, and
religion. Table 2 shows the specific academic background of this group.

Table 2

Academic Credentials of Administrators Evaluating the Environmental Survey Instruments

<table>
<thead>
<tr>
<th>Administrator</th>
<th>Degree</th>
<th>Academic discipline</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Ph.D.</td>
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</tr>
<tr>
<td>2</td>
<td>Ph.D.</td>
<td>Psychology</td>
</tr>
<tr>
<td>3</td>
<td>Master's</td>
<td>Social Work</td>
</tr>
<tr>
<td>4</td>
<td>Master's</td>
<td>Social Work</td>
</tr>
<tr>
<td>5</td>
<td>Master's</td>
<td>Social Work</td>
</tr>
<tr>
<td>6</td>
<td>Master's</td>
<td>Social Work</td>
</tr>
<tr>
<td>7</td>
<td>Master's</td>
<td>Social Psychology</td>
</tr>
<tr>
<td>8</td>
<td>Master's</td>
<td>Education</td>
</tr>
<tr>
<td>9</td>
<td>Master's</td>
<td>Education</td>
</tr>
<tr>
<td>10</td>
<td>Master's</td>
<td>Education</td>
</tr>
<tr>
<td>11</td>
<td>Master's</td>
<td>Criminology</td>
</tr>
<tr>
<td>12</td>
<td>Master's</td>
<td>Divinity</td>
</tr>
</tbody>
</table>

For purposes of evaluation, after the instruments were given to Starr Commonwealth staff and clients, the raw data, which were collected in a manner that preserved confidentiality, were reviewed to determine if the results accurately reflected the environmental conditions at The Starr Commonwealth Schools. Any questions which appeared to be ambiguous or subject to misinterpretation were
rephrased or removed from the surveys. Over a period of 5 years the instruments were refined to perfect their accuracy.

Similar processes, although not as structured, were conducted with line staff and clients. Their input primarily consisted of evaluating the clarity of questions. During the early stages when the surveys were being developed, trial runs were conducted to refine the instruments.

The surveys are now conducted annually and structured evaluations of the instruments are held upon completion and tabulation of the findings.

The questions utilized for measures of the quality of interpersonal communication among treatment team members were systematically chosen. Twelve Starr Commonwealth Administrators were asked to choose those questions from the Staff Environmental Survey which, in their opinion, related to interpersonal communication. The academic credentials of the administrators chosen to select the team interpersonal communication questions again included doctorate and master's degree level personnel with backgrounds in psychology, social work, education, and religion. Those questions which were unanimously chosen, were utilized as measures of interpersonal communication and are stated in operational terms below.

**Treatment Team Interpersonal Communication Operationally Defined**

The degree to which good verbal communication exists among team members as measured by the SES (Item #42).
The degree to which team members deal directly and openly with each other, as measured by the SES (Item #43).

The degree to which important events and situations are shared among team members, as measured by the SES (Item #44).

The degree to which team members are willing to listen to work related problems of other team members, as measured by the SES (Item #45).

The degree to which team members are consulted about their views before decisions are made, as measured by the SES (Item #52).

The degree to which team members do an effective job of critiquing how the team works as a team, as measured by the SES (Item #59).

The degree to which discussions are relevant at team meetings, as measured by the SES (Item #67).

The degree to which staff are straightforward in discussing issues at team meetings, as measured by the SES (Item #68).

The degree to which team members have a clear understanding of what was decided at team meetings, as measured by the SES (Item #70).

The degree to which team members feel clear about what was expected of them on the job, as measured by the SES (Item #72).

The questions utilized for measures of the quality of staff to client relationships were chosen through a similar systematic process. Staff of the Michigan Evaluation and Resource Center and Starr Commonwealth staff selected those questions from the Youth Environmental Survey which, in their opinion, related to staff to client relationships. These questions are stated in operational
terms below.

Staff to Client Relationships
Operationally Defined

The degree to which clients perceive that staff praise and encourage them when they do something well, as measured by the YES (Item #23).

The degree to which clients perceive that staff keep their promises, as measured by the YES (Item #26).

The degree to which clients perceive their staff to be friendly and easy to talk to, as measured by the YES (Item #29).

The degree to which clients perceive their staff to show respect for them, as measured by the YES (Item #32).

The degree to which clients perceive that their staff care about them, as measured by the YES (Item #35).

The degree to which clients perceive that staff ask clients to do things which are fair and reasonable, as measured by the YES (Item #38).

The degree to which clients perceive that staff work hard to make sure a youth has contact with his family, as measured by the YES (Item #40).

The degree to which clients perceive that staff really enjoy working with them, as measured by the YES (Item #41).

The degree to which clients perceive that staff trust clients, as measured by the YES (Item #43).
The degree to which clients perceive that staff are fun people to be around, as measured by the YES (Item #45).

The degree to which clients perceive that staff find fault with them when they really don't deserve it, as measured by the YES (Item #47).

The degree to which clients perceive that staff members lose their tempers, as measured by the YES (Item #50).

The degree to which clients perceive that staff have favorites in the group, as measured by the YES (Item #53).

Method of Correlation

The nature of the relationship between treatment team interpersonal communication and staff to client relationships was measured by correlating the 10 team interpersonal communication questions to the 13 staff to client relationship questions.

The data were treated as ordinal for both sets of questions. In order to determine the strength of the relationship between factors of team interpersonal communication and staff to client relationships, the Spearman rank order correlation coefficient was used and a one-tailed test was used for testing significance.

The Spearman rho is a special case of the Pearson r and used for ordinal data. Under this method, all data were converted to ranks before actual calculation was undertaken and the nature of the relationship was then computed.

The scores from the raw data of both the team interpersonal communication questions and the staff to client relationship
questions were dichotomized in order to reduce variance within group scores. For each question, the percentage of those scoring a 5, the highest expected rating for the team interpersonal communication questions, were correlated to the percentage of those scoring 5, the highest expected rating for staff to client relationship questions. This high extreme was chosen to dichotomize against all other scores because previous use of the SES and the YES revealed that scores tended to be grouped within the ratings of 3, 4, and 5, and rarely was the rating 1 selected. An appropriate level of significance was determined and applied to all correlations.

Tables showing the relationship between variables were developed to offer a visual conceptualization of each relationship.

The data for this study were available in storage on computer at the Michigan Evaluation and Resource Center, Ann Arbor, Michigan. The surveys were completed in April of 1981.

The raw data from these surveys had not been used for studies by Starr Commonwealth or other parties not associated with Starr. Summarizations of the data were developed for expedience in evaluating the instruments as well as usefulness for program administrators for evaluating the environmental conditions of their programs.
CHAPTER IV

HYPOTHESIS TESTED AND PRESENTATION
AND ANALYSES OF THE DATA

Introduction

Responses on team interpersonal communication questions from 87 staff members comprising 14 treatment teams were correlated to the responses on staff to client relationship questions as perceived by 157 clients comprising 14 groups of youth. Treatment team members' responses to interpersonal communication questions were correlated to client responses on staff to client relationship questions. The majority of correlations found can be considered moderate positive correlations (Hinkle, Wiersma, & Jurs, 1979). This would include any correlation that is in the range of .50 to .70. A few correlations were in the range of .70 to .90 which is indicative of a high positive correlation.

Through the use of the Michigan Interactive Data Analysis System (MIDAS), the probability for each relationship was computed.

Review of and Procedures for Testing the Hypothesis

The null hypothesis ($H_0: \ r = 0$) states that the relationship between team interpersonal communication and staff to client relationships would be equal to zero. The alternate hypothesis ($H_a: \ r \neq 0$) states that the relationship between team interpersonal
communication and staff to client relationships would not be equal to zero.

The research hypothesis for this study is that there is a relationship between treatment team interpersonal communication and staff to client relationships. The Spearman rank order correlation coefficient was used to test the hypothesis and a probability of .05 for committing a Type I error was chosen. Any correlation equal to .45 or greater is statistically significant at a .05 level.

Thirty-seven correlations with varying degrees of strength resulted in the null hypothesis (H₀: r = 0) being rejected at a .05 level of significance.

The alternate hypothesis (Hₐ: r ≠ 0) stating that there is a relationship between team interpersonal communication and staff to client relationships was supported. The following presentation and analyses of the data offer evidence for the null hypothesis being rejected.

Presentation and Analyses of the Data

The presentation and analyses of data have been divided into two areas. The first area describes those questions which were correlated and produced relationships at a .05 level of significance. The second area describes those questions which were correlated and produced no significant relationships at a .05 level.

For clarity of discussion, the subhypotheses which produced significant relationships are displayed on the following pages in Tables 3-10.
In Table 3, it can be seen that the degree to which clients perceived that staff respected them significantly correlated to the following team interpersonal communication questions:

1. The degree to which team members dealt directly and openly with each other.

2. The degree to which team members listened to each other's work related problems.

3. The degree to which team members were straightforward in discussing issues.

4. The degree to which team members were clear about what others expected.

<table>
<thead>
<tr>
<th>Team interpersonal communication questions</th>
<th>Spearman rank order correlation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Team members deal directly and openly</td>
<td>.70*</td>
</tr>
<tr>
<td>Team members listen to work related prob­lems of others</td>
<td>.56*</td>
</tr>
<tr>
<td>Team members are straightforward in dis­cussing issues</td>
<td>.58*</td>
</tr>
<tr>
<td>Team members are clear about what others expect</td>
<td>.62*</td>
</tr>
</tbody>
</table>

*p < .05.

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Certain conjectures may be made as a result of these findings:

1. When the members of teams are found to be open and direct, straightforward, clear about expectations, and tend to listen well, client groups may perceive more respect from the staff because staff have openly modeled behaviors among themselves which are respectful in nature.

2. As clients perceive staff to respect them, it is probable that respect among staff is valued within their team. This may be manifested by team members being direct, open, straightforward, clear about expectations, and modeling a willingness to listen.

Relationship Between Perceived Staff Care and Factors of Team Interpersonal Communication

In Table 4 it can be seen that the degree to which clients perceived that staff cared about them significantly correlated to the following team interpersonal communication questions:

1. The degree to which important events and situations were shared within the team.

2. The degree to which team meeting discussions were relevant.

3. The degree to which team members were straightforward in discussing issues.

4. The degree to which team members were clear about what others expected.

Certain conjectures may be made about these findings:

1. As team members communicate more effectively through sharing important events, discussing relevant issues, maintaining a
straightforward approach, and are clear about expectations, the probability of them being perceived as caring staff members increases. This may be so because as the staff maintains commitments such as those listed above, their ability to establish a relationship through care is also enhanced. It has often been suggested that a relationship through care is developed by both parties being consistent with each other. It may be argued that team members are capable of being more consistent when they are clear about interpersonal communication issues among the members of their own staff team.

2. A specific premise of the treatment methodology utilized by The Starr Commonwealth Schools is that caring about others is to be modeled by everyone. Those teams which were better at interpersonal communication possibly were more adept at setting expectations within the team for the appropriate tone to be set with regard to caring.

Table 4
Correlation Between Perceived Staff Care and Team Interpersonal Communication

<table>
<thead>
<tr>
<th>Team interpersonal communication questions</th>
<th>Spearman rank order correlation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Important events and situations are shared</td>
<td>.45*</td>
</tr>
<tr>
<td>Team meeting discussions are relevant</td>
<td>.69*</td>
</tr>
<tr>
<td>Team members are straightforward in discussing issues</td>
<td>.55*</td>
</tr>
<tr>
<td>Team members are clear about what others expect</td>
<td>.55*</td>
</tr>
</tbody>
</table>

*p < .05.
Relationship Between the Perception That Staff Are Fair and Reasonable and Factors of Team Interpersonal Communication

In Table 5, it can be seen that the degree to which clients perceive staff to be fair and reasonable significantly correlated to the following team interpersonal communication questions:

1. The degree to which good verbal communication exists within the team.

2. The degree to which team members have clear understandings of decisions made at meetings.

Table 5

<table>
<thead>
<tr>
<th>Team interpersonal communication questions</th>
<th>Spearman rank order correlations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Good verbal communication exists within the team</td>
<td>.64*</td>
</tr>
<tr>
<td>Team members have clear understandings of decisions</td>
<td>.68*</td>
</tr>
</tbody>
</table>

*p < .05.

The following conjectures may be made about these findings:

1. In order for a team of staff members to be perceived by the clients as fair and reasonable, various environmental factors must be in place. Among these is the condition where all staff work in concert with each other. If the staff are less than consistent, then it is possible for clients to perceive the staff as making
decisions which are oppositional and inconsistent by nature. This process could leave the perception that staff are not fair and reasonable because of the inconsistencies in working with clients as they come into contact with a variety of staff.

Therefore, teams which verbally communicate well and are clear about the decisions they make are more likely to be consistent and, thus, would be perceived by clients as being fair and reasonable.

2. Those teams which are particularly skilled in good verbal communication at a staff level are likely to model this same communicative process at a client level. It seems that a necessary condition to being perceived as fair and reasonable would be the ability to communicate one’s thinking and feelings effectively as well as being a good listener.

Relationship Between the Perception That Staff Enjoy Working With Clients and Factors of Team Interpersonal Communication

In Table 6, one can see that the degree to which clients perceive staff to enjoy working with them significantly correlated to the following team interpersonal communication questions:

1. The degree to which good verbal communication exists within the team.

2. The degree to which team members deal directly and openly.

3. The degree to which events and situations are shared.

4. The degree to which team meetings are relevant.

5. The degree to which team members are straightforward in discussing issues.
The following conjectures may be made about these findings:

1. As staff members become more certain of their standing within their treatment team, they may feel more relaxed and appear to enjoy clients to a greater degree. Good verbal communication, direct and open encounters, a tone of sharing information, straightforwardness, clear understandings of decisions, and relevant meetings all are variables which can enhance the feelings of security among team members. Thus, as team members feel secure, they quite possibly are more relaxed and are capable of enjoying their work.
with clients to a greater degree.

2. It is also possible that at times when clients perceive their staff to enjoy working with them, the probability of more effective team communication is enhanced. Because staff and clients live and learn in the total environment of the residential setting, these processes may be viewed as interdependent and interrelated. Therefore, it is difficult to speculate the direction of influence. It is evident from these data, however, that as team interpersonal communication factors tend to improve, it is likely that staff to client relationship factors will also improve. Neither set of factors alone cause the other but are interdependent.

Relationship Between Perceived Staff Trust of Clients and Factors of Team Interpersonal Communication

In Table 7, it can be seen that the degree to which clients perceive staff to trust them significantly correlated to the following team interpersonal communication questions:

1. The degree to which good verbal communication exists within the team.

2. The degree to which team members deal directly and openly.

3. The degree to which important events and situations are shared.

4. The degree to which team members listen to the work-related problems of others.

5. The degree to which team members are consulted about their views before decisions were made.
6. The degree to which team meeting discussions are relevant.
7. The degree to which team members are straightforward in discussing issues.
8. The degree to which team members have clear understandings of decisions.
9. The degree to which team members are clear about what others expected.

Table 7

Correlation Between the Perception That Staff Trust Clients and Team Interpersonal Communication

<table>
<thead>
<tr>
<th>Team interpersonal communication questions</th>
<th>Spearman rank order correlation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Good verbal communication exists within the team</td>
<td>.65*</td>
</tr>
<tr>
<td>Team members deal directly and openly</td>
<td>.63*</td>
</tr>
<tr>
<td>Important events and situations are shared</td>
<td>.60*</td>
</tr>
<tr>
<td>Team members listen to work-related problems of others</td>
<td>.53*</td>
</tr>
<tr>
<td>Team members are consulted about views before decisions</td>
<td>.47*</td>
</tr>
<tr>
<td>Team meeting discussions are relevant</td>
<td>.65*</td>
</tr>
<tr>
<td>Team members are straightforward in discussing issues</td>
<td>.56*</td>
</tr>
<tr>
<td>Team members have clear understandings of decisions</td>
<td>.80*</td>
</tr>
<tr>
<td>Team members are clear about what others expect</td>
<td>.66*</td>
</tr>
</tbody>
</table>

*p < .05.
The following conjectures may be made about these findings:

1. Effective team interpersonal communication is strongly related to the degree to which clients perceive their staff to trust them. The nine out of the 10 team interpersonal communication questions which were found to significantly correlate with the degree to which staff were perceived to trust clients, can be associated with trust among team members. Trust among team members appears to be a prerequisite to trust with clients.

Logic would suggest that this is a sound premise since the abilities necessary to develop a trusting relationship among staff would also be required to develop trust with clients. The skill at a staff level would not be different at a client level since one's basic personality is strongly related to this attribute.

2. As clients perceive their staff as trusting them, it is likely that the staff are practicing the same skills at a professional team level. Therefore, if a person did not have the skills to be perceived as trusting at a client level, then it is unlikely that these skills would be developed at a staff level. These data, again, suggest that these processes are interdependent and interrelated.

Relationship Between the Perception That Staff Are Fun People to be Around and Factors of Team Interpersonal Communication

In Table 8, one can see that the degree to which clients perceive staff to be fun people to be around is significantly correlated to the following team interpersonal communication questions:
1. The degree to which good verbal communication exists within the team.

2. The degree to which team members deal directly and openly.

3. The degree to which team members do an effective job of critiquing.

Table 8
Correlation Between the Perception That Staff Are Fun People to be Around and Team Interpersonal Communication

<table>
<thead>
<tr>
<th>Team interpersonal communication questions</th>
<th>Spearman rank order correlation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Good verbal communication exists within the team</td>
<td>.74*</td>
</tr>
<tr>
<td>Team members deal directly and openly</td>
<td>.54*</td>
</tr>
<tr>
<td>Team members do an effective job of critiquing</td>
<td>.53*</td>
</tr>
</tbody>
</table>

*p < .05.

The following conjectures may be made about these findings:

1. As in many of the other relationships previously discussed, one may assume that as certain interpersonal processes begin to complement a staff team, it is likely that those same attributes will influence staff to client relationships. In this case, good verbal communication, open and direct sharing of ideas, and effective critiquing are related to the degree to which staff are perceived by clients to be fun people. As with trust, care, respect, and other staff to client relationships factors, being perceived as fun is
related to the apparent ability of staff to model the same skills among themselves. Therefore, it is likely that those teams whose students find them to be fun to be with, would also find it enjoyable and fun to work with each other as staff members.

2. There is also the possibility that if the staff are perceived by clients to be fun people, then this phenomenon may help influence staff to effectively critique each other as well as verbally communicating and dealing directly and openly in order to preserve the relationship with clients.

Relationship Between Perceived Staff Praise and Encouragement of Clients and Factors of Team Interpersonal Communication

Table 9 portrays the degree to which clients perceive the staff members to praise and encourage clients when they do something well, which is significantly correlated to the following team interpersonal communication questions:

1. The degree to which good verbal communication exists within the team.
2. The degree to which team meeting discussions are relevant.
3. The degree to which team members have clear understandings of decisions.

The following conjectures may be made about these findings:

1. As has been previously emphasized, the teams which experience more effective interpersonal communication also work with client groups that view the level of staff to client relationships to be more effective when compared to staff to client relationships

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of other groups. In this case, those staff teams which appropri­ately encouraged and praised clients also experienced good verbal communication, relevant team meetings, and had clear understandings about decisions. Again, these findings suggest that the degree of effective interpersonal communication within treatment teams is interrelated with the degree to which effective staff to client relationships also exist.

Table 9
Correlation Between the Perception That Staff Praise and Encourage Clients and Team Interpersonal Communication

<table>
<thead>
<tr>
<th>Team interpersonal communication questions</th>
<th>Spearman rank order correlation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Good verbal communication exists within the team</td>
<td>.62*</td>
</tr>
<tr>
<td>Team meeting discussions are relevant</td>
<td>.65*</td>
</tr>
<tr>
<td>Team members have clear understandings of decisions</td>
<td>.69*</td>
</tr>
</tbody>
</table>

*p < .05.

Relationship Between the Perception That Staff Make Sure Clients Have Contact With Families and Factors of Team Interpersonal Communication

Table 10 shows the degree to which clients perceive that staff make sure clients have contact with their families which is significantly correlated to the following team interpersonal communication questions:
1. The degree to which team members deal directly and openly.

2. The degree to which team members listen to the work-related problems of others.

3. The degree to which team members are consulted about their views before decisions are made.

4. The degree to which team meeting discussions are relevant.

5. The degree to which team members are straightforward in discussing issues.

6. The degree to which team members are clear about what others expect of them.

Table 10
Correlation Between the Perception That Staff Make Sure Clients Have Contact With Their Families and Team Interpersonal Communication

<table>
<thead>
<tr>
<th>Team interpersonal communication questions</th>
<th>Spearman rank order correlation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Team members deal directly and openly</td>
<td>.48*</td>
</tr>
<tr>
<td>Team members listen to work-related problems of others</td>
<td>.59*</td>
</tr>
<tr>
<td>Team members are consulted about views before decisions</td>
<td>.57*</td>
</tr>
<tr>
<td>Team meeting discussions are relevant</td>
<td>.54*</td>
</tr>
<tr>
<td>Team members are straightforward in discussing issues</td>
<td>.53*</td>
</tr>
<tr>
<td>Team members are clear about what others expect</td>
<td>.54*</td>
</tr>
</tbody>
</table>

*p < .05.
The following conjectures may be made relative to the findings reported in Table 10:

1. The manner in which team members relate to clients' families may be one of the most potent factors in determining whether a good or bad staff to client relationship will be established. Regardless of the home environment which may have contributed to the young person being placed in residential treatment, family ties continue to be one of the strongest personal bonds a client will experience throughout his/her life. Therefore, the relationship established with the client and his family are heavily dependent upon a treatment team's ability to perform in a concerted way.

   This may explain why this staff to client relationship question produced numerous significant correlations when related to team interpersonal communication. In order to work effectively with a client's family, a treatment team must develop plans which collectively represent the entire team. Therefore, team members must be effective communicators among themselves in order to have a chance at establishing productive relationships with clients and their families.

2. It is also possible that as teams experience greater success in insuring that clients have contact with their families, they become better communicators within their own teams.

Synopsis of All Potential Correlations

Table 11 shows, in matrix form, all potential correlations between team interpersonal communication and staff to client
<table>
<thead>
<tr>
<th>Team Interpersonal Communication Questions</th>
<th>Staff to Client Relationship Questions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Good verbal communication exists within the team</td>
<td>Staff keep their clients</td>
</tr>
<tr>
<td>Team members deal directly and openly</td>
<td>Staff are friendly enough to talk to clients</td>
</tr>
<tr>
<td>Important events and situations are shared</td>
<td>Staff are nice about clients</td>
</tr>
<tr>
<td>Team members listen to work related problems of others</td>
<td>Staff respect clients</td>
</tr>
<tr>
<td>Team members are consulted about views before decisions</td>
<td>Staff enjoy working with clients</td>
</tr>
<tr>
<td>Team members do an effective job of critiquing</td>
<td>Staff trust clients</td>
</tr>
<tr>
<td>Team meeting discussions are relevant</td>
<td>Staff are fun people to be around</td>
</tr>
<tr>
<td>Team members are straightforward in discussing issues</td>
<td>Staff find fault not doing anything wrong</td>
</tr>
<tr>
<td>Team members have clear understandings of decisions</td>
<td>Staff lose their tempers</td>
</tr>
<tr>
<td>Team members are clear about what others expect</td>
<td>Staff have learned</td>
</tr>
</tbody>
</table>

p < .05.
relationships. Through inspection of this table, one can see that relationships are not detected between certain staff to client relationships questions and team interpersonal communication questions. These include:

1. The degree to which staff keep their promises with clients.
2. The degree to which staff are friendly and easy to talk to.
3. The degree to which staff find fault with clients when they didn't do anything wrong.
4. The degree to which staff lose their tempers when working with clients.
5. The degree to which staff have favorites among clients.

Although no conclusive evidence can be provided for relationships not found, one example is offered as a possible explanation why one set of variables showed low relationship. In a Positive Peer Culture (Vorrath & Brendtro, 1974) program, the methodology used at The Starr Commonwealth Schools, the emphasis on training staff is placed in developing a relationship with the clients based on trust and support. Training alerts the staff to avoid the appearance of peer-like friendships versus establishing professional relationships. This training process may have influenced the willingness of staff to develop peer-like friendships even if their team interpersonal communication is effective. This may explain the lack of relationships found between staff being perceived as friendly and the team interpersonal communication questions.

While the above-mentioned correlations show no relationship, it should be noted that every team interpersonal communication question
relates to at least one staff to client relationship question.

In summary, the data suggest that a relationship does exist between team interpersonal communication and staff to client relationships. The most predominant characteristic regarding these findings was that when a certain attribute was found at a treatment team level, it was very probable that a similar attribute would be found with regard to staff to client relationships.

For example, when staff are perceived as trusting clients, the interpersonal communication at a treatment team level is also indicative of trusting relationships. Factors such as being open, direct, straightforward, and having clear expectations are among those factors which indicate that a high level of trust is also operating at a treatment team level.

Therefore, if interpersonal communication is effective among team members of treatment teams, one can expect that the relationships between staff and clients will be productive. If the relationships between staff and clients are productive, it is probable that clients will achieve improved outcome behaviors.
CHAPTER V

CONCLUSIONS, LIMITATIONS, AND RECOMMENDATIONS

Introduction

The goal of this study was to investigate the nature of the relationship between team interpersonal communication and staff to client relationships in a residential treatment setting. This study is important because of the growing number of children requiring help in residential treatment programs. Other factors related to residential care are worthy of study and, in fact, their investigation is essential as the major variables tested in this study are only two among numerous others which need further research.

The literature suggests that treatment team interpersonal communication and staff to client relationship building have received significant research attention as separate issues but have rarely been studied in relationship to each other. Because of the limited amount of factual knowledge about residential treatment, this type of research is needed.

In the following text, the major conclusions, limitations, and recommendations for further research are discussed.

Conclusions

The findings of this study indicate that when team interpersonal communication tends to be effective, as perceived by team
members, certain staff to client relationship variables tend to also be effective. Effective team communication was found to be related to the following staff to client relationship variables:

1. The degree to which clients perceive that staff trust them.
2. The degree to which clients perceive that staff show respect for them.
3. The degree to which clients perceive that staff care about them.
4. The degree to which clients perceive that staff enjoy working with them.
5. The degree to which clients perceive that staff make sure they have contact with their families.
6. The degree to which clients perceive their staff to be fun people to be around.
7. The degree to which clients perceive that staff praise and encourage them when they do something well.
8. The degree to which clients perceive staff to make fair and reasonable requests.

From these results, the assumption can be made that when team interpersonal communication is found to be effective, it is likely that staff to client relationships will also be effective. Further, as was stated in the review of literature, when staff to client relationships improve, the probability of successful client outcomes also tends to improve.

The results of this study are congruent with other related research studies. Most research efforts have been devoted to
identifying the important facets of relationship building with human service settings. Relationship has been defined through application of a variety of labels, yet there is widespread agreement among practitioners that the establishment of effective relationships with clients is an essential condition for healthy treatment environments.

For instance, Rogers (1961) emphasized the importance of relationship building when he stated in one of his studies that it was not the treatment methodology which had brought about client behavior change, but rather attributed the change to the trust clients felt in their therapist, being understood by the therapist, and the open statements and clarifications offered by the therapist.

Similar conjectures were made by Halkides (1958) when she suggested that effective staff to client relationships resulted in clients being more responsive to treatment. She emphasized the need for a counselor to show empathic understanding and unconditional positive regard for clients and proved how these conditions encourage positive client outcomes.

The intent of this present research study was to go beyond simply stating that the relationship conditions, such as those mentioned by Rogers (1961) and Halkides (1958), are important. This study was designed to identify factors which might impact on the relationship building process. Team interpersonal communication was isolated as a probable factor which had the potential of being related to staff to client relationship building. The findings of this study are not only congruent with studies like Rogers's and Halkides's, but also add new information. The results of this study
suggest that staff to client relationships can be enhanced when staff experience effective interpersonal communication within their work groups. In addition, these present findings suggest that as staff teams experience a certain positive attribute, it is probable that a similar attribute will be found with regard to relationships between staff and clients.

From a different perspective, this present study is related to the work of Lacks et al. (1970). They devoted their research to the study of team interpersonal communication. Their major emphasis was on determining those factors which impaired channels of communication and they focused on efforts to improve team communication. The implied thesis of their research was that as team communication improved, services to clients would also improve. This present study adds new knowledge which is consistent with their research. As team interpersonal communication improves, the probability of improved staff to client relationships increases and, as was previously stated, effective staff to client relationships enhance the probability for productive client outcomes.

The work of Settles and Crisler (1973a) is most closely associated to this present study in comparison to others reviewed in the literature. Settles and Crisler found that teams which had attended workshops on teamwork and communication, thus improving their interpersonal skills, experienced better relationships with their clients than teams who did not attend workshops. The clients of these groups expressed that they experienced greater staff support, more staff involvement in an effort to understand their problems, and
less need for staff controls. Settles and Crisler's (1978a) study corresponds to the present investigation in that similar variables were examined and the findings were consistent with this study.

The findings of this study are consistent with the literature on communication and the literature on relationship building. This new perspective is one piece of the puzzle in determining the necessary conditions for quality care of clients in residential treatment settings.

Through the review of literature and the results of this study, there is evidence that would suggest that effective treatment team interpersonal communication is associated with effective staff to client relationships. Further, effective staff to client relationships have been shown to increase the probability of better client outcome behaviors. Therefore, the conclusion can be drawn that when team interpersonal communication is effective, it is likely that staff to client relationships will also be effective and, as a result, the probability of improved client outcome behaviors may be increased.

Limitations

The following are considered potential limitations to this study; however, there is no direct evidence to suggest the type or degree of impact any of these cited factors may have had on the results.

1. The instruments utilized for this study, The Staff Environmental Survey and The Youth Environmental Survey, have not been

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statistically tested for reliability, although their accuracy is viewed to be substantial as judged by those taking the instrument and those using the instrument for evaluation purposes.

There are inherent problems in using survey instrumentation. Surveys are subject to distortion in that respondents may answer in socially acceptable ways rather than their true feelings. The more sophisticated a group is the more potential there may be of manipulating the instrument. The accuracy and stability of scores is critical to any research endeavor if error of measurement is to be avoided. However, if a group is confident and committed to their own learning, this problem can be significantly minimized. It does not appear that distortion of responses was a limiting condition of this study.

2. An experimental design which would include experimental and control groups might possibly produce results which would more completely define the nature of the relationship between team interpersonal communication and staff to client relationships. However, to develop such a design and remain nonobtrusive to the population tested would be extremely difficult. This was a major factor in choosing the type of design utilized for this study.

3. A small sample size limits the number of potential relationships observed between all variables investigated. A known attribute of the correlational statistic is the probability of achieving a positive relationship between two variables as the sample size is increased.
The size of the populations studied were relatively small, and therefore, had the population sizes been larger, even more statistically significant results may have been found. However, it is unusual to find a residential treatment setting like The Starr Commonwealth Schools which would have a larger population. If several different settings were used at different geographical sites, then a new set of variables, not related to the study, could potentially have an impact on the resulting data collected.

Recommendations

Several recommendations as a result of the findings from this study are offered from a practical perspective as well as a research perspective.

From a practical standpoint, the results of this study offer administrators of residential settings support for many of the theories presently being implemented.

For instance, most administrators would intuitively presume that:

1. It is desirable to encourage an organizational environment which promotes open interpersonal communication among staff.
2. It is desirable to encourage an organizational environment which promotes strong relationships between staff and clients.

It is hoped that the results of this study will encourage the promotion of both these organizational attributes and highlight the importance of both attributes because of their relatedness. Administrators are encouraged to seek out ways of promoting greater work
group interpersonal communication. By providing communication workshops, developing organizational structures which promote better communication among staff, and providing incentives for effective communication, administrators can have an impact on organizational morale as well as services to children.

It is hoped that these findings will stimulate all levels of residential treatment personnel to promote effective communication and strong relationships among staff and clients.

From a research standpoint, this study will hopefully introduce a fresh perspective with regard to the research needs in residential treatment. As was stated earlier, the variables investigated in this study are only two among countless others which demand empirical investigation. Some potential areas of study may include:

1. More detailed and finite investigation as to the nature of the relationship between team interpersonal communication and staff to client relationships. This may be achieved through the use of different instruments and designs or by replicating this study at a different residential setting to substantiate or refute the findings of this study.

2. Research designs structured to determine the inter-dependency of administrative styles, staff work group styles, and the client styles of communication and the potential influence these factors may have on the environmental conditions of a residential treatment setting.

3. Studies designed to measure the impact of the size of an organization in relation to the ability of staff and clients to
communicate well and establish productive relationships.

4. Research that investigates outcome data in relation to the environmental conditions within residential settings, such as: staff and client morale, length of stay, parent contacts, peer influence, treatment methodologies employed, and other conditions which directly or indirectly relate to communication and relationship building.

Many factors must be in place within residential treatment settings in order for quality care to be offered to clients. In order to treat the total child, it is important that the many parts of an organization operate in concert with each other. For this reason, more research on residential treatment is needed. With the increasing problems of today's children, more time and energy must be devoted to the investigation of variables such as those in this study. It is hoped that these findings may stimulate new questions and serve as a catalyst for further research in this area.
APPENDICES
Appendix A

Staff Environmental Survey
Instructions for the Staff Environmental Survey

This survey is part of a study designed by staff and administration of The Starr Commonwealth Schools to learn more about how people work together. The aim is to use the information to make your work situation more satisfying and productive.

The value of this study depends on your being straightforward in answering each question. You'll not be identified with your answers. Please do not put any marks on this questionnaire which could identify you by name or position.

When you complete the survey, please place it in the manila envelope that is marked with your cottage or department name.

The completed surveys will be processed by computer. Each of you will be shown the results of the survey only in terms of the way your team responded. If, as individuals, you are interested in knowing how your team's responses compare to other teams' responses in your village or campus, you can contact your director.
**STAFF ENVIRONMENTAL SURVEY**

How often is each statement an accurate description of the situation in your program or department? (Please circle one number to right of each question that best expresses your opinion.)

| 1. Our director does a good job of assessing the needs of those we serve and laying out a strategy which keeps ahead of the field. | 1 2 3 4 5 |
| 2. Our director does a good job of communicating program strategy to those who must implement it. | 1 2 3 4 5 |
| 3. Adequate time is spent to make sure everyone understands the overall functioning of the program or department. | 1 2 3 4 5 |
| 4. Staff have a sense of dedication to the administrative goals of the program or department. | 1 2 3 4 5 |
| 5. If you are confident you have the right approach, your director expects you to act on it. | 1 2 3 4 5 |
| 6. Our director trusts us to do a good job without constantly checking on us. | 1 2 3 4 5 |
| 7. In my program or department, there is a close relationship between excellence of job performance and recognition given. | 1 2 3 4 5 |
| 8. The people who are promoted in my area of the program are those who are best qualified. | 1 2 3 4 5 |
| 9. My director seems to value the contribution I am making. | 1 2 3 4 5 |
| 10. My director gets involved in conflicts within our team when it really isn't necessary. | 1 2 3 4 5 |
| 11. My director is helpful when our team is unable to resolve conflicts between individuals. | 1 2 3 4 5 |
| 12. My director shows favoritism toward individual team members. | 1 2 3 4 5 |
| 13. My director does a fair and accurate performance review of my work. (Answer only if you have received a written performance review from your current director.) | 1 2 3 4 5 |
| 14. Performance reviews are used to help people grow and learn. | 1 2 3 4 5 |
| 15. My director offers me new ideas for solving problems I experience on my job. | 1 2 3 4 5 |
| 16. My director offers valuable and timely feedback about strengths and weaknesses in my performance. | 1 2 3 4 5 |
| 17. My director hires new staff who are competent and well-qualified. | 1 2 3 4 5 |
| 18. My director maintains high standards for performance. | 1 2 3 4 5 |
| 19. Are you treated fairly and equitably in this organization? | 1 2 3 4 5 |
| 20. My director is friendly and easy to approach. | 1 2 3 4 5 |
| 21. My director listens to and seriously considers my suggestions. | 1 2 3 4 5 |
| 22. I can trust my director to express honest feelings about work issues. | 1 2 3 4 5 |
| 23. I feel confident that I can express honest feelings to my director without fear of reprisal. | 1 2 3 4 5 |
| 24. I am kept informed by my director about changes that will affect me. | 1 2 3 4 5 |
STAFF ENVIRONMENTAL SURVEY

How often is each statement an accurate description of the situation in your program or department? (Please circle one number to right of each question that best expresses your opinion.)

25. My director has a good understanding of the jobs he/she supervises.......................................................... 1 2 3 4 5
26. My director initiates new ideas and activities to improve our program.......................................................... 1 2 3 4 5
27. My director does a good job of encouraging people to work together to improve their joint performance.......................................................... 1 2 3 4 5
28. My director does a good job of dealing with the people he or she supervises.......................................................... 1 2 3 4 5
29. My director will back me up when needed.......................................................... 1 2 3 4 5
30. I respect my director personally, and thus want him to respect and admire me.......................................................... 1 2 3 4 5
31. I respect my director's competence and judgment about things in which he is more experienced than I am.......................................................... 1 2 3 4 5
32. I would describe my director's management style as:
(please circle the appropriate number on the scale below.)

Highly Authoritarian 1 2 3 4 5 6 7 8 9 10 Highly Participatory (Staff Involvement)

33. Starr has an effective program for recruiting bright, capable people who could make a real contribution.......................................................... 1 2 3 4 5
34. Starr has an effective program for training and developing staff.......................................................... 1 2 3 4 5
35. I am satisfied with my job.......................................................... 1 2 3 4 5
36. I am satisfied with my team.......................................................... 1 2 3 4 5
37. I am satisfied with my supervisor.......................................................... 1 2 3 4 5
38. I am satisfied with my pay, considering my skills and experiences.......................................................... 1 2 3 4 5
39. I am satisfied with my chances of getting ahead in this organization.......................................................... 1 2 3 4 5
40. If you feel there are significant problems in the working relationships between your program or department and any of the following, please indicate an "X".

<table>
<thead>
<tr>
<th>Food Service or Commissary</th>
<th>Development</th>
<th>Lakeview Village</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clothing Commissary</td>
<td>Research</td>
<td>Van Wert</td>
</tr>
<tr>
<td>Finance</td>
<td>Arts</td>
<td>Hannah Bell Residential</td>
</tr>
<tr>
<td>Data Processing</td>
<td>Mobile Village</td>
<td>Wilson Clinic</td>
</tr>
<tr>
<td>Maintenance</td>
<td>Cedar Village</td>
<td>Wilson Day Treatment</td>
</tr>
<tr>
<td>Personnel</td>
<td></td>
<td>Other</td>
</tr>
</tbody>
</table>

41. Please list below any suggestions you have for improving the environment at The Starr Commonwealth Schools.


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TEAM ENVIRONMENTAL SURVEY

How often is each statement an accurate description of the situation in your program or department? (Please circle one number to right of each question that best expresses your opinion.)

42. There is good verbal communication within my team................................................. 1 2 3 4 5
43. When my team has critical feelings toward me, they deal directly and openly with me................................. 1 2 3 4 5
44. Information about important events and situations are shared within my work group........................................ 1 2 3 4 5
45. Members of my team are willing to listen to my work related problems and try to be helpful............................................................ 1 2 3 4 5
46. Members of my team back me up when I need support.............................................................................. 1 2 3 4 5
47. Doing my job well leads to recognition and respect from my team members............................................ 1 2 3 4 5
48. Differences of opinion between team members are smoothed over without examination of the real reasons for the conflict................................. 1 2 3 4 5
49. My team is able to satisfy the conflicting demands of various people on my team......................... 1 2 3 4 5
50. My team expects too much from me................................................................................................. 1 2 3 4 5
51. New ideas are adequately evaluated by my team before they are rejected........................................ 1 2 3 4 5
52. People are consulted about their views by team members before decisions are made which affect them.................................................... 1 2 3 4 5
53. A problem has to become a crisis on our team before something is done about it................................. 1 2 3 4 5
54. My team members offer each other new ideas for solving job-related problems......................................... 1 2 3 4 5
55. I actively seek the help of others on my team for solving job-related problems.............................................. 1 2 3 4 5
56. My team makes good decisions.............................................................................................................. 1 2 3 4 5
57. My team is able to solve problems effectively.......................................................................................... 1 2 3 4 5
58. Our staff works together effectively as a team.......................................................................................... 1 2 3 4 5
59. My team does an effective job of critiquing how we work as a team and how we might improve our teamwork.................................................. 1 2 3 4 5
60. I find team members friendly and easy to approach....................................................................................... 1 2 3 4 5
61. Our team has a clique that excludes some team members.................................................................................... 1 2 3 4 5
62. Persons in our work group encourage each other to work as a team.............................................................. 1 2 3 4 5
63. My individual actions are influenced by team goals...................................................................................... 1 2 3 4 5
64. Members of my team maintain high standards of performance......................................................................... 1 2 3 4 5
65. Members of my team get involved in petty quarrels with each other.................................................................. 1 2 3 4 5
66. Members of my team have the skills needed to do an effective job................................................................ 1 2 3 4 5
67. At team meetings, discussions are relevant.................................................................................................. 1 2 3 4 5

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TEAM ENVIRONMENTAL SURVEY

How often is each statement an accurate description of the situation in your program or department?

(Please circle one number to the right of each question that best expresses your opinion.)

<table>
<thead>
<tr>
<th>Question</th>
<th>1</th>
<th>2</th>
<th>3</th>
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<th>5</th>
</tr>
</thead>
<tbody>
<tr>
<td>68. At team meetings, staff are straightforward in discussing issues......</td>
<td>1</td>
<td>2</td>
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<td>5</td>
</tr>
<tr>
<td>69. Team members follow through on commitments made at meetings...........</td>
<td>1</td>
<td>2</td>
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<tr>
<td>70. After team meetings, participants have a clear understanding of what was finally decided.</td>
<td>1</td>
<td>2</td>
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<td>5</td>
</tr>
</tbody>
</table>

ANSWER QUESTIONS # 71 THROUGH # 82 ONLY IF YOU WORK DIRECTLY WITH YOUTH:

<table>
<thead>
<tr>
<th>Question</th>
<th>1</th>
<th>2</th>
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<th>4</th>
<th>5</th>
</tr>
</thead>
<tbody>
<tr>
<td>71. My administrative team does a good job of selecting youth for admission.</td>
<td>1</td>
<td>2</td>
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<td>4</td>
<td>5</td>
</tr>
<tr>
<td>72. Overall, I feel clear about what members of my team expect to do on the job.</td>
<td>1</td>
<td>2</td>
<td>3</td>
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<td>5</td>
</tr>
<tr>
<td>73. I am satisfied with the way information is recorded in our cottage log.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>74. My team trusts my judgment in program situations..........................</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>75. People on my team are deeply committed to helping the youth in their care.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>76. Members of my team work equally well with youth of all races............</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>77. People on my team are positive in dealing with youth.......................</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>78. My team does a good job of bringing about positive change in youth.</td>
<td>1</td>
<td>2</td>
<td>3</td>
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<td>5</td>
</tr>
<tr>
<td>79. Our team members handle the role of chairperson effectively...............</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>80. Members of my team have the skills needed to do an effective job of helping families.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>81. People on my team are deeply committed to working with the families of our youth.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>82. People on my team show real caring for the families of our youth and make them feel welcome on campus.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
</tbody>
</table>
Appendix B

Youth Environmental Survey
Suggestions for administering the youth survey:

a. Do not combine cottage groups for administering the survey.

b. Youth surveys should be administered by a non-team staff member such as the Community Service Worker.

c. The survey should be administered to youth by reading aloud the instructions and each question.

d. It is important that persons administering the survey should not attempt to interpret the meaning of any question or define a word. Simply re-read the item and ask them to respond with whatever meaning the words have for them.

e. Once the survey is completed, the questionnaires should be placed in the manila envelope and returned the same day to the campus/village office who will forward it to the Research Office.
Instructions for the Youth Environmental Survey

This Youth Survey at The Starr Commonwealth Schools is an effort to learn more about how young men here think and feel. This is not a test—no one will be scoring you or giving you any sort of "grade." We only want to know how you feel and what you think. If this survey is to be helpful, it is important that you answer each of the questions as thoughtfully and honestly as possible. Remember, there are no right or wrong answers.

All your answers to this questionnaire will be kept strictly confidential from other youth at Starr. Your staff will only see scores for your entire group and will not be able to identify your individual answers. Please do not write your names on this survey.

INSTRUCTIONS

(To be read aloud by survey administrator)

1. Each question has five possible answers. You should try to select the one which best represents your feeling. Please try to respond to all questions. Even if you're uncertain about the answer, we'd like to know what you think.

2. Let's do a sample question together:

   How often do you get a hit when you play softball? 1 2 3 4 5

   Circle the number which best answers this question.

3. The questions which follow all ask you for your thoughts and ideas about staff that work with your group. When you answer these questions, please think of your staff as a group. Now, thinking of your staff as a group . . .

Turn the page!
<table>
<thead>
<tr>
<th>Question</th>
<th>Almost Never</th>
<th>Seldom</th>
<th>Sometimes</th>
<th>Often</th>
<th>Almost Always</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. How often do you discuss important personal problems with other members of your group?</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>2. How often do you feel that your stay at Starr will really help your situation?</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>3. How often do you feel that you can trust the other members of your group?</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>4. How often do members of your group actually give you good advice in helping you to solve your problems?</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>5. How often do you feel that members of your group really care about you?</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>6. How often do you feel that the leaders of your group have a positive influence on the group?</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>7. How often do you feel a close friendship to the members of your group?</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>8. How often do members of your group really try hard to solve their problems?</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>9. How often do you have fun around this place?</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>10. How often do you feel that members of your group are able to help you with your problems?</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>11. How often are you physically afraid of the other members of your group?</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>12. How often do members of your group hurt your feelings?</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>13. How often do you find that some of the members of your group are able to get away with more because they think they are big or tough?</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>14. How often do members of your group blame you for doing something that you really didn't do?</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>15. How often do you have fun around this place?</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>16. How often do members of your group make fun of you?</td>
<td>1</td>
<td>2</td>
<td>3</td>
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<td>5</td>
</tr>
<tr>
<td>17. How often do you feel that one or two are calling all the shots?</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
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<tr>
<td>18. How often do you get into arguments with other members of your group?</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
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<tr>
<td>19. How often are youth in your group afraid of other group members?</td>
<td>1</td>
<td>2</td>
<td>3</td>
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<tr>
<td>20. How often do you find that some of the members of your group are able to get away with more because they can talk their way out?</td>
<td>1</td>
<td>2</td>
<td>3</td>
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<tr>
<td>21. How often do members of your group find fault with you when you don't deserve it?</td>
<td>1</td>
<td>2</td>
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<tr>
<td>22. How often do you try to talk you into doing things that you know are wrong?</td>
<td>1</td>
<td>2</td>
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<td>5</td>
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<tr>
<td>23. How often do your staff praise or encourage you when you do something well?</td>
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<td>2</td>
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</tr>
<tr>
<td>Question</td>
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<tr>
<td>How often over the past two weeks have you felt that your stay at Starr is really helping you?</td>
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<tr>
<td>How often do you feel that your staff really care about a youth's family?</td>
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<tr>
<td>How often do your staff keep their promises to you?</td>
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<tr>
<td>How often do you feel that staff are people who really know what they are doing?</td>
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<tr>
<td>How often do you feel that the staff consider a youth's family to be important?</td>
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<tr>
<td>How often do you find your staff friendly and easy to talk to?</td>
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<tr>
<td>How often can you get staff to listen to you when you have something really important on your mind?</td>
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<tr>
<td>When a youth's family visits Starr, how often do your staff make them feel welcome?</td>
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<tr>
<td>How often do your staff show respect for you?</td>
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<tr>
<td>How often do you feel your staff have the ability to help you solve your problems?</td>
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<tr>
<td>How often do families of youth feel that your staff are friendly and easy to talk to?</td>
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<tr>
<td>How often do you feel your staff care about you?</td>
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<tr>
<td>How often do your staff make your school work interesting?</td>
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<td>How often do your staff talk over decisions with you which are important to you?</td>
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<tr>
<td>How often do you think the things your staff ask you to do are fair and reasonable?</td>
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<tr>
<td>How often do you think your school work is really preparing you for public school?</td>
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<tr>
<td>How often do your staff work hard to make sure a youth has contact with his family?</td>
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<tr>
<td>How often do your staff really enjoy working with you?</td>
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<tr>
<td>How often do you feel you are learning a lot in school?</td>
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<tr>
<td>How often do you think staff trust members of your group?</td>
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<tr>
<td>How often do you think sufficient is being done to improve your family's situation?</td>
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<tr>
<td>How often do you find that your staff are fun people to be around?</td>
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<tr>
<td>How often do your staff get too rough physically with you?</td>
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<tr>
<td>How often do your staff find fault with you when you don't really deserve it?</td>
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<table>
<thead>
<tr>
<th>Question</th>
<th>1</th>
<th>2</th>
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<th>4</th>
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</tr>
</thead>
<tbody>
<tr>
<td>How often do you find that the rules change in the middle of the week when new staff come on duty?</td>
<td>1</td>
<td>2</td>
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<td>5</td>
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<tr>
<td>How often do you feel physically threatened by your staff?</td>
<td>1</td>
<td>2</td>
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<td>5</td>
</tr>
<tr>
<td>How often do your staff lose their tempers?</td>
<td>1</td>
<td>2</td>
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</tr>
<tr>
<td>How often do your staff blame you for doing something when you really didn’t do it?</td>
<td>1</td>
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<td>5</td>
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<tr>
<td>How often do you hide your personal feelings from staff?</td>
<td>1</td>
<td>2</td>
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<td>5</td>
</tr>
<tr>
<td>How often do you feel your staff have “favorites” in your group?</td>
<td>1</td>
<td>2</td>
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<td>5</td>
</tr>
<tr>
<td>How often do your staff disagree with each other in front of the group when handling problems with your group?</td>
<td>1</td>
<td>2</td>
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<td>4</td>
<td>5</td>
</tr>
<tr>
<td>How often do you feel that staff threatens you by saying they will take away your privileges?</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>How often do you feel your staff “pick on” certain members of your group?</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
</tbody>
</table>
BIBLIOGRAPHY


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