CALIFORNIA STATE UNIVERSITY
NORTHRIDGE

VERBAL INTERACTIONAL CHANGES ASSOCIATED
WITH MARATHON COUNSELING

Report of a graduate project submitted in partial
fulfillment of the requirements for the degree of
Master of Arts
Counseling and Guidance

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Approved by

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CHAPTER I

AN INTRODUCTION TO A STUDY ON THE VERBAL INTERACTIONAL CHANGES ASSOCIATED WITH MARATHON COUNSELING

The number of people who are meeting in small groups in homes, doctor's offices, and educational institutions in the hope of becoming less lonely or more self-actualized is staggering. The many different techniques and theoretical ways of involvement used within these groups is of equal magnitude. A review of the literature on group counseling tells us that a great deal more needs to be learned about what happens in these small groups, both positively and at times negatively, that is meaningful to the participants.

The marathon is a specialized form of counseling intervention in which a great many isolated hours are needed for both the leader and the members. Those who select such time extended sessions as their form of counseling, are not using others available to them. Is their time well spent?

Yalom (1970) conducted a study to investigate the acceleration of group interaction as the result of a six
hour time extended session. He found, that the time spent in marathons, used as an adjunct to traditional group counseling, is not of value until the group is well established and closer to the end rather than the beginning of their counseling series.

Stoller (in Solomon and Berzon, 1972) would consider a six hour extended session to be of little, if any, value. If growth is to be expected, he feels, marathons must be at least eighteen hours long and not more than forty eight.

The following study investigates what changes, if any, exist in the verbal behavior patterns of group members as the result of a 12 hour extended session, given early in the life of the group. The basic objective is to further explore the findings of both Stoller and Yalom.
CHAPTER II
SURVEY OF THE LITERATURE

Historical View of Group Counseling

Though group therapy did not begin in earnest until after the second World War, it had its beginnings in the early days of this century. Until the start of the fifties practitioners viewed this kind of counseling simply as a cheaper, less effective way to reach more people. Individual therapy, the only existing model, was merely transplanted to the group situation. Behavior was seen as being determined primarily by intrapsychic components rather than interactional qualities.

Gestalt psychology and the influence of the early T-groups changed this. The group was no longer seen "only as a collection of individuals, but also as a network of interpersonal forces in which each individual affects every other individual at all times, and in which the interplay of forces is constantly changing" (Mintz 1971, p. 37). Group work viewed in this manner, not only provided new and exciting ways to be in counseling and ed-
ucation, but demanded the development of different skills on the part of its leaders. One of the more radical ideas attacked the appropriateness of the medical model for use in therapy. The traditional doctor-patient relationship was being reevaluated and influenced by people like Rogers (1951) and Jourard (1964). The former advancing the curative factors in the therapist possessing unconditional positive regard for his client; the latter extolling the virtues of complete self revelation on the part of the therapist. Many professionals in order to be more effective in their work were investigating the possibilities of mutually spontaneous interactions between themselves and their clients. To achieve this they had to move away from the emotional deprivation that they usually subjected themselves to in their relationships with them. And, in this new reaching out, the expert doctors no longer found their patients to be always the less knowing. Respect for the client and his responsibility in the growth process was increasing.

Not only was concern expressed about the nature of the therapeutic relationship, but the very concept of mental illness was being questioned. Szasz (1960) and Laing (1967) saw people as having difficulties in living rather than possessing a mental disease. Two of the main objections they had to the illness model were that
insanity may be a perfectly rational adjustment to an insane world, and that treating a patient with drugs may actually interfere with the healing capabilities of the mind.

As their view of their clients changed, many therapists began to recognize that patients and ex-patients could help each other in ways that they, the therapist, sometimes couldn't. Many who had never experienced the awesome depths of human emotions were seen by some of their patients as being less able to give the kind of emotional support that they needed to sustain them through their most difficult moments.

What is the business of therapy? This question, and the way it is answered, profoundly effects both individual and group counseling. Is the goal of the group to help change the individual member's behavior from being maladaptive, anti-social or self destructive so that he can then lead a more useful, socially accepted and personally rewarding life (Hill, 1965) or, should the group be concerned with the kinds of goals that Douglas Corey presents in his paper "The Use of Reverse Format in Now Psychotherapy"?

The purpose of therapy is not to change the individual (i.e., to"cure" or remove bad symptoms), but to get the individual to fully embrace the nature of life, the nature of himself, and the fact that he has already chosen for good reason
to lead the life he is leading... The human problem does not lie at the level of social adjustment or symptomatic behavior. Therapy directed at this level is bound to be ineffective. The human problem lies at the level of selfhood; the self does not declare and affirm itself. This is the problem, not the particular configuration that may bear the social label neurotic.

Change and the reaching for new ways in counseling will continue as therapists keep searching to alleviate our alienation from ourselves and others. In the process, respectability for group counseling as a positive means of intervention in people's lives should continue to increase. Hill's (1965) views help to explain why this respectability has come about. He sees the group not only as an expedient and economical way to go, but as possessing unique advantages which the therapist must be oriented toward maximizing. They are effective, he explains, primarily because individual members and their potential are used in the administration of the therapy, and group pressures and processes which result from this are tied into the operating procedures. And, the more participation is equally spread among the members so that interaction is maximized, the greater the potential is for individual growth. Shared participation even at a lower therapeutic level is worth more than high level participation between therapist and one member.
Marathon Research

The time extended session as a specialized technique for accelerating the life cycle of a group has been developed, in recent years, to meet the increasing demands for effective efficient treatment in group work and short-term therapy. Whether it is used as either an experience in itself or as an adjunct to the traditional group counseling, its rapid growth in the last few years and its more bizarre ways of participation have often made it a subject of exploitation by the mass media. There are many questions which need to be answered about this form of group counseling. The one which this study focuses on is: Does the use of an extended session accelerate the group process toward more therapeutic levels?

The answer to this question, and others one might ask, are not easily found in a review of the literature concerned with marathons. For the most part, the studies which are available, and there are not many of them, are weak in experimental vigor. Yalom (1970), Mintz (1971), Miller (1972) and Fullmer (1971) have expressed their disappointment in the existing research in the following areas: small samples, lack of appropriate controls, lack of follow up studies, and questionable populations from which the studies have been drawn.
Yalom (1970) particularly did not like the reliance on anecdotal interviews, or patient self-administered questionnaires which are given shortly after the last meeting and are subject to the powerful tendency to recall only the positive because of group pressure. He felt, also, that a state of cognitive dissonance would occur if the client were to question the value or activities of something he had just invested a great deal of time and energy in. Saretsky (in Mintz, 1971) wrote that the literature appears to suffer from a lack of systematic attempts to formulate sets of principles, postulates, and hypotheses about relationships among the relevant variables which are to be tested. She also expressed the need for more investigation into the analysis of the interaction of group members as opposed to the outcome of that behavior.

Bach and Stoller dominate the field of marathon information. Bach's (1966) definition of a marathon is:

The marathon is a group practicum in intimate authentic interaction. One of the unique aspects of the marathon technique is an intensification and acceleration of transparency and genuine encounter by a deliberate instigation of group pressure focused on behavioral change.

Stoller (in Solomon and Berzon, 1972) defined a marathon in the following way:

A marathon is a continuous, prolonged group
session, set aside from the usual routine, in which significant movement in terms of perception and behavior on the part of group members is anticipated and which is designed to stand as an experience by itself regardless of the arrangements various group members have for additional growth.

I found it helpful to look at the research and articles concerned with extended sessions with the following five questions in mind:

1) What is the philosophical view of man?
2) How do people learn best?
3) What does an extension in time permit that is different from traditional group sessions?
4) What kinds of interaction facilitate growth?
5) What changes can we expect on the part of the participants?

What is the philosophical view of man?
Stoller in an article called "Accelerated Interaction", written in 1968 presented an existential approach in his therapeutic work. His ways of relating are:

1) ahistorical in approach
2) an avoidance of the mental illness model
3) an emphasis on individual responsibility for one's own fate
4) a concentration on the future and the potential for self-actualization rather focusing on difficulties of the past
5) an emphasis on the here and now

How do people learn best?

The views held by Bach and Stoller on how adults learn best are not different in many ways from those held by Piaget on children's learning (Kahn and Galat, 1972). Though strong differences do exist, especially in the use of aggressive behavior, their similarities are:

1) We learn best through our own experience in the present by reacting and being reacted to.

2) We learn best from our peers.

3) Experience, not time, is the prominent agent for change.

4) Without testing perceptions by an honest interaction with the environment, they will become or remain distorted.

5) Feedback, as a reality check, is necessary for growth.

Miller (1972) sees the increase in interpersonal risk during an extended session, a sign that learning is occurring, as the result of reinforcement theory. His conclusions are as follows:

1) Risks are rewarded by group members as well as counselors.

2) New learning is practiced in marathons and sessions that follow.
3) Learning is optimized under conditions of modeling and repeated reinforcements.
4) Longer periods of unbroken interaction minimize losses incurred between the learning trials due to extinction.
5) The tendency of members to deny and suppress new behavior is lessened because group members and leaders act as supportive witness to the new behavior and tend to hold the members to the new contract implicit in the new discoveries and actions. New behavior is practiced.

What does an extension in time permit that is different from traditional group sessions?

In "Innovations to Group Psychotherapy", a book by Gazda (1968), Stoller listed the following as the advantages of time extension:

1) compression and intensity
2) heightened feelings of anxiety and involvement
3) learning does not take as long nor does it require as much trial and error
4) rapidity of learning in a brief time span
5) one trial learning becomes much more feasible

cohesiveness.

For Bach (1966), the time element allows for:

1) breaking out of role-playing
2) group pressure to reach level of behavioral change
3) development of individual's place in group
4) the finding and focusing on potential in each person for change
5) experience of change, practice and reinforcement.
6) breakup of resistant game playing

What kinds of interactions facilitate growth?

Bach in his article Marathon Group Dynamics: I (1967) wrote that he felt that traditional forms of leadership (analytic interpretation) can be harmful to the group process. What are needed are leaders who:

1) model authentic and spontaneous feeling reactions
2) facilitate interaction
3) let genuine pain of growth process occur
4) can respond in naked honesty which reveals a core of desire for giving and receiving love, as compared with destructive and manipulative motivations

In a second article titled Marathon Group Dynamics: II (1967) Bach examined the dimensions of helpfulness and therapeutic aggression. Though his results, like much of the other research, are in question because of design,
he stated: "receiving and giving help is a growth stimulating experience generally and that aggressive confrontation is particularly so". The kinds of interactions which he sees as necessary for growth of the person and the group are:

1) Honest self-presentation in the here and now which permits members to respond to the whole person rather than solely to the content of his verbal message.

2) A "no holds barred" atmosphere which permits appraisal of self-perception and reevaluation of your predictions of how you feel others view you. Accomodation (the pretense of being nice) which is practiced in the outside world, is unacceptable behavior in the marathon.

3) Tension which is created in the movement toward increasing levels of intimacy creates motivation for continuing. Withdrawal from tense interaction as an accepted mode of behavior in the larger society is considered a violation of the rules of a marathon.

What changes can we expect on the part of participants?

Stoller, again, in his article "Accelerated Interaction: A Time-Limited approach based on the brief inten-
sive group" (1968), gives insight into the changes we can expect in group members as a result of their participation in the time extended session. Using self-reports and anecdotal records as the source of his data, he reports that:

1) the participants discovered new ways of dealing with people, as well as creative, growth inducing approaches to crises
2) in varying degrees, self-understanding in terms of talking about one's self, and if unstable, behavior change in a more stable fashion
3) in terms of everyday life, crises were dealt with in a more capable manner
4) in reference to long term gains, emotional strength gain and breakthroughs resulting from one marathon may take place up to a year after the experience
Specific Studies Related to the Problem

Three studies strongly influenced the direction of this paper. The first is reported by Yalom, who in 1967 tested the hypothesis that a time extended session accelerates the life cycle of the group. He examined what effect a six hour marathon would have on cohesiveness and the development of the here and now interactive communication mode when used as an adjunct to 16 counseling sessions. His results showed that the groups moved in a negative direction in their communication patterns, and that group cohesiveness showed a decreasing trend in subsequent meetings. However, in the groups which held their six hour extended session on the eleventh meeting instead of the first, there was a significant increase in cohesiveness (in Yalom, 1970).

Stoller (in Solomon and Berzon, 1972) stated that his experience with 12 hour extended sessions showed them to be filled with cranky dissatisfaction. Something happens, but there is neither resolution nor definition of what occurs. He goes on to state that the minimum time he recommends is 18 hours and that diminishing returns occur after 48 hours.

Miller (1972) found that when comparing traditional versus marathon groups on the willingness of members to
initiate interactive behavior that there was no significant difference until he did his three month follow up. At that time the marathon group engaged in initiating significantly more interactive behavior than the traditional groups. In this same study he also found that the attrition rate for the marathon groups was significantly lower than the rate for the traditional groups.
CHAPTER III
THE MARATHON AS A THEORETICAL POSITION

Because the quality of the research involved with marathons has generally been disappointing, it seems reasonable to investigate further the strong statements made by many of the investigators of this form of group counseling. All who are mentioned in this study, except Yalom (1971), agreed that there is a qualitative difference between involvement in traditional group counseling and involvement in extended time sessions. Yalom recognized that the longer sessions often led to many peak experiences, but he questioned if these peak experiences were also emotionally corrective. He commented that long term value may not be received from change that occurs as the result of a short term experience. Also, of concern to him was whether any learning which does take place under group interactional rules will transfer to a society which functions differently. I find this last statement to hold about the same value as when young mothers tell me that they are denying their children a preschool experience because they might be bored.
in public school. The focus of what needs to be changed is not based upon health, but on continuing the status quo. And, the status quo at CSUN concerning marathons, is that it is an accepted technique which is used primarily as an adjunct to the counseling department's growth groups for counselors in training. None of the researchers, including Yalom, denied the impact of the marathon. The counseling department at CSUN also appears to see value in them. Further investigation to explore what happens to groups and their participants as a result of extended sessions, is needed.

I became interested, after reading Yalom's comments in investigating whether the group of counseling students I was leading would show interactional change as the result of an extended session. I was also interested in gaining greater knowledge about group communication patterns by learning how to use an instrument that measures interactional change, the Hill Interactional Matrix (HIM).

When in the life of a group is the best time to have a marathon, and how long should it be. Yalom's (1970) research seemed to indicate that having it as a first meeting would lead to more negative results than positive ones. Mintz (1971) stated that counselor's greatest influence on the group is in the beginning when the group has just formed. Miller (1972) emphasized the need to
practice new behavior and Fullmer (1971) talked about the specialized code that groups quickly learn shortly after they are formed. All spoke about the greater interpersonal risks that people seem to take during an extended session. I felt that since all groups operate on both covert as well as overt rules, which once made are difficult to change, that by having the marathon earlier rather than later the group would develop more quickly through experience, the rule of greater interpersonal risk. If this were to occur, I believed greater group cohesion would result which in turn would lead to more confrontive, therapeutic kinds of interactions. The length of time for the marathon was limited to twelve hours, which was the amount of time members felt they could reasonably commit themselves to. The hours we chose were from five in the morning to five in the afternoon.

The present study then, is an attempt to determine if the use of a twelve hour extended session, early in the life of a student-led growth group for counselors in training at CSUN, would influence the interactional quality of the group.
CHAPTER IV
METHODS AND PROCEDURES

Method

The subjects were nine beginning graduate practicum students in counseling and guidance at CSUN, and one student leader who had just finished her practicum training. The age range was between 25 and 45. The group consisted of three males and seven females. Attendance was mandatory for group members as part of their training. The group leader was under no special instructions as to the conduct of the group, but did meet with other student group leaders and staff during the semester to discuss the experience and receive any needed information.

Procedures

The interactional quality was assessed through the use of two instruments: the HIM, and self-administered questionnaires given before and after the marathon.

The Hill Interactional Matrix (Figure 1) is a tool which measures verbal interaction within a group rather than the outcome or results of the group's effectiveness
Figure 1

HILL INTERACTION MATRIX
on the growth of individual members. Mintz (1971), in her book, mentioned the need for more research dealing with the dynamic qualities of the group itself through closer examination of group interaction.

Before you can place more value upon some interactions and less upon others, you must answer the question, what kinds of therapeutic conditions produce change? Hill (1965) empirically developed a hierarchial scale of therapeutic conditions for change through the observation and study of a large number of group psychotherapy sessions. He looked to verbal behavior as the measurable ingredient within the group process and set out to find typical and stylistic aspects of these verbal interactions which would key in better with the information he gained about the silent reactions of group members by using the "Stimulated Recall" technique of Bloom (in Hill, 1965).

It was the relationship between the observable verbal reactions and the unobservable inner reactions that Hill felt reflected the dynamic properties of the therapy group and contributed to the conditions for change.

Hill found two basic dimensions which seemed, to him, paramount in distinguishing groups. The first is content style, or what a group talks about. The second is the group's work style, which deals with the level of therapeutic work the group is operating at. Hill places these
two dimensions of group interaction in a $4 \times 4$ matrix. The sixteen cells of the matrix have been arranged into an ordinal scale of increasing therapeutic value, and rating instruments have been developed which provide a quantitative description of the interaction.

The four content styles are represented by the vertical columns on the matrix.

<table>
<thead>
<tr>
<th>I Topic</th>
<th>II Group</th>
<th>III Personal</th>
<th>IV Relationship</th>
</tr>
</thead>
<tbody>
<tr>
<td>The statements deal with topics external to the group itself, e.g., current events. These are topics of general interest which are exclusive of the group itself.</td>
<td>The subject is the group itself.</td>
<td>The statements deal with the problems of a member in an historical fashion and are independent of his relationships with other members in the group.</td>
<td>The group is reacting to each other in the here and now style. The reflections are not upon outside problems or group process but on the reaction to how members are in the group.</td>
</tr>
</tbody>
</table>

The rows of the matrix deal with the second dimension, the style of work occurring in the group. Within the rows there are two subclassifications: work and pre-work. There is no attempt to gain self-understanding for members involved with pre-work. The two rows of pre-work are:

- **B Conventional** Includes every socially appropriate interaction like gossip, chit, chat.
C Assertive Is a form of social protest behavior, an assertion of independence from group pressure. Statements in this role can be argumentative and hostile; they often involve blaming others rather than oneself for problems.

Work as compared to pre-work according to Hill means someone in the group is playing the helping or therapist's role and someone is asking for help or playing the patient or client role in an attempt to gain self-understanding. The two rows of therapeutic work are:

D Speculative This is thought of as the conventional way of transacting therapy, i.e., playing the therapeutic game. It is a more intellectual approach.

E Confrontive Statements are those which confront members of the group with usually avoided aspects of their behavior and with some documentation to allow reality testing. Confrontive behavior is intended to have real involvement and impact and is characterized by tension and risk taking in the group.

The way the HIM was used, was to analyze statements (those that were distinguishable) from portions of the pre- and post-marathon tapes, and then locate these items on the HIM matrix. This revealed observable differences in the quality of the communication patterns between the two tapes, but did not indicate if this difference was significant.
CHAPTER V
RESULTS

A total of 154 taped verbal interactions, 77 pre-marathon and 77 post-marathon items, were analyzed using the HIM rating system and, those appropriate for each cell were then totaled and placed on the matrix (Figure 2). The numbers in parenthesis beneath these totals indicate the relative therapeutic value attributed to each cell. The distribution of the pre-marathon interactions, as seen in Figure 2, is spread throughout the matrix, but is more heavily weighted in those cells which are considered less therapeutic. The distribution of the post-marathon items is concentrated in the areas on the matrix which are looked upon as having more real involvement and impact.

By multiplying the number representing the therapeutic value assigned to each cell by the number of items placed in that cell, and then adding all of these, a numerical figure representative of the therapeutic quality of the group's verbal interactions is arrived at. When
CELL DISTRIBUTION OF VERBAL INTERACTIONS

<table>
<thead>
<tr>
<th></th>
<th>I Topic</th>
<th>II Group</th>
<th>III Personal</th>
<th>IV Relationship</th>
</tr>
</thead>
<tbody>
<tr>
<td>Conventional A</td>
<td>2 (1)</td>
<td>3 (2)</td>
<td>(9) (10)</td>
<td></td>
</tr>
<tr>
<td>Assertive B</td>
<td>1 (3)</td>
<td>1 (4)</td>
<td>3 (11)</td>
<td>3 (12)</td>
</tr>
<tr>
<td>Speculative C</td>
<td>4 (5)</td>
<td>17 (6)</td>
<td>6 (13)</td>
<td>4 (14)</td>
</tr>
<tr>
<td>Confrontive D</td>
<td>8 (7)</td>
<td>8 (8)</td>
<td>7 (15)</td>
<td>10 (16)</td>
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</tbody>
</table>

Pre-Marathon

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</thead>
<tbody>
<tr>
<td>Conventional A</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Assertive B</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Speculative C</td>
<td>4</td>
<td>25</td>
<td>14</td>
<td></td>
</tr>
<tr>
<td>Confrontive D</td>
<td>5</td>
<td>16</td>
<td>12</td>
<td></td>
</tr>
</tbody>
</table>

Post-Marathon

Figure 2
the pre- and post-marathon sessions are compared, the pre-marathon score for the group is 717, the post-marathon score is 1026, a difference of 319.

Figure 3 shows the totals for the items within the four cells representing the least therapeutic levels of communication (upper left quarter) and the most therapeutic levels of communication (lower right quarter). The post-marathon session had 67 verbal interactions occur in the four cells rated the highest in communication patterns, while the pre-marathon session had only 27 items placed within this same quarter of the matrix.

Figure 3 also depicts the number of items which occurred in the most and the least therapeutic halves of the matrix. As can be seen, the distribution of the pre-marathon interactions is much more evenly spread, 44 for the least therapeutic half and 33 for the highest therapeutic half. On the post-marathon matrix almost all the interactions occurred within the most therapeutic area.

The reason I did not test for a significant difference between the two sessions was that I was the investigator for this study, the leader of the group being studied and the analyzer of the data being compiled. The only way I could have controlled for any bias resulting from my scoring of the items would have been to have had at least one other person rate the tapes. Since it takes
Figure 3

TOTAL NUMBER OF INTERACTIONS WITHIN THE FOUR MOST THERAPEUTIC CELLS

Pre-Marathon
Least Therapeutic

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
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<tbody>
<tr>
<td>7</td>
<td>27</td>
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</table>

Post-Marathon
Least Therapeutic

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<table>
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<tr>
<th></th>
<th></th>
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<tbody>
<tr>
<td>0</td>
<td>67</td>
</tr>
</tbody>
</table>

TOTAL NUMBER OF INTERACTIONS WITHIN THE MOST AND LEAST THERAPEUTIC HALVES OF THE CELLS

Pre-Marathon
Least Therapeutic

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<tbody>
<tr>
<td>44</td>
<td>33</td>
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</table>

Post-Marathon
Least Therapeutic

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<th></th>
<th></th>
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</thead>
<tbody>
<tr>
<td>9</td>
<td>68</td>
</tr>
</tbody>
</table>
many, many hours to become familiar enough with the HIM item by item rating scale to be able to use it reliably, it was unrealistic to ask someone else to help. If I were to continue this work I would not lead the group I was investigating, nor would I be responsible for scoring the tapes.

However, if the HIM is a reliable instrument for measuring the different levels of therapeutic interaction and if the items were properly scored, then the therapeutic quality of the interactions after the marathon appears to be enhanced. As far as their communication patterns, the group did move in a positive direction.

The second instrument used to assess group interactional quality was a self-administered questionnaire (Figure 4) given out to members at the pre- and post-marathon sessions. Since group time was not taken for the answering of these questionnaires, the reliability that all would be filled out and returned within the time period which would reflect the impact of the marathon and not other variables was reduced.

Out of the nine questionnaires given prior to the marathon, eight were returned. Two persons indicated they did not know how to answer the questionnaire; one of these
did not return it, and the other gave responses which
were not adequate enough to be used. Due to illness of
subjects, only seven of the post-marathon questionnaires
were returned, one of which was filled out too late to be
of value and was not included.

Figure 4

**PRE-TEST QUESTIONNAIRE**

1. Describe the interactional quality of our group?

2. What are your expectations for yourself from the
   extended session?

**POST-TEST QUESTIONNAIRE**

1. Describe the interactional quality of the group?

2. Were your expectations for yourself met during the
   extended session?

What remained then were six sets of responses as to
how individual group members viewed each other, themselves,
and the communication patterns within the the group prior
to and after the extended sessions (Figure 5). Also in-
cluded as the last items listed in Figure 5, are the
pre-marathon answers to the questionnaires which were not
paired with post-marathon responses. The comments given
are the direct quotes of group members.

The post-marathon questionnaire revealed greater
Figure 5

**PAIRED RESPONSES TO QUESTIONNAIRE**

<table>
<thead>
<tr>
<th>Pre-Marathon Responses</th>
<th>Post-Marathon Responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Interactional quality amateurish</td>
<td>Pretty positive toward interactional quality</td>
</tr>
<tr>
<td>Some interact a lot, some little</td>
<td>Honest, free expression</td>
</tr>
<tr>
<td>People try too hard</td>
<td>Great deal of group interaction</td>
</tr>
<tr>
<td>Leader does not interact enough</td>
<td></td>
</tr>
<tr>
<td>Group members have the intellectual awareness of blob</td>
<td>People pretty darn neat</td>
</tr>
<tr>
<td>Little counseling skills</td>
<td>I like people here</td>
</tr>
<tr>
<td>See myself as outsider</td>
<td>We have a good group</td>
</tr>
<tr>
<td>Problem solving oriented rather than here and now and expressing how they feel themselves</td>
<td>Large range in the levels of counseling and listening skill capability</td>
</tr>
<tr>
<td>Having difficulty opening up in group</td>
<td>I feel fulfilled by the marathon</td>
</tr>
<tr>
<td>Preliminary fencing, superficial impressions beginning to emerge</td>
<td>We get down to business sooner now</td>
</tr>
<tr>
<td>Beginning to develop group feeling</td>
<td>Group helped me work on being more expressive</td>
</tr>
<tr>
<td></td>
<td>Group is really functioning as a group</td>
</tr>
<tr>
<td></td>
<td>Feel more a part of the Group than before</td>
</tr>
<tr>
<td></td>
<td>More intense</td>
</tr>
<tr>
<td></td>
<td>More combinations of interactions</td>
</tr>
<tr>
<td></td>
<td>Greater awareness and willingness to &quot;see&quot; several other persons as separate identities</td>
</tr>
<tr>
<td></td>
<td>Leader more involved as a member rather than a leader</td>
</tr>
<tr>
<td></td>
<td>Pleased with heightened degree of interaction</td>
</tr>
<tr>
<td></td>
<td>Willingness to try to understand &quot;real&quot; person underneath</td>
</tr>
<tr>
<td>Pre-Marathon Responses</td>
<td>Post-Marathon Responses</td>
</tr>
<tr>
<td>------------------------</td>
<td>------------------------</td>
</tr>
<tr>
<td>-Not sure what the interactional quality is</td>
<td>-Quite successful and personally meaningful</td>
</tr>
<tr>
<td>-Group divided into camps and risking</td>
<td>-Group at place where most people feel free enough to express their feelings</td>
</tr>
<tr>
<td>-It could be improved</td>
<td>-People tell it as it is</td>
</tr>
<tr>
<td>-A more here and now experience needed</td>
<td>-Stick with personal feelings and not generalities</td>
</tr>
<tr>
<td>-Many islands</td>
<td>-People are more open</td>
</tr>
<tr>
<td>-It could be improved</td>
<td>-Group emotional</td>
</tr>
<tr>
<td>-Better than pre-marathon</td>
<td>-Not crazy about experience though it was very helpful</td>
</tr>
<tr>
<td>-More and more interaction</td>
<td>-I got to know some a lot better</td>
</tr>
<tr>
<td>-Seeing individuals and not just members with little identity</td>
<td></td>
</tr>
<tr>
<td>-Group spends too much time discussing situations outside of group and not relating to one another</td>
<td>-Too cognitive and not enough affect</td>
</tr>
<tr>
<td>-We-they feeling developing</td>
<td>-I did not get to know certain people any better than I did before</td>
</tr>
<tr>
<td>-We have a close group</td>
<td></td>
</tr>
<tr>
<td>-I don't feel I know any group members yet</td>
<td></td>
</tr>
<tr>
<td>-Potential is great</td>
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</tr>
</tbody>
</table>
feelings of group cohesiveness, openness, intenseness, and awareness than was reported by pre-marathon responses. Also expressed by the former were improved attitudes toward the group members and their style of interaction. Those members who seemed to have difficulty in expressing themselves and those who expressed the most negative feelings toward other group members appeared to be effected in a positive direction by this experience. It also appears that if one's expectations were that little would be gained by an extended session then little was.

Stoller stated that his experience with 12 hour extended sessions showed them to be filled with cranky dissatisfaction. The comments made by group members in this study do not confirm Stoller's negative attitude toward meetings of this length.
CHAPTER VI
DISCUSSION

Yalom's experience with an early six hour extended session held during the group's first meeting showed a negative direction both in cohesiveness and the development of the here and now interactive communication mode. This present study using a 12 hour marathon held during the group's fifth meeting, which was close to but not at the very beginning of their counseling series, shows a positive direction in both group communication patterns and cohesiveness. Unlike his early marathon, Yalom's study did show an acceleration of the life cycle of the group when the extended session was held closer to the end of the counseling series.

Since the present study did show a positive direction in the variables being considered, much earlier in the counseling group series than did Yalom's, perhaps what should be further explored is at what point between the first and fifth meeting of a group will an extended 12 or 6 hour session begin to facilitate group communication patterns and cohesiveness.
As groups move through their various stages of growth it is reasonable to assume that there are some points in their developing life which are more open to the facilitating factors of extended sessions than others. Perhaps further research in this area will help us better understand when these times are.
BIBLIOGRAPHY


