

DOCUMENT RESUME

ED 435 901

CG 029 601

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TITLE Family Counseling: Fantasies and Realities.
PUB DATE 1999-11-00
NOTE 19p.; Paper presented at the All Ohio Counseling Conference (Columbus, OH, November 4, 1999).
PUB TYPE Opinion Papers (120) -- Speeches/Meeting Papers (150)
EDRS PRICE MF01/PC01 Plus Postage.
DESCRIPTORS *Counseling Techniques; *Counselor Client Relationship; *Counselor Role; Counselor Training; *Family Counseling; Family Relationship; *Group Counseling

ABSTRACT

This paper focuses on two aspects inherent in working with families--fantasies and realities. A brief discussion of family life in the United States at the end of the 20th century is included at the outset with the intention of identifying who families are before making a diagnosis or intervention. The author encourages counselors to recognize the fantasies they hold about working with families, and to be wise enough to give them up in order to make a positive difference in the lives of clients. Seven deadly fantasies are presented as well as the seven realities that are at the opposite end of these fantasies. It is emphasized that in family work, it is essential to realize in a continuous way that family counseling deals with families who may be resistant to change and that some families have a limited ability to receive help. It is also important to keep in mind that family counseling differs from other ways of counseling and that working with families is sometimes difficult. Therefore, it is suggested that counselors be aware of the non-events of family life as well as the developmental and situational factors that are a part of all families. Finally, counselors need to be mindful that families come in many forms, are interesting in and of themselves, and that in order to be effective as counselors, must know a range of theories and techniques. (GCP)

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Family Counseling: Fantasies and Realities

All Ohio Counseling Conference

Columbus, Ohio

Samuel T. Gladding, Wake Forest University

November 4, 1999

She was shy and so was I. At 18 I did not have a lot of worldly knowledge and experience and at 17 she had even less. Yet, we both knew we had chemistry and with that assurance nothing else mattered. So when I picked her up that night I felt romantic -- light headed and light footed. For all I knew, she was Ginger Rogers and I was Fred Astaire and a 40-piece orchestra would accompany our every move as we went to our high school mid-winter dance.

All went exactly as I had envisioned at first. She was an image of perfection. The corsage I had bought matched her dress. She was charming and smelled as fragrant as magnolia blossoms in late summer. Thus, as we walked to the car, I thought the night would be special. She gracefully slipped into the passenger seat. I then quickly closed the door behind her and almost literally waltzed over to my side of the car. However, as I opened the door to the driver's side, I saw tears welling up in her eyes.

"Oh no!" I thought. "She is crying and I don't have the slightest idea what to do when a girl cries."

So in an awkward adolescent manner, I said: "Are you crying because you're so happy about us?"

"No," she said as she shook her head.

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Stumped and a bit disappointed, I tried question number two. “Are you crying because of where we are going tonight and the excitement of it?”

Again, a negative response came from her soft melodious voice and the shaking of her head. So, with no knowledge of what to do next, I accidentally did the right thing.

“So why are you crying?” I inquired.

Looking at me intensely and with a pained expression she said: “Because you just shut the car door on my hand.”

If ever words were spoken that broke a fantasy and started reality, those 10 words did it. Quickly, exiting the car, I ran over to her side of the automobile, opened the door, freed her hand, and applied pressure to the wound I had opened up. The rest of the night was spent in the hospital getting x-rays and treatment. Instead of dancing before a cast of thousands as I had dreamed earlier in the day, I ended up with my date in a cast as I shuffled my feet to the awkward beat of embarrassment as I later approached her parents to explain what had happened.

So what does this adventure of long ago and far away have to do with now and the subject of family therapy? Quite a bit, I think. It is a story of not just a date that went wrong but of an adventure in what often occurs in family life and sometimes in family counseling.

For me, on that evening so long ago, I was living a fantasy. I did not just have a date, I was going out with a dream – a person who I imaged in a certain way. As for my girl friend, she too was putting up a front and denying some reality. The fact that she did not cry out when I slammed the door on her hand still amazes me as does the fact that it took me three questions (the last open-ended) to find out what was wrong.

However, I would say to you that in our adventures into family counseling, most of us begin the journey this way. We start out with a dream and end up at a door that brings both opportunities and disappointments. We initially waltz until we realize we must run. We assume we know reasons behind what others are doing and find out, sometimes humbly, that we were wrong.

Today I would like to focus on two aspects inherent in working with families – fantasies and realities. However, at the outset, I would like to talk briefly about family life in the United States at the end of the 20th century. For after all, if we are going to treat families we need to know who they are before making a diagnosis or an intervention.

Family Life in the United States at the End of the 20th Century

A family as defined by the United States Bureau of the Census is “a group of two or more persons related by birth, marriage, or adoption and residing in a household.” However, if an alien from outer space were to visit the United States today and were asked to define the typical American family, it would be hard-pressed to do so. The fact is that families come in assorted shapes and sizes. We describe them, for instance, in the following ways:

Nuclear

Dual Career

Blended, Remarried, Step

Single-Parent

Extended

Commuter

Computer

Childless

Reformulated

Multigenerational

Mixed

Revitalized

and Non-traditional.

Since colonial times families have been changing and the one main fact we know about family life in the United States today is that there is no typical American family.

This fact came home clearly to me a few years ago when I asked a young person I was counseling to bring in her family.

“Do you mean my parents and siblings?” she asked.

“Yes. The people who are your family.” I replied

“How about my step-brother, my quasi-kin and my lover?”

“Well, if you consider them part of your family,” I said. “Invite them.”

“Does Uncle Ralph count?” she inquired.

“Well, who is Uncle Ralph?” I asked.

“He is a neighbor that has been very close to me. He lives next door.”

“Okay. Bring him in if you would like.”

The long and short of our conversation and its results was that I had to schedule the clinic’s conference room for my client’s family of almost 20.

The point is that as much as some of us will miss them “Ozzie and Harriet” are history; the Nelsons are no more. What comes into our offices are a variety of family

forms from gay and lesbian couples, to grandparents raising their grandchildren, to blue, white, and pink collar workers who are striving to form relationships in the midst of a chaotic, congested, and fast-paced world that does not differ terribly regardless of where you live. That is, we all have McDonald's, Wal-Mart, and Jiffy Lube, youth soccer, computers, and commitments in days that are often too short and nights that often too long.

So where does that leave us in regard to working with families? I think it means we have to recognize the fantasies we hold. We have to be bold enough and wise enough to give them up, if we are truly going to make a positive difference in the lives of those with whom we work. I believe there are at least 7 deadly fantasies that we must address and 7 realities that are at the opposite end of these fantasies. Let me take you on a brief journey through these 7 fantasies and realities. As you will see realities are often at the opposite end of fantasies.

The Fantasies and Realities of Family Counseling

1. The first fantasy of family counseling is that families want to change.

As the comedian Steve Martin used to say on Saturday Night Live: "Excuse me." In most families that seek counseling, there is somebody who wants to change or who wants change to come about and there are others who do not want to change at all. Also, in most families there is a longing for a "fix" rather than a change. After all change is difficult and most families would like to remain homeostatic.

The simple insight that change is difficult was illustrated to me vividly in a phone booth in New Haven, Connecticut, in the 1970s when I was trying to make a local call. I

had a quarter and calls at that time were only a dime. Being a student and somewhat poor, I wondered if I put my quarter in if I would get back change. My curiosity was quietly laid to rest when I read information provided on the phone itself from the Southern Connecticut Phone Company that said:

“This phone does not give change” under which a disgruntled customer I am sure had scribbled: “It doesn’t even try.”

For some families that come to counseling there is a lack of trying by family members and the result is a trying experience. My first vivid memory of resistance to change came when I once saw a family that was supposed to be composed of four people. As I greeted the family I noticed only three people.

“I’m a bit confused,” I said. “I see that you report that you are a family of four but I count only three noses. Since I assume there is a nose connected with each person, it appears to me we are a person short.”

“That would be Eleanor,” said the mother. “We call her the Wild Thing. She’s in the car but refuses to come in.”

“How big is Eleanor?” I asked.

“About 98 pounds,” said the father. “She’s 13 years old.”

“Well,” I replied. “Go get Eleanor and bring her into the session. I am charging you and the clock is running. We won’t start the session without her.”

The protests were great.

“She’ll scratch our eyes out” said her brother.

“She’ll never speak to us again” groaned the mother.

“She’ll never let us come back,” sighed the father.

“Go get her” I repeated.

Thus, reluctantly they went out to the parking lot. What occurred next was not a pretty sight. There was a bit of a struggle and a few raised voices but with the odds at 3 to 1, about 10 minutes later, Eleanor was brought into my office with her parents and brother carrying her like a captured wild animal.

I interacted with the family, including Eleanor, the rest of the session. We focused on how to tame a wild thing with Eleanor actually offering some good suggestions. However, the important part of the therapeutic work started with a change in family interaction. The parents had taken some control over a situation that they had previously felt helpless about. The bringing in of Eleanor brought the family into dealing with issues that were separating them. There was no magic to the process—only a struggle. However, there was change that years later resulted in visits, hugs, phone calls and snail mail that kept the family together even when time and the growth of the children eventually split them up geographically.

2. A second fantasy in family counseling is that I, as the counselor, can work with families like I work with individuals.

While there are some theories that purport little difference between family counseling and other types of counseling, most do not and for a good reason. Families are generally more dynamic and difficult. They may even be dangerous to a counselor's health and well being. I think, in fact, that there should be a label on families coming into counseling that says, “Warning: working with this family may be hazardous.” Therefore, everyone who works with families should ideally resolve issues related to their families of origin before they begin working in this arena. However, resolution of

family matters for most of us is not a one-time process. The reoccurrence of new year's day (or even the movie "Groundhog Day") reminds us of that. Thus, doing a genogram once is usually not enough to immunize us from the dangers of being triangled in or "sucked into" a family's issue or issues.

I always tell my students that their most potent time as a family counselor is during the first or second session with a family for far from being weak, families are powerful and inclusive. They love to incorporate counselors into themselves. In fact, I usually picture families like the Blob in that old Hollywood movie of the same name. If you remember that film, the Blob simply consumed everything in its path and it kept growing, and growing, and growing.

Therefore, as a counselor who works with families, my job is to make sure I am both connected with a family and yet apart from it. The process is called differentiation and like many things in life, it is easier said than done. The important thing is that I cannot interact with a family as I would an individual.

To show you what can happen if you fall into the fantasy of thinking otherwise, I would like for you to picture throwing a tennis ball. (Bring out two tennis balls and find someone in the audience to throw them to). Now, individual counseling is like tennis ball tossing or a game of tennis; it goes back and forth and while it may have exciting moments, it is not overwhelming.

However, family counseling is a bit different. (Bring out two cans of tennis balls, get five volunteers from the audience). Family counseling is like playing tennis ball toss or tennis, except you do not know who is going to be throwing or hitting the tennis ball to whom, or when, because everyone has a ball they can throw at any time. Thus, I might

toss my ball to a mother and while she might toss it back to me, I might also receive incoming tennis balls (or comments) from three other family members in regard to my action. There is no direct cause and effect. (Demonstrate). It's circular.

Thus, family work differs from individual counseling in that the dynamics are different and it is more unpredictable. While there are parallels to working with families and groups, family members have a shared history and you can't screen out who is or who is not going to be in your family (only cut them off). Thus, what you encounter initially is much different and the changes you make, both existentially and historically, require skills sometimes unknown in individual counseling.

3. The third dysfunctional fantasy of family counseling is that every family can be helped.

Can you say "Wrong!" (Have audience say: "Wrong!") I knew you could. While working with families appears to be a bit romantic, it is not. Lay people and even counselors will sometimes have an "oooh" or "aaah" in their voice (have audience give feedback of "oooh" and "aaah") when they realize you work with families, such a notion is pure fantasy. If you believe that every family can be helped, you may also want to believe in the Easter Bunny, the Tooth Fairy, and a host of other fantasies. You may also appreciate the story of Linus Van Pelt telling Lucy Brown in the Peanuts cartoons his belief in the Great Pumpkin.

Linus: "I believe that every Halloween, the Great Pumpkin arises from the most sincere pumpkin patch in the world and brings presents to good little boys and girls. What do you think?"

Lucy: “I think you have beautiful blue eyes and you are completely out of your mind.”

Counseling is work and some clients, like the infamous figure Maynard G. Krebs in the 1960s television show “Dobie Gillis,” appear to be allergic or at least resistant to work. Developmentally or situationally, they are **not** ready. Thus, you must be prepared to help families and sometimes realize that you cannot – at least in the moment.

4. A fourth fantasy counselors sometimes carry, that will only get them in trouble, is that working with families is about verbal communication.

Most individuals who seek to work with families are sincere but not always astute as to the subtleties inherent in promoting changes within families. The process is sometimes pictured as one of my students conveyed in the following scenario. “I imagine” she said, “that I will see a couple with maybe a child or two. The wife will have made the call for the appointment and will begin the session by saying:

“He doesn’t talk to me anymore. We have no romance left in our marriage. All I have gotten from this marriage is two children, some headaches, and a house in the suburbs of Cleveland. I am sick and tired of his running off to work and to the golf course in order to avoid me and his responsibilities to this family.”

In return, I see the husband as the designated scapegoat (or identified patient) complaining that all his wife wants to do is talk and go to fashion shows or the mall.

“I need action,” he will say. “A man has got to be a man. I’m not a Martian you know!”

At that point he will pace up and down in my office like a caged animal, while she will quietly sob, and the children will look confused. All eyes will be on me as I re-read

in my mind pertinent parts of a John Gray book on planets and people. However, I will get them walking and talking together, even holding hands, after I quickly explained the dynamics of what is going on in the orbits in which they travel.”

Well, as I said, that was one of my students’ fantasies. While it is idealistic and positive, it is probably more suited for the fantasy hall of fame than it is as a model by which to conduct family counseling. In fact I asked my student after she related the fantasy to me if she had ever seen Mitzi Gainer sing “Happy Talk” in the musical “South Pacific,” or heard the rock group Meatloaf sing “Two Out of Three Ain’t Bad” where they have that wonderfully ungrammatical but powerful lyric of: “Baby, we could talk all night, but that ain’t getting us nowhere.” However, I would say to you that even the most experienced counselors, including yours truly, have fantasies about the place of talk in therapy.

The poet W. B. Yeats once said that writing poetry was more difficult than cutting and laying stone. He did not recommend it to the weak. The same might be said for family counseling. It is a tough occupation requiring ingenuity, energy, creativity, and action. When it works, it is wonderful. When it does not, it is frustrating and the opposite of celebrating.

To be a family counselor means you have to keep up with a lot of data in a short amount of time and make timely interventions that are often nonverbal. The most common mistake I see my students make in their internships with families is that they attend to words and not process. Don’t get me wrong, words are sometimes important. For example, I had a friend who was an appliance salesperson before he piloted a helicopter for traffic control in a major city. One day when the helicopter malfunctioned

and he was losing altitude, he grabbed his two-way radio that connected him to the airport and started yelling “Maytag, Maytag, Maytag” instead of Mayday.

However, reality is that if you pay attention to words alone, you may find yourself alone and lonely having failed to make an intervention that would be helpful. For instance, in working with a couple that had been a cantankerous duo together longer than I had been alive, whom I shall call the Bickersons, I realized I was doomed if I stayed with the verbal content. From the minute the couple arrived, they were at each other verbally. In fact, they were quite good at their verbal attacks. She would hit him with a barb and he would jab back with an insult. Then she would land a demeaning comment squarely on his chin and he would stagger but counter punch with a discounting statement of his own. Back and forth, they went at it for about five minutes flipping words as if they were flapjacks, until having demonstrated their potency, they stopped, turned to me and he said (almost smugly as if flipping me a hot one off the grill):

“So what are you going to do to help us?”

Had I stayed with the verbal battering, I would have been fried, grilled or burned. So, I replied:

”I’m sending you to your corners. That’s the end of Round 1.”

Thus, before you could say “Mohammed Ali,” I got them on their feet and directed each to go to a separate corner of the office as if they were in a boxing ring and not cooking in the kitchen. Then I clapped my hands together and said, “Come out and sit down, it’s Round 2.” They did but were somewhat stunned and more amenable to seeing and being different.

The structure, which Carl Whitaker and Gus Napier state is crucial to working with families, was created in this case. The arena changed and so did the dynamics. But I would say to you that most families, even cool ones, present a challenge and as Ringo Starr used to sing about in regard to becoming a singer of the blues (and which applies to becoming a family counselor): “It don’t come easy.”

That leads to a fifth fantasy and its opposite realistic corollary.

5. Developmental and situational factors are more important than nonevents in family life.

Every family comes to counseling with a developmental history. They most likely have emerged from being single adults to a couple to a couple with a child or children at some stage in the process that is the family life cycle. They are more often stuck in a cycle, somewhat like a washing machine, than they are sick and filled with pathology. Our task, as family counselors, is to detect where they are in their life cycles, individually and collectively, and to treat them appropriately. Likewise, we need to pay attention to situational matters, those experiences that are unique to a particular family such as accidents, sickness, relationships, opportunities, and even happenstance. All of these events have an impact on families for better or for worse, for richer or for poorer.

What I find is that most of us do a pretty good job of attending to developmental and situational factors but where we miss out is in attending to nonevents, those experiences in life that never materialize or happen according to Nancy Schlossburg at the University of Maryland. For instance, you dream of being swept off your feet by Richard Gere, like Debra Winger, in An Officer and a Gentleman, but all you ever do is sweep a broom. Or you think after you marry that you will have children but because of

complications, you remain childless. Or you plan to really prove yourself to your peers and superiors by working hard and getting a promotion but all the long hours are in vain as nothing happens.

When I was a child, I used to dream of being an all-star little league baseball player. What I failed to take into consideration was that I was 5' 3", weighted about 110 pounds, and was not blessed with great coordination, strength, or athletic ability. Thus, year after year I never even made a little league team yet alone the all-stars.

While this nonevent was not crushing, it was initially painful. For families and their members a nonevent may not necessarily be a tragedy but it usually needs to be resolved before the family can move on in life. Take the play, "Who's Afraid of Virginia Wolf?" While there are numerous pathologies played on screen, George and Martha enact one where the baby that they never had is brought up and tossed around at least verbally. It is clear in their enactment that the non-event of parenthood, has left them with unresolved feelings and interactions that are pathetic and regretful. The same can be said for some of our family clients if we do not attend to their desires that were on their way to becoming realities but got derailed. Therefore, if we are to be competent family counselors we must attend to the big three circumstances of a family – those that are developmental, those that are situational, and those that were planned but never happened (i.e., non-events).

6. A sixth fantasy that we must deal with if we wish to be competent is the notion that live families are not as interesting as fictional ones.

When I was growing up, I used to read both fictitious and historical literature about families. Being southern in my heritage I was especially attuned to the families

depicted in the novels by William Faulkner, William Styron, Eudora Welty, Flannery O'Connor, and Thomas Wolfe. The books I read were both interesting and informative. Yet, they pale now because I work with families. In fact, when I started working with families full time, I stopped reading much fiction. The reason I think is more than coincidental. As I told my wife, fictional families cannot begin to compete with real live families. The reason is that in real life, families are completely unpredictable even though they may have some occasional patterns that are pervasive.

Let me give you an example. As a young counselor in North Carolina I was once asked to work with a mentally challenged couple regarding their sexual relationships. I was a bit anxious since I was not married and had not encountered a couple of this type before. Also, the subject matter was touchy both literally and metaphorically. Yet, at the appointed day and time, the couple arrived and I went in to see them. I felt like Masters and maybe Johnson in regard to my knowledge about human sexual relations because I had prepared well beforehand.

However, as I talked to the couple, I quickly surmised that I was not making any progress. Whenever I asked them a question about their relationship, they appeared to tense up and just look at me blankly. So, finally I decided to address the issue squarely. Mustering up my courage, I asked:

“Just how far have you gone?”

He looked at her and she looked at him and then with a grin she looked at me and said, as if understanding: “We’ve gone about as far as Atlanta.”

A great writer of fiction would have been hard pressed to come up with such a line. It was specific, honest, and completely irrelevant to the question I was asking.

However, it made the session interesting and I used the example of going to Atlanta from Winston-Salem, North Carolina, to help the couple begin to see that in their sexual relations they first had to pass through Charlotte, Spartanberg, Greenville, Anderson, and Athens before they would reach their destination. It worked! They got to be much more compatible all because of a miscue that was real.

7. A final fantasy is that in working with families one theory is as good as another.

This last fantasy is what I call the tube socks approach to counseling. One size fits all. While it may be true that no one family counseling theory has a monopoly on “the truth,” it is also correct to state that all theories are not created equal just like all values are not the same.

Let us take for example, a minority culture family that comes to you for counseling. The question is what theory are you going to use. You could be Bowenian if they are in need of historical information, you could be behavioral ala Richard Stuart or Gerald Patterson if they need specific skills, you could be brief and solution-focused if a bit of small change would lead to a lifetime of change ala Steve DeShazer. You could even be narrative, like Michael White, if rewriting the family history would emphasize the strengths of the family over its weaknesses.

However, what you decide will depend on the family before you. To pick an approach before the fact or to use only one approach is in most cases to limit yourself and your family to a frustrating and non-productive encounter. In order to be effective and realistic you need to know the statistics and facts about family theories as well as you know the same data about the Ohio State Buckeyes, the Akron Zips, or the Ohio

University Bobcats. Working with families is like playing the piano. The more keys you know how to play, the greater will be your ability to create a harmonious experience.

Conclusion

Let me conclude this presentation by telling you as a beginning counselor, my first job was in a mental health center. In the same center was a social worker who had recently joined the staff after working at the Philadelphia Child Guidance Clinic. He took a liking to me and offered to be a mentor for me. I was a pure Rogerian at the time but was eager to learn other approaches. Thus, when my colleague offered to teach me structural family therapy, I accepted.

“Before you come into a session with me,” he said, “I want you to read at least two books by Sal Minuchin.”

“Sure,” I replied. “What has she written?” He looked at me in disbelief.

“Sal is an abbreviation for Salvador,” my colleague said coolly but firmly.

“Oh,” I responded innocently while trying to be professional. “Gender doesn’t matter.” (Actually, as we know sometimes it does.)

As it turned out, I was to learn a few years later that some individuals thought (and still think) that if Sal had been named Sally instead of Salvador, his writings would have been different. The point is that reality manifests itself in many ways. What we fantasize is sometimes quite different from factuality.

Regardless, in family work it is essential that we realize in a continuous way that family counseling deals with families who may be resistant to change and that some families have a limited ability to receive help. We also need to keep in mind that family

counseling differs from other ways of counseling and that working with families is sometimes difficult. Therefore, we must be aware of the non-events of family life as well as the developmental and situational factors that are a part of all families. In addition, we need to be mindful that families come in many forms, are interesting in and of themselves, and that if we are to be effective we must know a range of theories and techniques and not just be verbal.

Driving back from the hospital on that fatally flawed date of my senior year in high school, I looked at my girlfriend with the bandaged limb and simply said: “Want to listen to the radio?”

“Sure,” she said softly. “Music is good for what ails you.”

So, I turned the dial and punched up the best station that Atlanta radio had to offer that night. A popular song by the Beatles came on: “I Want to Hold Your Hand.” I quickly changed the station only to find another Beatles tune.

Although all the lyrics of this second song are not pertinent to this presentation, I think five words of the song, “Try to See It My Way” are.

These words assure us that if we give up the fantasies I have mentioned and attune ourselves to the realities of what families and counseling are, then

We can work it out

We can work it out

Oh, oh, oh

Ohio.

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