

Gender in the Context of Supportive and Challenging Religious Counseling Interventions

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This study explored an interactive framework for understanding how gender influences the counseling process in religious counseling. Participants ($N = 314$) viewed 1 of 16 videotapes in which either a male or female counselor interacted with a male or female client about a religious problem. Counselors either supported or challenged the clients' religious values. It was found that female counselors were perceived as more religious and effective than were their male counterparts. Multiple regression was used to demonstrate that perception of counselors' religiousness partially mediates the influence of gender on perceived effectiveness of the counselor. Results illustrate that the effects of gender on the counseling process can be predicted with an interactive model. Participants' religiousness also interacted with intervention type to influence their perceptions of the counselors.

The influence of gender in counseling process and outcome has been vigorously debated among psychologists for more than two decades. This debate was initially stimulated by concerns that all people, irrespective of gender, be provided with high-quality treatment (Broverman, Broverman, Clarkson, Rosenkrantz, & Vogel, 1970; Nelson, 1993; Parloff, Waskow, & Wolfe, 1978). Surprisingly, recent reviews of the empirical literature (Atkinson & Schein, 1986; Beck, 1988; Beutler, Machado, & Neufeldt, 1994; Garfield, 1994; Nelson, 1993; Sexton & Whiston, 1991) have concluded that gender has little consistent influence on counseling process and outcome. Given the salience of gender in social discourse, why are gender differences so inconsistent, and why are they so small when researchers do find them? Aside from the obvious but unlikely explanation that gender differences simply do not exist, two other explanations seem plausible.

First, empirical research on gender may rely on inadequate methodology. As Beutler et al. (1994) have observed, experimental and quasi-experimental studies (e.g., Jones, Krupnick, & Kerig, 1987; Jones & Zoppel, 1982) tend to find gender differences in counseling outcomes (i.e., that female counselors have better outcomes than male counsel-

ors), whereas correlational studies find no such differences (Beck, 1988; Hunt, Carr, Dagodakis, & Walker, 1985; Sexton & Whiston, 1991). After reviewing the empirical literature, Nelson (1993) recommended conducting studies with greater internal validity, higher statistical power, and more homogeneous samples to investigate the effects of gender in counseling more precisely.

Second, Nelson (1993) noted that, because gender accounts for only 1% to 5% of the variance in most meta-analytic investigations, gender alone is perhaps a poor predictor of complex phenomena such as counseling process and outcome (see also Gilbert, 1992). As a remedy, Nelson (1993) proposed that gender might be more fruitfully investigated via an interactive model (Deaux & Major, 1987; Eagly, 1987; cf. Glidden-Tracey & Wagner, 1995).

An Interactive Model for Understanding Gender Differences

Nelson (1993) suggested that counseling can be conceptualized as a sequence of interpersonal interactions in which clients and counselors both perceive, and are perceived by, each other. Each person's gender-related beliefs influence his or her perceptions of, and thus interactions with, the other person. For example, if a client believes that women are more nurturant and kind than are men, the client may perceive nurturance and kindness from a female counselor to a greater degree than the client would if the counselor were male. If the client's gender-related beliefs were less salient, the beliefs would have less influence on perceptions of and interactions with counselors. Moreover, if gender is salient to the client's self-concept, then his or her gender schemas (Bem, 1981) will shape his or her actions in a therapeutic situation. For example, if a male client believes that men should not express emotions and that gender-related belief is activated in a counseling session, the client

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may avoid exploring his emotions in the session, even if he perceives that his female counselor is unusually nurturing and kind. If gender is not salient to the man's self-concept, he may be more open to exploring his affect.

Likewise, a counselor might also use gender-related beliefs to perceive and ascribe meaning to the actions of the client and, thus, to inform therapeutic decisions. If gender schemas are salient for a counselor, the counselor will interpret his or her clients' behavior on the basis of those schemas (e.g., "This client, by virtue of being female, is acting in a submissive and docile way"). As well, if gender is salient to a counselor's self-concept, then his or her behavior during therapy will be shaped by gender beliefs (e.g., "As a woman counselor, I should communicate empathy and kindness"). If gender were less salient to a female counselor's self-concept, she might choose different therapeutic interventions.

In this interactive fashion, clients' and counselors' gender-related beliefs create gender differences in the processes and outcomes of counseling. Yet, which gender-related beliefs are most important for clients and counselors in a given context? Gender-related behavior is always embedded in a social context (Deaux & Major, 1987; Eagly, 1987). Identifying the unique meaning ascribed to gender in a given social or therapeutic context may be an important first step in predicting how gender (and counselors' and clients' gender schemas) influences counseling process and outcome in that context.

One interesting context for examining gender in counseling is religious counseling. Religious counseling might be defined as counseling (a) that involves content associated with an organized religion, (b) that involves an explicitly religious content, or (c) that addresses, to some degree, clients' religious concerns (Worthington, Kurusu, McCullough, & Sandage, 1996). Although many counseling psychologists have considered the influence of religion on counseling process and outcome (Guinee & Tracey, 1995; Johnson & Ridley, 1992; Keating & Fretz, 1990; McCullough & Worthington, 1995; Morrow, Worthington, & McCullough, 1993; Pecnik & Epperson, 1985; Worthington, 1988), research on religious counseling has not been extended to considerations of gender. Religious counseling might be a good context for understanding gender for two reasons.

First, many clients seek religious counseling, and counseling in religious contexts is increasing (Worthington et al., 1996). Given the prevalence of religious counseling, understanding the influence of gender in this particular context might generalize to an appreciable proportion of many counselors' actual caseloads.

Second, women and men differ in religiousness. Extensive research suggests that women are more religious than men in most cultures and religions (Argyle & Beit-Hallami, 1975; Benson, Donahue, & Erickson, 1989; Coan, 1974; DeBord, 1969; Dutt, 1965). Even though we know of no research that has examined the religious contours of gender stereotypes, we surmise that the differential in the religiousness of men and women might also be reflected in cultural stereotypes about men and women. This gender-related

belief might lead clients to perceive, in the absence of relevant information to the contrary, that female counselors are more religious than their male counterparts on the basis of gender alone. Such a gender-based stereotype about counselors' (or clients') religiousness might directly affect the process and outcome of religious counseling, even though there is little evidence that male and female counselors actually differ in religiousness (Kelly, 1995) and even though men, not women, have historically held most legitimate authority in Western religions. If clients perceive female counselors to be more religious than male counselors, female counselors may also be perceived as better counselors and thus more likely to effect good therapeutic outcomes in religious counseling. This may be especially true in counseling with highly religious clients, because such clients perceive counseling differently than do nonreligious clients (Guinee & Tracey, 1995; Keating & Fretz, 1990; McCullough & Worthington, 1995; Worthington et al., 1996).

Empirical evidence bearing on the interactive model of gender in the context of religious counseling is nonexistent. The one study of gender in religious counseling (Wyatt & Johnson, 1990) found that male and female college students did not differ in their willingness to see, or confidence in the helpfulness of, five counselors who held different views about the place of religion in counseling. However, Wyatt and Johnson's protocol was not designed to explore gender effects in counseling. To gain a more complete picture of how gender influences clients' responses to religious counseling, it is necessary to examine the influence of counselors' gender, clients' gender, clients' religiousness, and events that occur in the counseling session on how clients might (or might not) interpret counselors' religiousness.

One potentially helpful protocol is that of Morrow et al. (1993) and McCullough and Worthington (1995). In those studies, participants viewed one of two videotaped role-plays of a male counselor and a female client interacting regarding a religious issue. The counselor either challenged or supported the client's religious values as a way of addressing her religious problem. These studies found that (a) participants preferred counselors who supported rather than challenged clients' religious values and (b) participants' religiousness interacted with the counselor's response to the clients' religious values: Highly religious participants tended to favor religion-supportive interventions over religion-challenging interventions, whereas less religious participants tended to have no preference or to prefer religion-challenging interventions over religion-supportive interventions. This interaction of participants' religiousness and their preferences for counselors or counseling interventions replicated findings of Keating and Fretz (1990) and Guinee and Tracey (1995).

In the present study, we used the analogue-to-counseling protocol of both Morrow et al. (1993) and McCullough and Worthington (1995)—expanded by considering all gender combinations for participant, counselor, and client—to examine the effects of gender and religiousness on one circumscribed therapeutic situation, that in which participants are perceiving the actions of a counselor with a religious

client. We investigated three hypotheses. First, we hypothesized that a counselor's gender would influence how participants respond to the counselor's interventions that either challenge or support a client's religious values. Consonant with previous experimental studies (Jones et al., 1987; Jones & Zoppel, 1982), we expected to find that participants would rate female counselors more positively than male counselors. Second, in keeping with an interactive model of gender in counseling, we hypothesized that the effects of a counselor's gender on participants' responses to the interventions they observed would be mediated, at least in part, by participants' perceptions of the counselors' religiousness. Third, we expected to replicate studies showing that participants' responses to religious interventions are influenced by the interaction of the clients' religious commitment and qualities of the counselor or the religious interventions themselves (Guinee & Tracey, 1995; Keating & Fretz, 1990; McCullough & Worthington, 1995). In particular, we expected that religious commitment would be positively related to participants' ratings of the counselor in the supportive intervention but negatively related to participants' ratings of the counselor in the challenging intervention. To raise the likelihood that we would indeed find gender effects, we used a large, homogeneous sample and an experimental design (cf. Beutler et al., 1994; Nelson, 1993).

Method

Participants

Participants ($N = 239$) who identified their religious faith as Christian were selected from an initial sample of volunteers ($N = 314$) from introductory psychology courses at a large southeastern university. The sample was diverse with respect to ethnicity (64% White, 23% Black, 9% Asian, and 4% other) and gender (69% female and 31% male). Of the Christian subsample, 30 participants (11 men, 18 women, and 1 individual who did not indicate gender) were used exclusively for manipulation checks.

Instruments

Religious Commitment Inventory (RCI). We measured religious commitment with Worthington, Hsu, Gowda, and Bleach's (1988) RCI. This inventory is composed of 20 Likert-type items that measure motivational and behavioral commitment to a religious value system, irrespective of the content of beliefs in that system. Responses range from *not at all true of me* (1) to *totally true of me* (5). The RCI was developed from a theoretical-rational approach based on Worthington's (1988) theory of how religion influences counseling process and outcome. In previous analogue research (McCullough & Worthington, 1995), the scale's internal (alpha) consistency was .92. The scale had the useful property of predicting how clients responded to two different styles of how counselors might address the clients' religiousness in counseling (McCullough & Worthington, 1995), whereas more traditional measures of religious belief (such as measures of orthodox Christian beliefs) did not predict how clients would respond (McCullough & Worthington, 1995; Morrow et al., 1993).

We refined the construct validity of the RCI in the present study in two ways. First, we conducted a principal-components analysis

of the RCI items in which we forced a one-factor solution. Seventeen of the original 20 items loaded more than .50 on the factor. The factor had an eigenvalue of 9.08 and accounted for 45.4% of total variance. The 20 items and their means, standard deviations, and factor loadings appear in Table 1. The 3 items that did not load on the first factor are denoted.

We summed the 17 items that loaded on Factor 1 into a total score whose internal (alpha) consistency was estimated at .94. As a second step in exploring the RCI's validity, we correlated the 17-item RCI with four other well-established measures of religion that we collected concurrently. The RCI was strongly correlated with intrinsic religious motivation ($r = .82$; Hoge, 1972), a 38-item measure of Christian beliefs and practices ($r = .64$; Bassett et al., 1981), reported frequency of attendance at religious services ($r = .70$), and a single-item measure of religious salience ("How important are your religious beliefs?" $r = .71$). Because our sample was Christian, it is not surprising that RCI scores were strongly related to orthodox Christian beliefs. Furthermore, the correlations of .6 to .8 with single-item measures of religiosity are common in religion research (see Gorsuch, 1984). On the basis of these analyses, we concluded that the scale measured religious commitment with an adequate degree of reliability and validity.

Perception of counselor religiousness. Perception that the counselor was a Christian was measured with one 7-point (0 = *strongly disagree*, 6 = *strongly agree*) Likert-type item: "The counselor seemed like a Christian." This measure was essentially uncorrelated with the RCI ($r = -.14$), suggesting that the measure did not reflect participants' religiousness but, rather, reflected their perceptions of the videotaped counselors' religiousness.

Tape Rating Scale-Revised. Participants' attitudes toward the counselors were measured with a revised version of the Tape Rating Scale (Greenberg, 1969). The instrument was designed with two subscales to measure participants' attraction to the counselor and receptivity to the counselor's influence. The attraction subscale consists of 26 items that describe negative and positive aspects of the counselor's behavior. The receptivity subscale consists of 10 statements concerning participants' attitudes regarding, and willingness to interact with, the counselor. Items were endorsed on a 7-point Likert-type scale ranging from *strongly agree* (1) to *strongly disagree* (7). The Tape Rating Scale has been used in previous analogue investigations of religious values in counseling (Haugen & Edwards, 1976; McCullough & Worthington, 1995; Morrow et al., 1993). In previous research, both subscales demonstrated high internal consistency reliability (.92 and .91, respectively; McCullough & Worthington, 1995).

Because of the high correlations of the attraction and receptivity subscales here ($r = .80$) and in previous research (McCullough & Worthington, 1995), we suspected that these subscales did not accurately reflect the factor structure of the instrument. Therefore, we refined the construct validity of the Tape Rating Scale by conducting a principal-components analysis with varimax rotation using all 36 items. A five-factor solution was obtained after 10 iterations. The first factor, which consisted of 29 items that loaded uniquely on that factor, had an eigenvalue of 17.46 and accounted for 50% of total item variance. Items that loaded on this factor included "I would have confidence that this counselor could help me if I had a problem" and "The counselor gave the client reason to want to return." The internal consistency (alpha) of this factor was estimated at .97. The second factor, which was represented by 3 items and accounted for 7% of total item variance (eigenvalue = 2.40), appeared to measure qualities of the videotaped clients rather than counselors (e.g., "The client felt uncomfortable talking with the counselor"). Thus, we did not retain this factor as a measure in the present study. Factors 3, 4, and 5 were not uniquely

Table 1
Items on the Religious Commitment Inventory and Their Means, Standard Deviations, and Factor Loadings

Item	<i>M</i>	<i>SD</i>	Factor loading
1. I am concerned that my behavior and speech reflect the teachings of my religion	2.40	1.20	.72
2. I make financial contributions to my religious organization	2.29	1.33	.69
3. I often read books and magazines about my faith	1.99	1.17	.74
4. I spend time trying to grow in understanding of my faith	2.60	1.29	.82
5. I have personally tried to convert someone to my faith	1.90	1.31	.66
6. I talk about religion with my friends, neighbors, or fellow workers	2.67	1.25	.63
7. Religion is especially important to me because it answers many questions about the meaning of life	2.97	1.31	.80
8. My religious beliefs lie behind my whole approach to life	2.69	1.33	.80
9. I would break fellowship with my local religious group if there were things said of me that were damaging and untrue	3.37	1.54	.10 ^a
10. I am willing to be persecuted for my religious beliefs	2.87	1.45	.53
11. My living environment (room, apartment, house, office) reflects my religious beliefs (i.e., posters, plaques, bumper stickers)	1.84	1.23	.65
12. I do not accept what I hear in regard to religious beliefs without first questioning the validity of it	3.00	1.23	.17 ^a
13. I would publicly defend my religious beliefs	3.46	1.34	.55
14. It is important to me to conform to my religious standards of behavior	2.84	1.23	.79
15. I enjoy spending time with others of my religious affiliation	2.88	1.32	.75
16. Religious beliefs influence all my dealings in life	2.48	1.32	.81
17. It is important to me to spend periods of time in private religious thought and reflection	2.53	1.35	.75
18. I feel there are many more important things in life than religion	3.87	1.24	.43 ^a
19. I enjoy working in the activities of my religious organization	2.39	1.30	.76
20. I keep well informed about my local religious group and have some influence in its decisions	1.77	1.14	.73

^a Item had a factor loading less than .50 with the first factor and thus was not retained for computing scale scores.

represented by any items and thus were not retained. As a result of this principal-components analysis, then, we retained a one-factor version of the Tape Rating Scale (called the Tape Rating Scale-Revised [TRS-R]).

The TRS-R correlated .65 with an 8-point Likert-type item that read "How would you rate the degree of change that this type of counseling would produce in the client?" (1 = *he or she would be very much worse*, 8 = *he or she would be completely recovered*), .66 with an item that read "How likely do you think it is that the client you just watched will return for next week's session?" (1 = *no way*, 8 = *certain to return*), and .80 with a single-item measure that read "If you had been the client and had just had this interview, how likely is it that you would return for next week's session?" (1 = *no way*, 8 = *certain to return*). Given these high correlations, we concluded that the TRS-R reflected participants' perceptions of the quality of the counseling that they observed with adequate reliability and validity.

Manipulation Check Items

Participants completed a variety of single-item measures designed to examine differences in our stimulus sets resulting from counselor gender, client gender, and interventions. These measures are described in greater detail later.

Stimulus Sets

Sixteen 10-min videotapes that portrayed role-played counseling interactions were modeled after the stimulus set used in Morrow et al. (1993) and McCullough and Worthington (1995). In both previous studies, each tape showed a male counselor interacting with a female client. Within our 16 videotapes, we used four counselors (two male and two female) and four clients (two male and two female). Each of the four counselors completed 2 videos

with a female client (1 supporting the client's religious values and 1 challenging the client's values) and 2 videos with a male client (1 supporting and 1 challenging), resulting in a total of 16 videos. Within this set of videotapes, we completely crossed three independent variables: gender of the counselor, gender of the client, and whether the counselor's intervention was supportive of or challenging to the client's religious values.

The dialogue of the first 7 min of all videos was identical, except for the adjustments necessary to correct for the gender of the client and the counselor. In each, the client presented concerns about feelings of isolation, depression, and interpersonal difficulties. During the interaction, the client expressed guilt and regret over a nonmarital sexual relationship that had recently ended. The client claimed to hold Christian values that prohibited nonmarital sexual activity and claimed that his or her violation of this injunction was producing guilt.

Each videotape depicted a counseling interaction in which a counselor either supported or challenged the religious values of a client who professed to be a Christian. The last 3 min of the scenarios were varied systematically. In the eight videos in which the counselor challenged the client's religious values, the counselor suggested that the client challenge the validity of his or her Christian values (and thus implied a challenge to his or her religious beliefs) and that the Biblical mandates that served him or her well as a child might need to be examined now that the client was an adult. The counselor also suggested that "real healing" would result from the client focusing on what he or she wanted rather than on what the Bible demands.

In the eight videos in which the counselor supported the client's religious values, the counselor encouraged the client to uphold his or her Christian values as important but also suggested that the client overemphasized the moral standards of his or her faith and deemphasized God's forgiveness and mercy. The counselor concluded that real healing would involve the client learning how to make Christ's forgiveness real in his or her life. In both the challenging and supportive interventions, the counselor communicated warmth, empathy, and support for the client's welfare.

Because of concern that a completely supportive intervention would be preferred to a completely challenging intervention simply because the supportive intervention was not challenging, Morrow et al. (1993) constructed both scenarios so that the counselor intentionally challenged some aspect of the client's functioning. At issue, however, is exactly what each intervention challenged. In the supportive intervention, the counselor challenged the client's religious beliefs while supporting the client's religious values and general welfare; in the challenging intervention, the counselor challenged the client's religious beliefs and values while supporting the client's general welfare. Thus, both interventions would undoubtedly be classified as challenging on the basis of Hill and O'Grady's (1985) classification system; however, the supportive intervention appeared supportive of the client's Christian value system, and the challenging intervention appeared antagonistic to that value system.

Manipulation Checks

Previous manipulation checks. Morrow et al. (1993) previously conducted a manipulation check to ensure that the dialogue between the counselor and client was accurately perceived as challenging or supporting the client's religious values. Using a 5-point Likert-type scale ranging from *not at all descriptive* (1) to *perfectly descriptive* (5), students ($N = 59$) judged that the adjective *challenging* was more descriptive of the challenging condition ($M = 3.7$) than of the supportive condition ($M = 2.7$). Using the

same 5-point scale, students also judged that the adjective *supportive* was more descriptive of the supportive condition ($M = 3.5$) than of the challenging condition ($M = 2.5$). Moreover, when asked to choose which of three adjectives (*supportive*, *challenging*, or *ignoring*) best described the counselor's style of treating the clients' religious beliefs, 68% of students chose *challenging* for the challenging condition and 84% chose *supportive* for the supportive condition.

Additional manipulation checks. In the present study, we conducted additional manipulation checks on our versions of the Morrow et al. (1993) and McCullough and Worthington (1995) stimulus sets. First, we showed the challenging and supportive videotapes from the original Morrow et al. (1993) stimulus set to 30 students (16 in the challenging condition and 14 in the supportive condition) from our Christian subsample of 239 participants. This stimulus set involved only a female client and only a male counselor. We compared these students' ratings of the male counselor with ratings by participants who viewed one of the two new videotapes that also featured a different male counselor and a different female client.

We analyzed these data in a 2 (stimulus set: new vs. old) \times 2 (counselor intervention: challenging vs. supportive) analysis of variance (ANOVA) with the TRS-R as the dependent variable. We partitioned the variance into two effects: (a) stimulus set (new vs. old) and (b) the interaction of stimulus set and counselor intervention (via Type I sums of squares). Neither the main effect for stimulus set, $F(1, 96) = 0.99, ns$, nor the interaction of stimulus set and intervention, $F(1, 96) = 0.02, ns$, was significant. Thus, it appeared that our stimulus set was a faithful reproduction the Morrow et al. (1993) and McCullough and Worthington (1995) stimulus set.

New comparison of supportive and challenging conditions. To understand better the meaning of the interventions that were intended to be supportive and challenging of clients' religious values, we had participants complete two 8-point Likert-type items that asked, "If you had a distressed friend who was a Christian (or not a Christian), how likely would you be to refer your friend to this counselor?" (1 = *no way*, 8 = *certainly*). Participants were more likely to refer a Christian to counselors in the supportive condition ($M = 4.86, SD = 1.97$) than to counselors in the challenging condition ($M = 4.38, SD = 2.19$), $t(232) = 1.81, p < .10$. Conversely, they were less likely to refer a non-Christian friend to counselors in the supportive condition ($M = 4.26, SD = 1.94$) than to counselors in the challenging condition ($M = 5.11, SD = 1.94$), $t(232) = -3.34, p < .001$. Thus, it appeared that the supportive condition was interpreted as a pro-Christian form of counseling (more suitable for Christians than for non-Christians) and that the challenging condition was interpreted as a non-Christian or anti-Christian form of counseling (more suitable for non-Christians than for Christians).

Comparison of differences in counselor and client presentations resulting from counselor gender and client gender. We compared the female counselors and male counselors on two 7-point Likert-type items (0 = *strongly disagree*, 6 = *strongly agree*) to explore differences in the presentation of the male and female counselors. Participants perceived that the male counselors ($M = 5.00, SD = 1.40$) and female counselors ($M = 5.11, SD = 1.61$) were equally eager to help the client, $t(207) = 0.50, ns$. Participants also perceived that the male counselors ($M = 4.29, SD = 1.54$) and female counselors ($M = 4.64, SD = 1.78$) were equally warm, $t(207) = -1.53, p > .10$.

We used similar 7-point Likert-type items to explore differences in the presentation of the clients resulting from client gender. Male clients and female clients appeared equally self-critical ($M_s = 6.17$

[$SD = 1.36$] and 6.10 [$SD = 1.08$], respectively), responsive during the session ($M_s = 5.29$ [$SD = 1.30$] and 5.14 [$SD = 1.33$], respectively), and ashamed ($M_s = 5.87$ [$SD = 1.53$] and 5.74 [$SD = 1.25$], respectively), all $t_s < 1.0$. However, the male clients ($M = 5.61$, $SD = 1.40$) appeared more depressed than did the female clients ($M = 5.21$, $SD = 1.45$), $t(207) = 2.00$, $p < .05$.

On the basis of these manipulation checks, we concluded (a) that our stimulus set was a faithful reproduction of the stimulus set used in Morrow et al. (1993) and McCullough and Worthington (1995); (b) that the supportive and challenging conditions were adequately interpreted as most appropriate for Christians and non-Christians, respectively; and (c) that counselors of both genders were perceived as equally warm and eager to help. In addition, male clients appeared slightly more depressed than female clients, although clients were essentially identical on several other traits.

Procedure

The study was conducted in the university's psychology department. After completing a demographic questionnaire and measures of their religiousness, participants viewed 1 of the 16 randomly assigned videotapes. Participants were instructed to place themselves cognitively in the shoes of the client who was depicted in the video. After viewing the videotape, participants completed the TRS-R and the single-item measure of their perceptions of the counselor's religiosity with the instruction of responding to those items as if they had been the client depicted in the videotape. Among male participants who viewed the supportive condition, 20 viewed a male counselor and 12 viewed a female counselor. Among male participants who viewed the challenging condition, 15 viewed a male counselor and 11 viewed a female counselor. Among female participants who viewed the supportive condition, 36 viewed male counselors and 37 viewed female counselors. Among female participants who viewed the challenging condition, 44 viewed male counselors and 34 viewed female counselors.

Results

Descriptive Results

Means and standard deviations for the RCI, perception of the counselor's religiousness, and the TRS-R by counselor gender and intervention appear in Table 2. The RCI correlated $-.14$ ($p < .05$) with perception of counselor religiousness and $.05$ ($p > .10$) with the TRS-R. The TRS-R correlated $.43$ ($p < .001$) with perception of counselor religiousness.

Analysis of Variance

We conducted a 2 (participant gender) \times 2 (counselor gender) \times 2 (client gender) \times 2 (religious intervention: challenging vs. supportive) ANOVA with religious commitment as a continuous factor and TRS-R as the dependent variable. Hypotheses were tested with Type I sums of squares and were based on the general linear model, which allowed us to integrate religious commitment into the ANOVA design as a single degree-of-freedom effect. Interaction terms were entered so that the effects of interactions did not include any variance attributable to the main effects or lower order interactions contained in each interaction.

Table 2
Means and Standard Deviations by Participant Gender, Client Gender, Counselor Gender, and Intervention

Counselor gender and measure	Supportive intervention		Challenging intervention	
	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>
Male participants viewing male clients				
Male				
Religious commitment	40.33	5.11	60.00	13.17
Counselor religiousness	5.00	1.00	3.60	1.67
TRS-R	84.67	38.80	79.60	15.01
Female				
Religious commitment	51.50	16.60	37.20	12.13
Counselor religiousness	5.25	1.26	4.00	0.00
TRS-R	98.75	16.60	94.60	17.47
Male participants viewing female clients				
Male				
Religious commitment	31.93	10.49	44.78	16.01
Counselor religiousness	4.88	1.45	2.50	1.58
TRS-R	78.18	14.60	74.70	18.04
Female				
Religious commitment	33.38	6.48	40.33	9.35
Counselor religiousness	4.38	1.60	3.67	0.82
TRS-R	75.00	23.01	108.50	19.89
Female participants viewing male clients				
Male				
Religious commitment	42.29	16.94	45.44	14.28
Counselor religiousness	4.76	1.35	3.28	1.84
TRS-R	87.72	29.71	78.83	31.95
Female				
Religious commitment	45.50	19.78	44.85	14.93
Counselor religiousness	4.96	1.40	4.00	1.53
TRS-R	83.87	30.05	95.08	22.08
Female participants viewing female clients				
Male				
Religious commitment	37.00	15.94	45.48	15.57
Counselor religiousness	5.06	1.39	3.12	1.68
TRS-R	88.11	25.06	73.35	24.66
Female				
Religious commitment	41.69	16.50	41.71	14.04
Counselor religiousness	5.50	1.29	4.24	1.34
TRS-R	100.50	26.62	98.19	23.74

Note. TRS-R = Tape Rating Scale-Revised.

This analytic plan allowed us to examine the main effects of counselor and client gender and also to explore possible Attribute \times Treatment interactions.

The interaction of counselor gender and condition was significant, $F(1, 169) = 5.89$, $p < .05$. We explored this interaction by examining the simple effects of counselor gender within the supportive and challenging conditions separately. In the supportive condition, the simple effect of counselor gender was not significant, $t(103) = -.70$, *ns*, indicating that participants viewed female counselors and male counselors equally favorably. In the challenging condition, however, the simple effect of counselor gender was significant, $t(102) = -4.77$, $p < .001$, indicating that female therapists were viewed more favorably than male therapists.

The interaction of religious commitment and condition was significant, $F(1, 169) = 9.21$, $p = .01$. For participants

who viewed the supportive intervention, religious commitment was positively correlated with scores on the TRS-R ($r = .31, p < .001$). Conversely, for participants who viewed the challenging condition, religious commitment was negatively correlated with scores on the TRS-R ($r = -.21, p < .05$).

The main effect of counselor gender was also significant, $F(1, 169) = 15.66, p < .0001$. In general, participants rated the sessions with female counselors more favorably ($M = 93.11, SD = 25.72$) than the sessions with male counselors ($M = 80.10, SD = 25.09$). No other effects were significant (all $ps > .05$).

Test of Mediational Hypotheses

Because counselor gender was related to TRS-R scores for participants who viewed the challenging condition, we wanted to investigate whether the effect of counselor gender on participants' reactions to the counselor in the challenging condition was mediated by perceptions of whether the counselor was a Christian. We investigated this hypothesis using a set of multiple regression equations and following a procedure advocated by Baron and Kenny (1986), Judd and Kenny (1981), and West, Aiken, and Todd (1993). First, we confirmed that counselor gender had a significant bivariate relationship with the TRS-R ($\beta = .30, p < .01$) and the hypothesized mediator, perceptions of counselor religiousness ($\beta = .30, p < .01$). We also verified that perceptions of counselor religiousness had a significant bivariate relationship with the TRS-R ($\beta = .47, p < .0001$).

We then conducted two hierarchical regression equations in which the TRS-R was the criterion variable. In the first equation, counselor gender accounted for 18% of the variance in TRS-R scores at the first step. This effect was significant, $F(1, 206) = 22.72, p < .0001$. In the second step, after the effects of counselor gender had been controlled, perceptions of counselor religiousness predicted an additional 13% of the variance in TRS-R scores. This increment was significant, $F(1, 205) = 18.29, p < .0001$. In the second equation, perceptions of counselor religiousness accounted for 22% of the variance in TRS-R scores in the first step. This effect was significant, $F(1, 206) = 28.38, p < .0001$. In the second step, therapist gender predicted an additional 9% of the variance in TRS-R scores. Although this increment was significant, $F(1, 205) = 13.11, p < .001$, it was smaller than the unique contribution of perceptions of counselor religiousness to TRS-R scores, which is consistent with the hypothesis that the effect of counselor gender on TRS-R scores was partially mediated by perceptions of counselor religiousness.

Discussion

In the present study, participants rated female counselors more positively than they rated male counselors. This finding replicated the trend in the general counseling literature: In studies that detect gender differences, clients usually respond more favorably to female counselors than to male

counselors (e.g., Jones et al., 1987; Jones & Zoppel, 1982). This finding is consonant with those of other experimental studies suggesting that clients have more positive perceptions of female counselors than of male counselors (Dacy & Brodsky, 1992; Hill, 1975; Howard, Orlinsky, & Hill, 1970; Jones et al., 1987; Jones & Zoppel, 1982; Kirshner, Genack, & Hauser, 1978; Orlinsky & Howard, 1976). This main effect was qualified by an interaction between counselor gender and intervention, indicating that participants responded more favorably to female counselors only in the challenging intervention. In the supportive intervention, participants responded to male and female counselors equally favorably.

We also found that clients' perceptions of the counselors were influenced by the interaction of clients' religious commitment and the intervention that they watched. Clients' religious commitment was positively related to perceptions of counselors who performed the religion-supportive intervention but negatively related to perceptions of counselors who performed the challenging intervention. This Attribute \times Treatment interaction has also been observed by Guinee and Tracey (1995), Keating and Fretz (1990), and McCullough and Worthington (1995) and was summarized in a review by Worthington et al. (1996). In the present study, the interaction held across counselors of both genders. Because the Attribute \times Treatment interaction generalized across such a relatively large number of counselors, and given the weight of previous work that yielded similar findings, the finding that clients' religious commitment shapes their responses to therapeutic interventions appears to be reliable.

Most important, however, we were able to shed some light on how gender—and, indirectly, clients' gender schemas—might influence clients' responses to counselor gender in the context of the challenging religious intervention. In other words, we were able to address the question of how a counselor's gender is translated into perceptions of the counselor's competence. Although counselor gender accounted for approximately 18% of the variation in TRS-R scores, about 50% of that variance (i.e., 9%) could be explained as a function of the hypothesized mediator between gender and TRS-R scores: perceptions of the counselors' religiousness. These data are consistent with the hypothesis that gender influenced participants' ratings of the counselors who challenged the clients' religious beliefs at least in part (although certainly not exclusively) via the perception that the female counselors appeared to be "Christian" to a greater degree than the male counselors.

From this finding, we infer that, by virtue of their apparent religiousness, female counselors may have acquired the ability to challenge clients' religious beliefs to a greater extent than the seemingly less religious male counselors. The mechanism by which perceptions of the counselors' religiousness might be translated into judgments about their potential effectiveness as counselors, however, remains unclear (although our manipulation checks gave us confidence that differences in the ratings of male and female counselors were not due to differences in apparent warmth or eagerness to help). One helpful avenue for examining the mechanisms

by which gender, religiousness, and perceptions of counselor effectiveness are linked would be through the use of a protocol in which participants are provided with precounseling information about a counselor (e.g., Guinee & Tracey, 1995; Keating & Fretz, 1990; Lewis, Epperson, & Foley, 1989; Wyatt & Johnson, 1990) without viewing any samples of actual counselor behavior. In such a protocol, one could exert more stringent experimental control and manipulate perceptions of the counselors' gender without potentially confounding counselors' gender with other variables. A different approach would be to assess participants' gender schemas, religious schemas, and the interpenetration of these schemas more directly in future studies.

Our study occurred in an analogue setting, and only potential clients, not actual clients, were participants. Obviously, real clients might react differently than did our student participants. As well, the videotapes that participants viewed were only a circumscribed sample of what goes on in counseling (even in religious counseling). Kazdin (1978) suggested that analogue research could differ from clinical research on three dimensions: subjects, treatments, and performance measures. In terms of Kazdin's (1978) analysis, the present study is a remote analogue to actual counseling.

Even so, reducing the context to a small and circumscribed event increased the study's internal validity and statistical power (Nelson, 1993) and helped us find gender-related trends that have been elusive in naturalistic research (Beutler et al., 1994). That is, whereas naturalistic designs have consistently failed to find gender differences in counseling, we did find that gender played a role in influencing participants' ratings of counselors (see also Glidden-Tracey & Wagner, 1995). Thus, we tentatively conclude, along with Beutler et al. (1994) and Nelson (1993), that experimental analogue research with high power will continue to be indispensable for ethically investigating the subtle ways in which a variable such as gender may influence the process or outcome of counseling (for recent examples of analogue research, see Chang, 1994; Glidden-Tracey & Wagner, 1995; Thompson & Jenal, 1994).

Moreover, using an analogue design allowed us to examine a fine-grained theoretical question (i.e., whether gender influences the process of religious interventions via the effects that counselor gender has on participants' perceptions of the counselor's effectiveness) whose conclusions have implications not only for religious counseling but for the study of gender in counseling in general. We intend to further examine the role of gender in the context of religious counseling in future studies that more closely approximate the conditions of actual counseling.

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