

## Radio Psychology Talk Show Hosts: Assessment of Counseling Style

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Radio psychology talk show hosts' responses were analyzed using the 14-category Hill Counselor Verbal Response Category System (HCVRC) and then compared with the verbal behaviors of other professional and non-professional helpers, including Carl Rogers, Fritz Perls, Albert Ellis, family practice lawyers, and mutual-help group leaders. Radio hosts tended to be active and directive in their verbal behaviors, offering primarily advice and information, and only infrequently reflecting, restating, or self-disclosing. In terms of overall verbal style, hosts strongly resembled Ellis and Perls, who were both highly active and directive in their interactions. Hosts were very dissimilar compared to Rogers, whose client-centered approach is principally nondirective. Although both hosts and lawyers were very active, lawyers emphasized facts and knowledge, whereas hosts focused more on feelings and insight. Compared to hosts, mutual-help group leaders gave more information and were more self-disclosing.

The radio call-in psychology talk show is one of the most popular yet most controversial of all forms of media psychology currently having an impact on community populations. As of 1982, there were approximately 50 mental health professionals who hosted programs in the United States (Bouhoutsos, Goodchilds, & Huddy, 1986), with a general listenership estimated to range from hundreds of thousands to millions (Schwebel, 1982). The magnitude of the phenomenon extends beyond this continent with similar programs being broadcast in numerous other countries, including Taiwan, France, Israel, Australia, and Germany (Raviv, Raviv, & Yunovitz, 1989).

Proponents regard the shows as informative, educational, and inspiring, both for callers and for the listening audience. (See Ricks, 1984; Rubinstein, 1981.) They contend that such programs offer help for those who might not otherwise seek it, serve to demystify psychology, and prevent future psychological problems.

In sharp contrast, critics argue that the programs are shallow, sensationalistic, and irresponsible (see Pryzwansky & Wendt, 1987; Ricks, 1984) and that they promote simplistic and unrealistic perceptions of psychological adequacy in the public (Klonoff, 1983). Critics assert that radio hosts are not acting in the best interests of psychology (see Rice, 1981) in that, given the limited amount of contact time, hosts can neither assess callers' problems nor offer meaningful advice (see Bouhoutsos, 1983b). Further,

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because of the absence of an opportunity for follow-up, hosts have no way of assessing the impact of their interactions. Critics also question whether hosts have sufficient expertise to deal effectively with the wide range of problems presented to them.

The fear of such dangers to the community at large initially prompted the American Psychological Association (APA) to prohibit the practice of media psychology.<sup>1</sup> The *Ethical Standards of Psychologists* (APA, 1977) stated expressly that diagnosis, treatment, and personal advice should be provided only in the context of a "professional relationship" and not by means of public media such as radio or television programs. The APA code was revised in 1981, however, owing to the increased popularity and demand for radio call-in talk shows, coupled with concerns regarding their impact on the public. Under the new guidelines (Principle 4k), "When personal advice is given by means of . . . radio or television programs . . . the psychologist utilizes the most current relevant data and exercises the highest level of professional judgment" (APA, 1981). The 1981 revision thus permitted the giving of personal advice—as opposed to therapy—on the air. Although the distinction between "personal advice" and "therapy" is far from clear (see Pryzwansky & Wendt, 1987), this change in the APA code made possible the discussion and investigation of radio psychology talk shows within the domain of professional psychology (Bouhoutsos et al., 1986).

In 1982, the Association for Media Psychology (AMP) was formed to unite and assist those involved with media psychology and to encourage and support research in the area. The AMP provided guidelines (AMP, 1982) for the use of media by mental health professionals which set forth their responsibilities toward the welfare of their callers and listenership. Specifically, media mental health professionals were directed to inform the public that "media psychology is not psychotherapy" and that issues can be addressed only briefly and in an educational manner.

Although media psychology typically is viewed in the context of traditional psychotherapy, other models also may be appropriate for an understanding of radio psychology talk shows (Levy, 1989). For instance, Schwebel (1982) encouraged a community psychology perspective and a psychoeducational model. He maintained that mental health professionals could help others by providing information, encouraging the use of resources in the community, and supporting the individual's sense of competence. This contention was supported by Bouhoutsos (1983b), who asserted that the primary role of the media rests in the dissemination of psychological information. Similarly, Raviv et al. (1989) reported that radio psychology shows are primarily community oriented and that they place emphasis on educational and preventive goals.

The magnitude and importance of the phenomenon suggest a distinct need for research, especially in light of the fact that ever greater numbers of community populations are receiving their primary exposure to psychology through the public media. Yet, despite numerous and repeated calls for studies (AMP, 1982; Bouhoutsos, 1983a; Keith-Spiegel & Koocher, 1985; Klonoff, 1983; McCall & Stocking, 1982), systematic investigations of radio psychology talk shows have been sparse. Further, as noted by Levy (1989), most articles on radio psychology talk programs are based more on conjecture than on empirical evidence.

Of the limited research that has been conducted, most has focused on media psychology's audience—the listeners and the callers. In the first empirical study of radio

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<sup>1</sup>See Bouhoutsos et al. (1986) for a history of radio call-in psychology programs.

psychology talk shows, Bouhoutsos et al. (1986) found that nearly half of their shopping mall sample reported having listened to or watched media psychology programs. Of those research participants who were nonlisteners, roughly two thirds had heard of such shows and stated that they would listen if they could. Listeners were not differentiated from nonlisteners on any major demographic characteristics, including gender, age, ethnicity, or educational level. A vast majority of listeners judged the programs to be useful and worth airing; however, they were evenly divided on whether or not such shows potentially might be harmful. When listeners were asked about their reasons for listening, educational values were most frequently cited. In contrast to the listeners, Bouhoutsos et al.'s sample of callers included more women than men, and were more likely to be unmarried, unemployed, and less educated. The most common reason for their calling concerned interpersonal problems. Callers evaluated their on-air experiences positively; they indicated that they received emotional support or validation, useful advice, and felt helped by "just talking to someone about it."

In a recent study, Raviv and associates (1989) compared the attitudes and expectations of persons seeking help on the radio to those seeking help at a psychological clinic. The researchers found that both groups displayed a positive attitude toward seeking psychological help and that they shared high expectations of receiving information and of increasing their self-awareness. The clinic group, however, more than the radio callers, expected actual behavioral changes as well as modifications in the perceptions of their problems. The callers, by contrast, expected that radio would help in showing that others have similar problems. When callers were asked why people might turn to the radio rather than directly to a psychologist, they responded most frequently that relatively minor problems did not warrant psychological treatment. Other reasons included the ease of accessibility, the limited stigma and embarrassment, and the minimal financial costs that are associated with radio call-in programs. Raviv et al. emphasized the value of radio counseling programs for community populations, noting that "listening to the program and calling in search of information clearly fall within the category of primary prevention" (p. 71).

Levy (1989) investigated radio psychology talk shows from the perspective of social support. In his study, a pool of APA psychologists evaluated audiotapes of on-air, caller-host conversations. The psychologists judged the hosts to be marginally helpful to callers and to provide a moderate amount of social support both for callers and for the listening audience. Hosts were judged also to vary significantly in their effectiveness and to be only mildly accurate in assessing callers' problems. Although hosts were rated as having offered a great deal of advice, the quality of their advice was regarded as slightly below average. Judges also believed that although listeners might attempt to apply the advice given to themselves, the effects would probably be inconsequential. To assess further social support functions, hosts' responses were classified by means of a counselor response inventory system (Hill, 1978) and then analyzed with House's (1981) fourfold taxonomy of social support. Nearly three fourths of the hosts' statements qualified as types of social support; their responses fell primarily in the category of *informational support* (i.e., provision of advice, suggestions, and directives), which was followed by *emotional support* (i.e., expressions of care and concern), and then by *appraisal support* (i.e., validation). The category of *instrumental support* was not relevant, because hosts do not provide tangible assistance to callers. Levy concluded that radio psychology programs may be a moderately valuable source of social support; even at their worst, they appear to be a relatively benign phenomenon.

### The Present Study

A different approach toward the investigation and evaluation of radio psychology talk shows would be to make real-world comparisons of verbal style between radio hosts and other professional and nonprofessional helpers. By doing so, the literature on counselor behaviors may provide relevant theoretical models and thereby aid in an understanding of the phenomenon.

The purpose of the present study was to follow up the research of Levy (1989) by evaluating the ways in which hosts' counseling style is similar to and different from a variety of therapeutic orientations and other help-giving approaches. Specifically, we chose to focus on the following questions: What counseling techniques and strategies do radio psychologists employ in attempting to help callers? What treatment models do they follow? Which therapeutic orientations match most closely their helping style? To address these issues, Hill's (1978) taxonomy of counselor responses was used to compare hosts' verbal behaviors to those of Carl Rogers, Fritz Perls, and Albert Ellis (Hill, Thames, & Rardin, 1979), and to groups of mental health professionals, family practice lawyers, and nonprofessional mutual-help group leaders (Toro, 1986).

### Method

#### *Materials*

Stimulus materials<sup>2</sup> were transcripts of 12 caller-host conversations which had been recorded (with permission) directly from radio broadcasts. The initial pool of radio hosts included only licensed psychologists who were members of APA. To maximize the representativeness of the final sample of hosts, the pool was stratified by sex and by geographic location (viz., Southeast, Northwest, Southwest, and Northeast regions of the United States). Random selection from this pool resulted in a final sample of 4 hosts (1 man from Atlanta, 1 man from Seattle, 1 woman from Los Angeles, and 1 woman from New York). The only criteria for call selection were (a) audibility and (b) that the call dealt with a "psychological" problem (i.e., not pertaining to extraneous subject matter such as sports, politics, or weather). For each host, three calls were randomly selected and transcribed. Of the callers, there was an equal number of men and women. (For a more detailed description of stimulus materials, see Levy, 1989.)

#### *Coding System*

Transcripts of all 12 conversations were coded with the Hill Counselor Verbal Response Category System (HCVRCS; Hill, 1978). Hill developed the HCVRCS by integrating elements of 11 existing systems and then revising the resultant system through the use of transcripts and by feedback from expert psychologists. The HCVRCS consists of 14 nominal, mutually exclusive categories for assessing counselor verbal behavior: (1) minimal encourager (e.g., "Mm-hmm," "Go on," "I see"); (2) approval-reassurance; (3) information (e.g., giving facts, resources); (4) direct guidance (e.g., giving directives or advice); (5) closed question; (6) open question; (7) restatement (of verbal content); (8) reflection (of stated or implied feelings or emotions); (9) nonverbal referent (i.e., pointing out aspects of nonverbal behavior); (10) interpretation; (11) confrontation (i.e., pointing out contradictions or discrepancies); (12) self-disclosure; (13) silence (i.e., a

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<sup>2</sup>The authors express their thanks to J. D. Goodchilds, who provided the stimulus materials (transcripts) for this study.

pause of 5 seconds); and (14) other. A training manual for the HCVRCS (Hill, Greenwald et al., 1981) provides definitions and examples of client-counselor exchanges for each category.

In her discussion of the psychometric properties of the HCVRCS, Hill (1978) concluded that the instrument had acceptable levels of agreement between raters, content validity, and face validity. A kappa ( $k$ ) statistic (see discussion below) has been used to assess interrater reliability for the HCVRCS in three prior studies:  $k = .71$  (Hill et al., 1979);  $k = .79$  (Hill, Charles, & Reed, 1981); and  $k = .77$  (Toro, 1986).

#### *Procedure for Unitizing and Categorizing*

Using rules adapted from Auld and White (1956), the first author divided hosts' statements from all 12 calls into "response units" (i.e., independent clauses consisting minimally of a subject, object, and verb), which resulted in a total of 901 units. Each unit then was placed into one of the HCVRCS categories. Rater expectancy effects were not seen as a threat to the reliability of this procedure due to the absence of a priori hypotheses in the study.

A second rater<sup>3</sup>, who was blind to the nature and purpose of the study, was employed to assess interrater reliability. Training took 1 hour and consisted of reviewing and discussing the HCVRCS manual (Hill, Greenwald et al., 1981). The second rater then independently unitized and categorized hosts' responses for two complete conversations (a total of 88 units), which had been randomly selected.

The procedure for unitizing host responses yielded an average interrater agreement score of 89%. This compares favorably to the results found in previous studies (e.g., Hill, 1978; Hill et al., 1979; Toro, 1986). Interrater agreement for categories was assessed by calculating a kappa ( $k$ ) statistic, which is an indicator of the proportion of agreement between two judges after chance agreement has been removed. Despite some criticisms of this statistic (see Uebersax, 1987), most authors (e.g., Bakeman & Gottman, 1986; Cohen, 1960; Tinsley & Weiss, 1975) contend that this is the appropriate measurement technique for determining agreement levels with nominal data. For the independent judgments on all HCVRCS categories,  $k = .75$ , which indicates relatively high agreement between the raters.

#### *Comparison Studies*

To evaluate further radio hosts' verbal style, their responses were compared with the results from two other studies (Hill et al., 1979; Toro, 1986) that employed the HCVRCS to investigate counselors' verbal behaviors. In the first study, Hill and her associates (1979) used the HCVRCS to analyze transcripts of films of Carl Rogers, Fritz Perls, and Albert Ellis, who each counseled the same client, Gloria, in *Three Approaches to Psychotherapy* (Shostrum, 1966). Hill et al. determined that the system was able to detect behavioral differences reflective of the three counselors' differing theoretical orientations. In the second study, Toro (1986) investigated natural and professional helpers by using the HCVRCS to compare the verbal style of three groups: 14 mental health professionals (psychologists and social workers), 14 family practice lawyers, and 14 leaders of mutual-help groups (who had no professional training in mental health or law). Members of each group saw a female "helpee" who portrayed the role of a separated woman who was considering divorce.

<sup>3</sup>The authors thank Bruce L. Shapiro.

## Results

Table 1 presents the proportion of usage of each HCVRCS category of counselor responses summed across all four radio hosts.<sup>4</sup> Averaging across all 12 calls, hosts' comments were categorized most frequently as direct guidance (19%), information (18%), and minimal encourager (16%), followed by interpretation (10%), closed question (9%), open question (6%), approval-reassurance (6%), and restatement (4%). These eight categories accounted for 88% of the total response units. None of the hosts had responses in either of two categories: nonverbal referent and silence.

Table 1 also displays the usage of each HCVRCS category for Carl Rogers, Fritz Perls, Albert Ellis, mental health professionals, family practice lawyers, and mutual-help group leaders. As can be seen, over half of Rogers' verbalizations (53%) fell under the category of minimal encourager, followed by restatement (11%), interpretation (7%), reflection (7%), and information (7%). These five categories accounted for 85% of his total response units. Perls used direct guidance (19%), information (12%), interpretation

Table 1  
Percentage of Total Responses in Each HCVRCS Category for Radio Hosts, Rogers, Perls, Ellis, Mental Health Professionals, Lawyers, and Mutual-Help Group Leaders

Category	RH <sup>a</sup>	CR <sup>b</sup>	FP <sup>b</sup>	AE <sup>b</sup>	MH <sup>c</sup>	LW <sup>c</sup>	GL <sup>c</sup>
1. Minimal encourager	16	53	8	14	18	6	6
2. Approval-reassurance	6	1	5	1	4	3	6
3. Information	18	7	12	30	29	59	40
4. Direct guidance	19	0	19	21	8	6	10
5. Closed question	9	2	6	6	19	19	10
6. Open question	6	1	10	3	7	2	4
7. Restatement	4	11	5	5	8	3	6
8. Reflection	1	7	1	2	3	1	2
9. Nonverbal referent	0	0	5	0	*	*	*
10. Interpretation	10	7	12	12	1	*	1
11. Confrontation	2	2	6	1	1	*	1
12. Self-disclosure	3	1	1	0	*	*	12
13. Silence	0	2	1	0	1	*	1
14. Other/unclassifiable	6	4	8	5	1	1	1
Total raw units	901	298	253	181	257	384	285

Note. HCVRCS = Hill Counselor Verbal Response Category System; RH = radio hosts; CR = Carl Rogers; FP = Fritz Perls; AE = Albert Ellis; MH = mental health professionals (psychologists and social workers); LW = family practice lawyers; GL = mutual-help group leaders.

\* = less than .4% or not reported due to low variability.

<sup>a</sup> = From "Social Support and the Media: Analysis of Responses by Radio Psychology Talk Show Hosts" by D. S. Levy, 1989, *Professional Psychology: Research and Practice*, 20(2), p. 77. <sup>b</sup> = From "Comparison of Rogers, Perls, and Ellis on the Hill Counselor Verbal Response Category System" by C. E. Hill, T. B. Thames, and D. K. Rardin, 1979, *Journal of Counseling Psychology*, 26(3), p. 201. <sup>c</sup> = From "A Comparison of Natural and Professional Help" by P. A. Toro, 1986, *American Journal of Community Psychology*, 14(2), p. 153.

<sup>4</sup>Portions of these data were presented at the annual meeting of the Western Psychological Association, April, 1988, in San Francisco.

(12%), open question (10%), minimal encourager (8%), closed question (6%), confrontation (6%), approval-reassurance (5%), and nonverbal referent (5%). These nine categories accounted for 83% of his total responses. Ellis used mostly information (30%), direct guidance (21%), minimal encourager (14%), interpretation (12%), closed question (6%), and restatement (5%). These six categories accounted for 88% of his total response units.

Mental health professionals used information (29%), closed question (19%), minimal encourager (18%), direct guidance (8%), restatement (8%), and open question (7%). These six categories accounted for 89% of their responses. Well over half of lawyers' responses (59%) were in the form of information, followed by closed question (19%), minimal encourager (6%), and direct guidance (6%). These four categories accounted for 90% of their response units. Last, mutual-help group leaders used information (40%), self-disclosure (12%), closed question (10%), direct guidance (10%), minimal encourager (6%), approval-reassurance (6%), and restatement (6%). These seven categories accounted for 90% of their responses.

To compare the overall verbal style of radio hosts to that of the other counselors, Spearman rank-order correlations were calculated utilizing the CORR procedure within the Statistical Analysis System (SAS; SAS Institute, Inc., 1985). The correlation coefficients then were compared by a *t* statistic using a procedure recommended by Hotelling (1940). To perform all post hoc between-counselor comparisons of HCVRCS category proportions, *z* scores were computed. (See Walker & Lev, 1953.) The *p* level for each *z* test was set, a priori, at .02 (two-tailed) to minimize the risk of experiment-wise Type I error ( $\alpha_{EW}$ ) due to multiple comparisons. Because directional predictions were not specified, two-tailed tests were performed for all calculations.

Results (see Table 2) show that radio hosts' verbal behavior was highly and significantly correlated with that of Ellis ( $r_s = .91, p < .001$ ). Visual inspection of Table 1 reveals that both Ellis and hosts relied heavily on offering information, direct guidance, and interpretations and that they both rarely restated or reflected. Compared to Ellis, however, radio hosts offered more approval and reassurance ( $z = 2.86, p < .005$ ) and were more self-disclosing ( $z = 2.31, p < .02$ ).

Hosts' verbal style also strongly resembled that of Perls ( $r_s = .84, p < .001$ ). In fact, the correlation between radio hosts and Perls was not significantly different from

Table 2  
Matrix of Pairwise Spearman Correlation Coefficients of HCVRCS Categories for Radio Hosts, Rogers, Perls, Ellis, Mental Health Professionals, Lawyers, and Mutual-Help Group Leaders

	RH	CR	FP	AE	MH	LW	GL
RH	—						
CR	.19	—					
FP	.84	.06	—				
AE	.91	.45	.82	—			
MH	.70	.38	.47	.77	—		
LW	.73	.23	.46	.75	.95	—	
GL	.59	.04	.18	.46	.64	.72	—

Note. Correlations were derived from the data in Table 1. HCVRCS = Hill Counselor Verbal Response Category System; RH = radio hosts; CR = Carl Rogers; FP = Fritz Perls; AE = Albert Ellis; MH = mental health professionals (psychologists and social workers); LW = family practice lawyers; GL = mutual-help group leaders.

the correlation between hosts and Ellis,  $t(11) = -1.11, p > .20$ . Both Perls and radio hosts offered direct guidance, information, and interpretations; Perls, however, used more nonverbal referents ( $z = -6.84, p < .0001$ ) and confrontations ( $z = -3.45, p < .001$ ).

Radio hosts bore almost no resemblance to Rogers ( $r_s = .19, p < .50$ ). Further, the correlation between hosts and Rogers was significantly lower than were the correlations both between hosts and Ellis,  $t(11) = -6.78, p < .001$ , and between hosts and Perls,  $t(11) = -3.05, p < .02$ . In stark contrast to radio hosts, Rogers mainly encouraged ( $z = -12.88, p < .0001$ ), reflected ( $z = -6.66, p < .0001$ ), and restated ( $z = -4.84, p < .0001$ ) the client's remarks.

A comparison of the profile of radio hosts with that of lawyers ( $r_s = .73, p < .005$ ) showed that both groups were moderately similar in overall verbal style; lawyers, however, relied almost exclusively on giving information and asking closed questions; by contrast, hosts offered more interpretive comments ( $z = 6.46, p < .0001$ ), advice ( $z = 5.95, p < .0001$ ), minimal encouragers ( $z = 4.71, p < .0001$ ), and reassurance ( $z = 2.39, p < .02$ ).

Despite the overall profile similarity between radio hosts and Toro's sample of mental health professionals ( $r_s = .70, p < .01$ ), a number of differences were evident. Hosts gave more interpretations ( $z = 4.63, p < .0001$ ) and direct guidance ( $z = 4.12, p < .0001$ ), and were more self-disclosing ( $z = 2.76, p < .006$ ). By contrast, the mental health professionals asked more closed questions ( $z = -4.18, p < .0001$ ) and gave more information ( $z = -3.82, p < .0001$ ). Both groups used approximately equivalent proportions of minimal encouragers ( $z = -0.9, p > .30$ ).

Radio hosts were only moderately similar in overall verbal style to mutual-help group leaders ( $r_s = .59, p < .05$ ). The group leaders offered more information ( $z = 7.56, p < .0001$ ) and made more self-disclosures ( $z = -6.07, p < .0001$ ); in fact, the group leaders stood out markedly from all other counselors in being more self-revealing. Compared to group leaders, hosts made more interpretive comments ( $z = 4.95, p < .0001$ ) and gave more direct guidance ( $z = 3.46, p < .001$ ).

### Discussion

Results show that in terms of overall verbal style, radio hosts strongly resembled Albert Ellis and Fritz Perls; all were highly active and directive in their counseling interactions. This was evidenced by their primary reliance on providing direct guidance (advice), information, and interpretations, coupled with their minimal use of reflections and restatements.

Despite this similarity in the overall profiles, however, there were notable differences in specific verbal behaviors. For instance, hosts were more reassuring and self-disclosing than was Ellis, and were less confrontational than was Perls. Further, the overall profile similarities should not be interpreted as necessarily reflecting an inherent concordance in theoretical orientation between the counselors. For example, Ellis' theory of Rational-Emotive Therapy (RET; Ellis, 1984; Ellis & Bernard, 1985) maintains that behavioral problems are due to the individual's irrational belief system. For Ellis, therapy is a reeducation process, which consists of challenging faulty cognitions and replacing them with more rational beliefs. Thus, Ellis' directive style in therapy is due to his reeducative (rather than exploratory or emotionally reassuring) stance. Perls' directive style is due, by contrast, to a different set of counseling objectives. Specifically, Gestalt therapy focuses on the individual's awareness of here-and-now experiencing, the resolution and integration of conflicting intrapsychic polarities and unfinished situations, and the assumption



of one's own personal responsibility in the transcendence from environmental support to self-support (Perls, 1969; Perls, Hefferline, & Goodman, 1976). Although the overall verbal style of radio hosts may be attributable to their own respective theoretical orientations, it is speculated here that their directive approach is probably due in no small measure to the inherent demands of radio broadcasting (e.g., time constraints, pressure for problem resolution).

Hosts were extremely dissimilar to Carl Rogers, whose nondirective approach encourages client initiative and involvement. In Rogers' client-centered therapy, the counselor tends to avoid probing questions, interpretations, criticism, praise, or reassurance (Beador & Rogers, 1984; Rogers, 1951). This theoretical orientation was reflected in the findings that, to a much greater extent than hosts, Rogers encouraged the client to talk and offered more reflections and restatements. One implication of these findings is that Rogers' reflective style, although suitable in one-to-one therapy, may be inappropriate to the medium of radio, where the host is talking with one person but actually is communicating information to many. Clearly, radio must give primary consideration to the broader audience; it cannot focus on providing counseling to one person.

Both lawyers and hosts were active in verbal style; lawyers, however, gave more information and asked more closed-ended (i.e., fact-finding) questions, whereas hosts provided more interpretations, advice, encouragers, and reassurance. These differences appear to reflect each group's respective helping orientation, with lawyers placing greater emphasis on the collection and communication of facts and knowledge, and with hosts focusing more on feelings and insight.

Nonprofessional mutual-help group leaders were only mildly similar to hosts in overall verbal style. Compared to hosts, the group leaders provided more information and were more self-disclosing, whereas hosts gave more interpretations and direct guidance. These findings appear to reflect differences in social role functioning, with radio hosts cast in the role of experts in problem solving, and group leaders serving as educated peers.

It should be noted that differences in respondent groups as well as in method may affect the comparisons among these investigations. Because each study employed a different methodology, this may limit the extent to which valid inferences can be drawn. For example, Toro used a role-playing paradigm and focused specifically on the issue of marital disruption. In the Hill et al. study, all three therapists worked independently with the same client in a didactic film intended to demonstrate different theoretical orientations. In the present study, encounters were over the telephone and involved a number of different callers and problems. Finally, session length was not constant between studies.

These limitations notwithstanding, there are several advantages to making such comparisons. First, because all three studies used the same system to classify counselor verbal behavior, potential problems involving measurement reliability are minimized. Second, at very least, these comparisons offer a rough approximation of verbal styles, the most noteworthy of which is a distinction between directive and nondirective counselor behavior. Third, the orientations of other counselors provide an initial bench mark against which radio hosts may be compared. Fourth, such an analysis may have heuristic value in laying the groundwork for more controlled and systematic investigations in this area.

One especially important direction deserving further focus and exploration concerns hosts' provision of advice and information. A number of authors (e.g., Bouhoutsos, 1983b; Raviv et al., 1989; Schwebel, 1982) have strongly emphasized that such radio programs can be of particular benefit to community populations in achieving educational

and preventive goals by disseminating psychological information and encouraging the use of community resources. The results of this study indicate that hosts do, in fact, provide a great deal of advice and information to callers. However, prior research (Levy, 1989) suggests that the *quality* of their advice may be substandard. Clearly, if a primary goal of hosts is to provide helpful advice and information to their callers and the listening audience, improvement in this domain is indicated.

The question of advice and information aside, radio psychology talk shows may be of benefit to callers due to "nonspecific factors," or the "placebo effect," of psychotherapy. (See Butler & Strupp, 1986.) These terms refer to qualities of the helper-helpee relationship that, although not specific to any particular theory or technique, may be responsible for therapeutic change. Such qualities might include the caller's expectations, the host's prestige and status, and an atmosphere of respect, acceptance, warmth, and empathy between caller and host. Several researchers (Eysenck, 1985; Koegler, Brill, Epstein, & Forgy, 1964; Prioleau, Murdock, & Brody, 1983; Smith & Glass, 1977; Stiles, Shapiro, & Elliot, 1986) have concluded that there is no significant difference between the benefits of traditional verbal psychotherapy and placebo activities. These authors found that placebo tasks were equally effective as were therapy conditions in producing positive change in the research participants. This suggests that the act of simply calling in to radio talk shows may be helpful, irrespective of the actual content of the conversations.

In conclusion, radio psychology call-in shows represent a major outreach of psychologists into the public sector and can be an important resource for community mental health. The programs are particularly well-suited to provide psychologically oriented information to large numbers of diverse community populations. As a consequence, it is recommended, in the strongest possible terms, that hosts should constantly seek to acquire and dispense the most relevant and current psychological research findings, as well as the most appropriate referrals to specific resources in the community. The programs also may be of benefit by providing for members of the community—particularly those with limited social or financial resources—a relatively accessible forum in which the very act of calling in and being heard might be helpful.

### References

- American Psychological Association. (1977). *Ethical standards of psychologists*. Washington, DC: Author.
- American Psychological Association. (1981). *Ethical principles of psychologists*. Washington, DC: Author.
- Association for Media Psychology. (1982). *Guidelines*. Santa Monica, CA: Author.
- Auld, F., & White, A. M. (1956). Rules for dividing interviews into sentences. *Journal of Psychology*, 42, 273-281.
- Bakeman, R., & Gottman, J. (1986). *Observing interaction: An introduction to sequential analysis*. New York: Cambridge University Press.
- Beador, B. D., & Rogers, C. R. (1984). Person-centered therapy. In R. Corsini (Ed.), *Current psychotherapies* (3rd ed., pp. 142-195). Itasca, IL: Peacock.
- Bouhoutsos, J. C. (1983a). Media psychology. *Clinical Psychology Newsletter*, 36(2), 32-35.
- Bouhoutsos, J. C. (1983b). The mental health profession and the media. In P. A. Keller & L. G. Ritt (Eds.), *Innovations in clinical practice: A source book* (Vol. 3, pp. 361-370). Sarasota, FL: Resource Exchange.
- Bouhoutsos, J. C., Goodchilds, J. D., & Huddy, L. (1986). Media psychology: An empirical study of radio call-in psychology programs. *Professional Psychology: Research and Practice*, 17(5), 408-414.
- Butler, S. F., & Strupp, H. H. (1986). Specific and nonspecific factors in psychotherapy: A problematic paradigm for psychotherapy research. *Psychotherapy*, 23(1), 30-40.
- Cohen, J. (1960). A coefficient of agreement for nominal scales. *Educational and Psychological Measurement*, 20, 37-46.

- Ellis, A. (1984). Rational-emotive therapy. In R. Corsini (Ed.), *Current psychotherapies* (3rd ed., pp. 196-238). Itasca, IL: Peacock.
- Ellis, A., & Bernard, M. E. (1985). What is rational-emotive therapy (RET)? In A. Ellis & M. E. Bernard (Eds.), *Clinical applications of rational-emotive therapy* (pp. 1-30). New York: Plenum Press.
- Eysenck, H. J. (1985). Psychotherapy effects: Real or imaginary? *American Psychologist*, *40*, 239-240.
- Hill, C. E. (1978). Development of a counselor verbal response category system. *Journal of Counseling Psychology*, *25*, 461-468.
- Hill, C. E., Charles, D., & Reed, K. G. (1981). A longitudinal analysis of changes in counseling skills during doctoral training in counseling psychology. *Journal of Counseling Psychology*, *28*, 203-212.
- Hill, C. E., Greenwald, C., Reed, K. G., Charles, D., O'Farrell, M. K., & Carter, J. A. (1981). *Manual for counselor and client verbal response category systems*. Columbus, OH: Marathon Consulting & Press.
- Hill, C. E., Thames, T. B., & Rardin, D. K. (1979). Comparison of Rogers, Perls, and Ellis on the Hill Counselor Verbal Response Category System. *Journal of Counseling Psychology*, *26*, 198-203.
- Hotelling, H. (1940). The selection of variates for use in prediction, with some comments on the general problem of nuisance parameters. *Annals of Mathematical Statistics*, *11*, 271-283.
- House, J. S. (1981). *Work stress and social support*. Reading, MA: Addison-Wesley.
- Keith-Spiegel, P., & Koocher, G. (1985). *Ethics in psychology: Professional standards and cases*. New York: Random House.
- Klonoff, E. (1983). A star is born: Psychologists and the media. *Professional Psychology: Research and Practice*, *14*(6), 847-854.
- Koegler, R. R., Brill, N. Q., Epstein, L. J., & Forgy, E. W. (1964). A psychiatric clinic evaluates brief-contact therapy. *Mental Hospitals*, *15*(10), 564-570.
- Levy, D. A. (1989). Social support and the media: Analysis of responses by radio psychology talk show hosts. *Professional Psychology: Research and Practice*, *20*(2), 73-78.
- McCall, R. B., & Stocking, S. H. (1982). Between scientists and public: Communicating psychological research through the mass media. *American Psychologist*, *37*, 985-995.
- Perls, F. S. (1969). *Gestalt therapy verbatim*. Lafayette, CA: Real People Press.
- Perls, F. S., Hefferline, R. F., & Goodman, P. (1976). *Gestalt therapy: Excitement and growth in the human personality* (2nd ed.). New York: Julian Press.
- Prioleau, L., Murdock, M., & Brody, N. (1983). An analysis of psychotherapy versus placebo studies. *The Behavioral and Brain Sciences*, *6*, 275-310.
- Pryzwansky, W. B., & Wendt, R. N. (1987). *Psychology as a profession: Foundations of practice*. New York: Pergamon.
- Raviv, A., Raviv, A., & Yunovitz, R. (1989). Radio psychology and psychotherapy: Comparison of client attitudes and expectations. *Professional Psychology: Research and Practice*, *20*(2), 67-72.
- Rice, B. (1981, December). Call-in therapy: Reach out and shrink someone. *Psychology Today*, *15*(2), pp. 39-41; 44; 87-88; 91.
- Ricks, J. M. (1984, December). Radio, social support, and mental health. *Canada's Mental Health*, *32*(4), 13-15.
- Rogers, C. R. (1951). *Client-centered therapy*. Boston: Houghton Mifflin.
- Rubinstein, C. (1981, December). Who calls in? It's not the lonely crowd. *Psychology Today*, *15*, 89-90.
- SAS Institute, Inc. (1985). *SAS user's guide: Statistics, version 5 edition*. Cary, NC: SAS Institute.
- Schwebel, A. I. (1982). Radio psychologists: A community psychology/psycho-educational model. *Journal of Community Psychology*, *10*, 181-184.
- Shostrum, E. L. (Producer). (1966). *Three approaches to psychotherapy*. [Film]. Santa Ana, CA: Psychological Films.
- Smith, M. L., & Glass, G. V. (1977). Meta-analysis of psychotherapy outcome studies. *American Psychologist*, *32*, 752-760.
- Stiles, W. B., Shapiro, D. A., & Elliot, R. (1986). "Are all psychotherapies equivalent?" *American Psychologist*, *41*(2), 165-180.
- Tinsley, H. E. A., & Weiss, D. J. (1975). Interrater reliability and agreement on subjective judgments. *Journal of Counseling Psychology*, *22*, 358-376.
- Toro, P. (1986). A comparison of natural and professional help. *American Journal of Community Psychology*, *14*(2), 147-159.
- Uebbersax, J. S. (1987). Diversity of decision-making models and the measurement of interrater agreement. *Psychological Bulletin*, *101*(1), 140-146.
- Walker, H. M., & Lev, J. (1953). *Statistical inference*. New York: Holt.