

THE EFFECT OF LEISURE COUNSELING UPON SELECTED
ATTITUDES OF POTENTIAL CARDIAC CLIENTS

by

Thea M. Hoeft

Dissertation submitted to the Graduate Faculty of the
Virginia Polytechnic Institute and State University
in partial fulfillment of the requirements for the degree of

DOCTOR OF EDUCATION

in

Educational Supervision

APPROVED:

Dr. Gene A. Hayes, Chairperson

Dr. James C. Impara

Dr. George H. Bell

Dr. Dempsey L. Hensley

Dr. Jessica L. Cohen

June, 1979

Blacksburg, Virginia

ACKNOWLEDGEMENTS

Gratitude is expressed to my chairperson Dr. Gene A. Hayes, who provided assistance, guidance, cooperation and support. To committee members Dr. George Bell, Dr. Jessica Cohen, Dr. Dempsey Hensley, and Dr. James Impara who in addition to Dr. Hayes, challenged my thinking processes and forced clarification of my ideas. Special thanks to Dr. George Bell and Dr. James Impara for their respective expertise. To the staff and clients at Wake Forest University Cardiac Rehabilitation/Intervention Program for allowing me to do my research within their program. Special thanks to the Director, Don Bergy for the long-distance arrangements and to my clients for making this research possible.

This effort could not have been achieved without the encouragement and financial support of my parents, three sisters and brother and their families; my officemates and roommate; my typists Susan Wilson and Cindy Crain; to special friends Dr. Ken and Shirley Underwood, Dr. Andrew Weiner, Pat White, Linda Killen, Carolyn Norman, and Dr. Glenn Cheatham of Arizona State University for their special support and concern for my future personal and professional growth.

Gratitude is also expressed to Dr. William McCubbin who facilitated my acceptance of a graduate teaching assistantship two years ago.

TABLE OF CONTENTS

	Page
ACKNOWLEDGEMENTS	ii
LIST OF TABLES	vi
Chapter	
1. INTRODUCTION	1
STATEMENT OF THE PROBLEM	3
JUSTIFICATION OF THE STUDY	4
DEFINITIONS	5
DELIMITATIONS	6
LIMITATIONS	6
HYPOTHESES	7
2. REVIEW OF LITERATURE	9
The Concepts of Leisure, Recreation and Work	9
Leisure Counseling	10
Existing Leisure Counseling Models	13
The Avocational Counseling Model	24
Eason's Leisure Life Style Counseling	27
Leisure Education and Recreation Counseling Model	29
Fulton's Humanistic Lifestyle Counseling Model	32
Fearn <u>et al.</u> , Leisure Education Lifestyle Model	33
Milwaukee Leisure Counseling Model	34
Burk Community Based Model for the Delivery of Leisure Counseling to Special Populations	35
Edward's Constructive Leisure Model	38

Chapter	Page
Leisure Counseling Program Model for Mentally Impaired Adults	42
McDowell's Leisure Counseling Model	45
Leisure Activities and Cardiac Rehabilitation/ Intervention Programs	56
Psychosocial Characteristics of Cardiac Clients	59
Coronary-Prone Behavior Patterns	60
Lowering the Risk Factors	61
SUMMARY	65
3. METHODOLOGY	67
Selection of Subjects and Procedures	67
Selection of Instrumentation	70
Leisure Interests	70
Leisure-Work Attitudes	71
Leisure-Work Self-Concepts	72
Leisure Satisfaction	73
Selection of Research Design and Statistical Treatment	75
4. RESULTS	80
Test For Homogeneity of Regression	80
Test For Differences Among Counseled and Non-Counseled Groups	86
Hypothesis One	86
Hypothesis Two	89
Hypothesis Three	89
Hypothesis Five	94
Demographic Data	94
Open Ended Questions and Responses	104
Length of Total Leisure Counseling and Weekly Sessions	106

Chapter	Page
5. DISCUSSION	108
Types of Leisure Activities Involved In For the Counseled Group	112
Specific Determined Goals and Objectives of Counseled Clients	113
Transcript of a Counseling Session	115
CONCLUSIONS	116
IMPLICATIONS	116
RECOMMENDATIONS	117
REFERENCES	119
APPENDICES	
A. ALTERNATIVE LEISURE EXPERIENCES	133
B. INSTRUMENTS	146
C. COVER AND FOLLOW-UP LETTERS	172
D. CONSENT FORMS	178
E. PRETEST AND POSTTEST MEAN COMPARISONS FOR COUNSELED AND NON-COUNSELED GROUPS	182
F. LEISURE ACTIVITIES INVOLVED IN FOR THE COUNSELED GROUP	188
G. SPECIFIC DETERMINED GOALS AND OBJECTIVES OF THE INDIVIDUAL COUNSELED CLIENTS	191
H. EDITED TAPE TRANSCRIPT OF A SECOND COUNSELING SESSION	200
VITA	210
ABSTRACT	

LIST OF TABLES

Table	Page
I. Existing Leisure Counseling Models	14
II. McDowell's--A Suggested Leisure Counseling Process	50
III. Pretest-Posttest Control Group Design	76
IV. Leisure Satisfaction Questionnaire Test For Homogeneity of Regression	82
V. Work Attitude Survey Test for Homogeneity of Regression	83
VI. Leisure Attitudes Survey Test for Homogeneity of Regression	84
VII. Work Self-Concept Survey Test for Homogeneity of Regression	85
VIII. Leisure Self-Concept Survey Test for Homogeneity of Regression	87
IX. Analysis of Covariance: Comparison of Experimental and Control Groups on Leisure Attitude Survey	88
X. Leisure Attitude Survey Adjusted Posttest Means and Unadjusted Means for Experi- mental and Control Groups	90
XI. Analysis of Covariance: Comparison of Experimental and Control Groups on Leisure Self-Concept Survey	91
XII. Leisure Self-Concept Survey Adjusted Posttest Means and Unadjusted Means for Experimental and Control Groups	92
XIII. Analysis of Covariance: Comparisons of Experimental and Control Groups on Work Attitudes Survey	93

Table	Page
XIV. Work Attitude Survey Adjusted Posttest Means and Unadjusted Means For Experimental and Control Groups	95
XV. Analysis of Covariance: Comparison of Experimental and Control Groups on Leisure Satisfaction Questionnaire	96
XVI. Leisure Satisfaction Questionnaire Adjusted and Unadjusted Posttest Means For Experimental and Control Groups	97
XVII. Mean, Range, Median and Standard Deviation Between Experimental and Control Groups on Age	98
XVIII. Mean, Range, Median and Standard Deviation Between Experimental and Control Groups on Yearly Income	99
XIX. Marital Status Frequencies Between Experimental and Control Groups	100
XX. Occupational Frequencies Between Experimental and Control Groups	101
XXI. Religious Frequencies Between Experimental and Control Groups	102
XXII. Education Frequencies Between Experimental and Control Groups	103
XXIII. Number of Weeks of Counseling and Average Length of Weekly Counseling Session	107

Chapter 1

INTRODUCTION

Currently, the therapeutic recreation profession has been in the process of synthesizing the specialty of leisure counseling. Specific leisure counseling models (Burk, 1975; Eason, 1972; Edwards, 1975; Fearn, et al., 1974; Fulton, 1973; Hayes, 1977; Jowiak, 1975; McDowell, 1976; Overs, 1970; Overs, et al., 1971, 1974a, 1974b; Wilson and Mirenda, 1975) have proliferated in an attempt to provide a systematic process by which individuals can develop a more satisfying meaningful leisure lifestyle and become aware of their leisure and work values and the personal expressions of these values. Still in its infancy, the concept of leisure counseling is being used to provide a more comprehensive leisure service for the purposes of education, rehabilitation and recreational involvement (Peterson, 1977).

Coupled with a growth of leisure counseling has been the growth and development of cardiac rehabilitation and intervention programs designed in part to reduce the risk factor involved with cardiovascular diseases. These programs have been a response to the fact that according to the American Heart Association (1978), in the United States alone, more than 29 million individuals are afflicted with cardiovascular diseases, accounting for one million deaths each year. Because this represents the number one cause of death in the United States today, the medical, health and allied health professions

are in the process of developing comprehensive rehabilitation and intervention programs to meet the medical, physical, social, vocational and nutritional needs of this population.

Sustained exercise has been identified as an effective component of cardiac rehabilitation and intervention programs in fostering the cardiac client's increased cardiovascular functioning and general well-being (Brenner, et al., 1960; Fox, 1972; Fox, 1977; Fox and Hoskell, 1966; Fox and Oglesby, 1969; Montoye, 1962; Morris, et al., 1953; Morris, et al., 1966; Morris, et al., 1973; Nagle, 1975; Naughton, 1975; Taylor, 1969; Zukel, et al., 1959).

Few references are made concerning the assessment and enhancement of the cardiac clients' leisure attitudes, interests, satisfaction, work and leisure self-concepts. Wolf (1966) has indicated that in post-myocardial clients, as well as in high risk cardiac clients, a lack of leisure satisfaction correlates with psychological stress, a factor which may increase the incidence of coronary heart disease.

In discussing the development of cardiac rehabilitation and intervention programs, Dr. Zohman (1975) states that cardiac rehabilitation is more than exercise for cardiacs. She clarifies this distinction by stating that a cardiac rehabilitation program "includes not only exercise, medical supervision and dietary counseling but psychological counseling, vocational counseling and efforts to lessen other risk factors such as smoking and hypertension" (p. 180). The use of counseling is seen by some cardiac rehabilitation programs as an important aspect of their services; however little attention, evidenced by lack

of research, has been given to the use of leisure counseling in fostering the cardiac client's leisure satisfaction and total well-being.

Witt, et al., (1973) have suggested that successful leisure experience depends in part on one's attitude toward leisure. One's attitude toward leisure may often be a reflection of the value an individual places upon leisure. Clarifying individual beliefs, goals, attitudes, and feelings serve as potential value indicators, and, as Galli (1978) states, "only when people value specific things will they behave in ways to achieve these things" (p. 182).

If certain risk factors characteristic of a cardiac client (stress, inability to relax) may be reduced through an increased level of leisure satisfaction awareness (Fox, 1977; House, 1975; Wolf, 1966), Galli (1978) and Raths, et al., (1966) suggest that leisure must first be valued and clarified by the client before he may decide to develop his leisure lifestyle.

Can existing leisure counseling models that incorporate the process of valuing effect attitudinal changes in a cardiac client?

This research represented an attempt to replicate the use of McDowell's (1975) leisure counseling model with a cardiac rehabilitation/intervention program. McDowell's theoretically based model consists of eight stresses as outlined in Table II, p. 50. This model is a result of McDowell's research within a community mental center where outpatients were referred to a leisure counseling program.

STATEMENT OF THE PROBLEM

The general problem was to verify the efficiency of McDowell's

leisure counseling model for potential use with cardiac rehabilitation and intervention clients. Does McDowell's suggested model have a significant effect on the cardiac clients' leisure attitudes, work attitudes, work self-concept, leisure self-concept and leisure satisfaction?

JUSTIFICATION OF THE STUDY

Martin (1977) indicates that "therapeutic recreation research tends to be too general in scope and therefore of limited applicability to the administrator or practitioner concerned with specific sub-groupings of disabled populations" (p. 85). Since McDowell's model (1975) was tested with mental health clients, its effectiveness cannot be generalized to any other population without further research. In McDowell's (1975) recommendations for further study, he suggests that his model be tested with other populations in addition to it being utilized specifically to test the "effectiveness of the model (for changing attitudes, self-concepts, values, etc.)" (p. 130).

In a discussion of therapeutic recreation research on the basis of content area, methodology, and setting, Martin (1974) reports that there is a "relatively low incidence" of research in the specific physical disability areas of which cardiovascular clients are a sub-group. In the content area of physical disabilities, research is equitably distributed between hospital, school and community settings, but there is little data on rehabilitation centers or camp settings (Martin, 1974).

With the National Recreation and Park Association and the National Therapeutic Recreation Society (1976) providing a forum for

the assessment of what "limited research into reliability, validity and efficiency of leisure counseling services" exists, the concern for such future research has been nationally avocated.

The role that satisfying leisure experiences have and that activities play within one's life have been identified as potential rehabilitative and interventive factors in a cardiac or potential cardiac client's life (Fox, 1977; House, 1975; Wolf, 1966). Yet, existing cardiac rehabilitation/intervention programs have not, to this researcher's knowledge, documented the possibility of offering leisure counseling for their clients. This research proposed to make a contribution toward this goal and toward the improvement of the general rehabilitation/intervention effort.

DEFINITIONS

Cardiac Intervention/Prevention - "to minimize an individual's coronary heart disease risk factors so as to optimize his/her prognosis for premature development of symptomatic disease" (Herbert, 1978, p. 1).

Cardiac Rehabilitation - to restore an individual to and maintain his/her optimum physiological, psychological, social and vocational status (Hellerstein, 1973, p. 248).

Counseling - a process in which a trained person establishes a helping relationship and "attempts to help another person in matters of self-understanding, decision-making and problem solving" (Pietrofesa, Leonard, and Van Hoose, 1972, p. 6).

Counseling Model - "An explicitly stated construct comprising two elements: (1) a philosophical or theoretical statement about the nature of man and his behavior, and (2) an established set of techniques for effecting the behavioral change process" (McDowell, 1975, p. 4).

Leisure Counseling - process incorporating a variety of facilitative techniques to enable an individual to identify and assess his current leisure lifestyle within the total life process, in order to explore and implement future leisure alternatives.

Cardiac Prone Client - an individual who is "significantly prone to coronary disease, as determined by risk factors" (Wilson, 1975, p. 154).

Major Cardiac Risk Factors - factors identified as correlating with coronary disease such as high blood pressure, obesity, smoking, high cholesterol levels, and lack of regular exercise.

DELIMITATIONS

Length of study - The length of time which leisure counseling will be offered will be a three month period from January 1979 through March 1979.

Clientele - Those persons within the Wake Forest University Cardiac Adult Fitness Program, Winston-Salem, North Carolina, who volunteer for leisure counseling services.

LIMITATIONS

The following limitations of this research have been identified:

Clientele - The number of clientele in the experimental and control group will total 26. A maximum of 13 experimental subjects can be effectively counseled by the researcher, who will serve as the sole leisure counselor.

Instrumentation - Substantial amounts of normative data have not been collected for the assessment questionnaires. The lack of replicated reliability and validity of the assessments is also considered limitations to this research.

Leisure Counselor - The results of any counseling process are based in part upon the effectiveness of the counselor in the counseling relationship.

HYPOTHESES

The following directional research hypotheses were adopted to explore the relationship of the McDowell leisure counseling model and its effectiveness in promoting behavioral change with specificity to attitudes, self-concept, and satisfaction toward leisure and attitudes and self-concept toward work, with cardiac intervention clients at Wake Forest University, Winston-Salem, North Carolina.

Hypothesis 1 - There will be a positive increase in leisure attitudes as measured by the Leisure Attitudes Survey for those individuals who received leisure counseling.

Hypothesis 2 - There will be a positive increase in leisure self-concept as measured by the Leisure Self-Concept Survey for those individuals who received leisure counseling.

Hypothesis 3 - There will be a positive increase in work attitudes as measured by the Work Attitudes Survey for those individuals who received leisure counseling.

Hypothesis 4 - There will be a positive increase in work self-concept as measured by the Work Self-Concept Survey for those individuals who received leisure counseling.

Hypothesis 5 - There will be a positive increase in leisure satisfaction as measured by the Leisure Satisfaction Questionnaire for those individuals who received leisure counseling.

Chapter 2

REVIEW OF LITERATURE

Several areas of consideration are included in the review of literature. The first is a brief overview of the concepts of leisure, recreation and work. The existing leisure counseling models and processes are presented in chronological order. Another area of concern is the relationship of leisure activities and cardiac rehabilitation/intervention programs. There are not very many specifically related studies; therefore a general overview of tangentially related research is provided. The last three sections present psychosocial characteristics of cardiac clients, coronary-prone behavior patterns, and factors involved in reduction of coronary risks.

The Concepts of Leisure, Recreation and Work

Although the terms recreation and leisure are often mentioned synonymously, there are differences in their respective meanings. Leisure has been defined as a block of time, relaxation, and time which could be devoted to recreation (Neulinger, 1974). The ancient Roman and Greek cultures viewed leisure as a condition of the soul. In this classical sense, leisure was used to enrich an individual through the pursuit of intellectual, cultural, civic, and artistic activities (Murphy, 1975). Pieper (1952) has discussed leisure as an attitude of the mind.

The concept has eluded philosophers for centuries, although leisure is commonly viewed as non-work activity that individuals enjoy in their free time (Dumazedier, 1967). Work and its relationship to leisure in a post-industrial society reflects the value of leisure as a reward for being gainfully employed (Murphy, 1975). Work is perceived as the dominant rhythm of society around which all other aspects of social life gain their significance. Leisure as a non-work activity is then viewed as a direct result of work.

A holistic concept of leisure is characterized by a convergence of elements--an integration of work and nonwork. "Elements of leisure, . . . pleasant expectation of self-growth--become ideals in the work situation; meantime, elements of work--such as fulfillment of oneself, discipline and craft--find their way into leisure" (Kaplan, 1972).

Recreation has been regarded as a form of activity or experience (Dumazedier, 1967; Neulinger, 1974; Parker, 1971). Gray (1972) has suggested that recreation is not an activity but an emotional condition within an individual as a result of an activity. In either case the activity can include a variety of passive or vigorous physical involvements. Recreation is said to be a basic human need (Haun, 1976) contributing to the individual's mental, physical, and social well-being (Martin, 1967).

Leisure Counseling

Leisure, recreational, vocational, and avocational counseling, and lifestyle planning are all used in an attempt to describe the

process, techniques, and objectives involved in characterizing present orientations that may facilitate a leisure lifestyle. In the last decade, the therapeutic recreation profession has experienced the growth of the leisure counseling specialty. Prior to this era of growth, the mention of "recreational counseling" is cited in Olson and McCormick (1957) at the Kansas City Veteran's Administration Hospital, reflecting the need to provide a recreational counseling service to help prepare psychiatric clients for hospital discharge, exploration of leisure needs and in the identification of community based recreational resources. Olson and McCormick (1957) also felt that for a client to establish employment upon discharge was often not sufficient for the client's successful rehabilitation. In non-working hours, clients were prone to reestablishing former pathological patterns of behavior.

Another early attempt, by Arje (1960), at the Kansas City Veteran's Administration Hospital, expressed a similar need for recreation counseling and reported attitudinal differences between psychiatric clients participating in recreational counseling and non-counseled clients. Among the 346 counseled clients, Arje (1960) found that: (1) prior to discharge clients had made plans for social, recreational and vocational activities, (2) clients developed a greater awareness of the importance of utilizing leisure, (3) recreation was viewed not only as entertainment but as therapy, (4) "comparatively few" had been readmitted to the psychiatric ward, and (5) they established a broader base of friends. Related to these early efforts to share the concept

of leisure counseling as a service component, Acuff (1966) suggests that leisure counseling can facilitate the growth of the typical short-term psychiatric client's undeveloped leisure life.

In essence, early attempts of leisure counseling are a reflection of the concern expressed for a more complete rehabilitation of psychiatric clients. In this particular setting the leisure counseling process is essential to the client's development of skills and attitudes toward the appropriate use of leisure and identification of recreative and social activities within the community after institutionalization.

With increasing societal acceptance of the fact "that leisure experiences are vital to the development of culture, maintenance of physical and psychological adjustment, and to the establishment of a satisfying lifestyle" (Witt, 1976, p. 2), leisure counseling processes are being proposed for use with all segments of society. As our society increases, the opportunity for more leisure counseling can foster individual decisions concerning the responsible use of leisure. Guidance counseling to education for leisure have been identified by recreational professionals as a critical issue of the future (Butler, 1959; Corbin and Tait, 1973; Godbey and Partner, 1976; Kando, 1975; Kraus, 1971; Meyer and Brightbill, 1961).

Leisure counseling is seen as vital to human development for all segments of society in the following ways:

1. Leisure counseling enhances lifestyle;
2. Individuals can become aware of community recreation resources;

3. Leisure counseling can facilitate the development of new activities and skills, or re-establish past recreational skills;

4. Leisure counseling can facilitate social adjustment and the enjoyment of leisure which are considered to be essential to one's overall health (O'Morrow, 1970, p. 17).

The techniques involved with leisure counseling are basic to those developed in the counseling profession. Goal-setting, structuring and reflection of feelings are several techniques basic not only to leisure counseling but to school guidance, family, and marriage counseling.

The relationship of leisure counseling to selected counseling theories and approaches are current topics of discussion among leisure counselors (Gunn, 1977; Edwards, 1977; McDowell, 1977; Peterson, 1977; and Witt, 1977). The exact relationships needed to substantiate this vital link to counseling theories and approaches have yet to be determined.

Existing Leisure Counseling Models

In an attempt to exemplify leisure counseling as a systematic service, models have been developed identifying successive steps. As a result of attempting to delineate aimlessly directed leisure counseling efforts and approaches as well as research based leisure counseling models, Table I was developed.

Although McDowell (1975, 1976, 1977); Peterson (1977) and Witt (1977) have supported the development and use of leisure counseling

TABLE I

Leisure Counseling Model	Theoretical Construct	Orientation	Clientele	Presenting Symptom or Mechanism Used to Involve Client	Suggested Counseling Techniques	Length of Counseling	Dimensions Measured	Assessments Used or Proposed
5			6	12	10	60	10	
Avocational Counseling Model (Overs, Wilson, Miranda 1970; Epperson 1975; Miranda 1975; Wilson 1974)	Unspecified	Leisure Resource Guidance	Mainstream special populations sheltered	Self-referral Family/parent referral School/educational referral Community/agency referral Significant other(s)	Interview Dissemination of Information Assessments Referral to Community Activity	Average Time Total Per Client 9.59 hours Initial interview average - 1.27 hours/client counseling- 3.6 hours/client Community resource exploration- 3.4 hours/client miscellaneous duties - 3.46 hours/client	Leisure, Recreational or Avocational Interests	Assessments Miranda Leisure Interest Finder (Miranda 1973) Avocational Title Card Sort (Overs 1974) Avocational Title Card Sort (Overs 1974) Avocational Plaque Sort (Overs 1974) Avocational Magazine Picture Card Sort (Overs 1974) Cassette Audio Recordings of Case Studies (Overs, 1974) Avocational Activity and Inventory File (Overs 1974)

TABLE I (continued)

Leisure Counseling Model	Theoretical Construct	Orientation	Clientele	Presenting Symptom or Mechanism Used to Involve Client	Suggested Counseling Techniques	Length of Counseling	Dimensions Measured	Assessments Used or Proposed
Leisure Lifestyle Counseling (Eason 1972)	yes	Leisure Lifestyle Awareness (Values Orientation)	Women aged 25 to 61 known to be consistently in leisure activities identified to a specific lifestyle	Invitation to those who wish to explore an alternative lifestyle	Group Discussion, Value Clarification	2-day conferences (14.5 hours)		Unsystematic Observational Data
Model for Leisure Education and Recreation Counseling (Hayes 1973, 1974, 1975)	Unspecified	Leisure Lifestyle Awareness (Developmental Education)	Institutionalized Mentally Impaired	Leisure Awareness Self-referral Family/parent referral Community/agency referral School/Educational referral Significant other(s)	Instructions Advisory Counsel, Emotional appeals, value clarification	Unspecified	Individual goals, level of physical, social, and psychological functioning, recreation and leisure interests	Unspecified interest inventory, physical, social and psychological assessments.

TABLE I (continued)

Leisure Counseling Model	Theoretical Construct	Orientation	Clientele	Presenting Symptom Mechanism Used to Involve Client	Suggested Counseling Techniques	Length of Counseling	Dimensions Measured	Assessments Used or Proposed
Fulton's Humanistic Lifestyle Counseling Model (Fulton 1973 in Murphy 1975)	Unspecified	Leisure Lifestyle Awareness (circumstantial)	Individuals with an altered life-style due to illness, accident or disease	Frustration, anxiety self-referral family/parent referral community/agency referral school/educational referral significant other(s)	Reflecting feelings	"A period of weeks or months"	Self-expressed feeling related to existing lifestyle	Self-evaluation

TABLE I (continued)

Leisure Counseling Model	Theoretical Construct	Orientation	Clientele	Presenting Symptom or Mechanism Used to Involve Client	Suggested Counseling Techniques	Length of Counseling	Dimensions Measured	Assessments Used or Proposed
Leisure Education Lifestyle Model (Fearn, O'Brien, and Prosser 1974)	yes	Leisure Lifestyle Awareness	Academic Community	Self-referral	Group and Individual role playing, brainstorming, homework assignments, discussion reviewing literature related to economical, sociological, environmental and psychological aspects of leisure, workshops, courses, resource centers	Unspecified appears to be related to the type of technique used	Individual plan for leisure achievement	Self-evaluation

TABLE I (continued)

Leisure Counseling Model	Theoretical Construct	Orientation	Clientele	Presenting Symptom or Mechanism Used to Involve Client	Suggested Counseling Techniques	Length of Counseling	Dimensions Measured	Assessments Used or Proposed
Milwaukee Leisure Counseling Model (Wilson 1974; Wilson, Miranda, Rutkowski 1975)	Unspecified	Leisure Resource Guidance	Main-stream Sheltered special populations	Self-referral Family/parent referral School/ educational referral Community/ agency referral Significant other(s)	Profiling leisure interests referral	Unspecified	Leisure interests	Miranda Leisure Interest Finder (Miranda 1973)
The Burk Community-Based Model for Delivery of Leisure Counseling Service to Special Populations (Burk 1975)	Unspecified	Leisure Resource Guidance	Special Populations within the Community	Self-referral Family/parent referral Community/ agency referral School/ Educational system referral Significant Other(s)	Interview, goal-setting placement service, information sharing, assessments, problem-solving	Unspecified appears to be directly related to the number of behavioral goals established	Mutually agreed upon client-centered behavioral objectives (i.e., degree or frequency of social involvement) Level of leisure adjustment, and leisure activities	Proposed Leisure Activity Blank (McKechnie 1974) Self-Leisure Interest Profile (McDowell 1975) Avocational Activities Inventory (Overs 1974)

TABLE I (continued)

Leisure Counseling Model	Theoretical Construct	Orientation	Clientele	Presenting Symptom or Mechanism Used to Involve Client	Suggested Counseling Techniques	Length of Counseling	Dimensions Measured	Assessments Used or Proposed
Constructive Leisure Commercial Model (Edwards 1975)	Unspecified	Leisure Resource Guidance	From Junior High School Age on up. All segments of society including special populations	Self-referral Family/parent referral Community/agency referral School/educational referral Significant other(s)	Interview, testing, analysis, research and resource referral	Two hours to six weeks depending upon client type	Leisure activities Personal preferences, Personal skills, and leisure time	Constructive Leisure Activity Survey (Edwards 1974) Kuder Preference Record-Vocational Form CP (Kuder 1956) Strong-Campbell Interest Inventory (Campbell and Strong 1933)

TABLE I (continued)

Leisure Counseling Model	Theoretical Construct	Orientation	Clientele	Presenting Symptom or Mechanism Used to Involve Client	Suggested Counseling Techniques	Length of Counseling	Dimensions Measured	Assessments Used or Proposed
Leisure Counseling Program Model for Mentally Impaired Adults (Joswiak 1975)	Unspecified	Leisure Lifestyle Awareness (Educative)	Mentally Impaired Adults Living in a Group Home	Mis-Management of Free Time Agency referral	Group Sessions, Instructions, Emotional appeals, Value clarification	8 to 10 weeks	Individual enabling objectives, verbal abilities, leisure behavior, leisure counseling leisure counseling activity, participation in leisure activity, effect of program, clients opinion	Enabling objective assessment sheet, Expressive Language Checklist and Receptive Language Checklist, Leisure Behavior Assessment Form, Leisure Counseling Session Evaluation Form, Leisure Counseling Activity Evaluation Form, Participation in Leisure Activity Assessment Form, Post-Interviews with Resident Counselors, Pre-Interview with Clients, Post-Interview with clients

TABLE I (continued)

Leisure Counseling Model	Theoretical Construct	Orientation	Clientele	Presenting Symptom or Mechanism Used to Involve Client	Suggested Counseling Techniques	Length of Counseling	Dimensions Measured	Assessments Used or Proposed
McDowell's Leisure Counseling Model (McDowell 1975)	yes	Leisure Lifestyle Awareness (Developmental)	Out-patient Mental Health	Depression causing stress and anxiety Agency referral	Problem-solving, reflection, goal-setting, value clarification, assessments	Six months assessments after one to two months	Leisure interests, Leisure Self-Concept, Work Self-Concept, Leisure Attitudes, Work Attitudes, Leisure Satisfaction	Self-Leisure Interest Profile (McDowell 1973) Leisure Self-Concept (McDowell 1975) Work Self-Concept (McDowell 1975) Leisure Attitudes (adopted from Neulinger 1974) Work Attitudes (adopted from Neulinger 1974) Leisure Satisfaction Questionnaire (adopted from Overs 1974)

models based upon "philosophies or theoretical constructs" and an "established set of techniques," the majority of the leisure counseling models represented in Table I reflect the fact that they can be distinguished from leisure counseling approaches and techniques by the schema they present. Of those leisure counseling models based upon a theoretical construct (Eason, 1973; McDowell, 1975; Fearn, et al., 1974), McDowell's is easily distinguished by his extensive discussion of the human condition, learned leisure behaviors, and how leisure integrates with mental health, attitudes, valuing and self-concept. He uses this theoretical base to design a leisure counseling model incorporating the use of values clarification techniques. McDowell has satisfied both conditions considered necessary to the development of a counseling model. His systematic approach to this has been described as "adding credibility to the multi-faceted leisure counseling phenomenon" as well as setting an example for future development of leisure counseling models (Peterson, 1977, p. 12).

The Fearn, et al., (1974) model is theoretically based in the Ekistical Ethic which suggests that work is of the same magnitude as any other necessary human experience and that a state of leisure is necessary before educational, vocational and the other human activities can be engaged in optimally (p. 3). This model suggests several techniques for promoting this approach to life.

Eason's (1972) model bases its theoretical assumptions in an expressed desire of humans to explore alternative lifestyles in concert with their current environment. For humans, she theorizes, the

consequences of doing nothing or being involved in activities that are unfulfilling in any personal sense are psychologically unhealthy.

Eason (1972), like McDowell (1975), utilizes the values clarification techniques to help an individual become satisfied and fulfilled in leisure. The existing leisure counseling models reflect four distinct counseling orientations, although in Table I they are characterized by their primary emphasis. These four counseling orientations have been identified as the following:

1. Leisure Related Behavioral Problems - in which the primary counseling focus is on the needs, goals, problems, constraints, and felt difficulties of the client and his selected leisure life style.

2. Leisure Life Style Awareness - in which the primary counseling focus is educative, re-educative or preventive on the inter-related life style concerns of the client.

3. Leisure Resource Guidance - basically matching recreation interests with available community and personal resources, based upon personal activity exploration.

4. Leisure-Related Skill Development - development of leisure functioning skills--motor, social, mobility, budgeting, planning, etc. (McDowell, 1976, pp. 2-3).

These distinctions are not inflexible, and often times the leisure counseling models reflect more than one orientation. Two leisure counseling models, Hayes (1975) and McDowell (1975), have the potential for integrating all four orientations depending upon the counseling emphasis and client. Hayes (1975) attempted to develop a

model of a generic nature for leisure education and recreation counseling, stating that by keeping seven variables in mind, most skepticism concerning the general applicability of the model should be diminished. One variable, "the approach(es) toward leisure education and recreation counseling the recreation services staff wishes to implement" (Hayes, 1975, p.15), suggests that any one, or a mixture, of the four counseling orientations could be used, depending upon the staff.

McDowell's (1975) model identifies eight flexible steps incorporating a counseling focus on the barriers felt by the client, (leisure related behavioral problems), identification of behavior and specific criteria used to develop the leisure skills (leisure related skill development), the clients' understanding of work and leisure in their lifestyle (life style awareness) and sharing information with the client about possible community resources (leisure resource guidance).

The Avocational Counseling Model

Leisure counseling as an information retrieval-dissemination service characterizes the model developed by Dr. Robert Overs and his associates at the Milwaukee Curative Workshop, Milwaukee, Wisconsin. Clarifying the avocational choice-selection process for the client, the model presupposes that clients may only need help in determining the most readily available resources that can fulfill their leisure interests. This approach has been identified as "avocational" (Overs 1970), "recreation" (Will, 1973), or "activities" (McDowell, 1975)

counseling. During a two-year demonstration project, Overs and his associates realized the potential importance of avocational counseling. The project was concerned with educating stroke patient families (Overs, 1971). Results indicated that for a group which received extensive family counseling (but without leisure counseling) and a group which received usual social agency casework services there were no patterns of differences on certain criterion measures, including avocational activities involvement. Increasing isolation of the family from community-neighborhood services was also revealed. The study concluded that rehabilitation efforts that help patients reintegrate into patterns of community-neighborhood interaction and find avocational activities approximate to lost roles would be beneficial to the stroke patient and his family. As a result of this project, the Avocational Activities Inventory, a comprehensive classification and coding system, was developed to aid in the avocational counseling process. At the same time, a community avocational activities resource file called the Avocational Activities File was developed (Overs, DeMarco and O'Connor, 1974). A demonstration project utilizing a working model for avocational counseling over an eight month period involved 122 variously handicapped clients. An effort was made to gather data on each step in the model. The prolific findings are not possible to report within this chapter (Overs 1974). The avocational counseling model is characterized by four steps. Steps one and two represent initial interviews in which a client's past experiences, attitudes and feelings with avocational activities are explored.

To aid the counselor and client in ascertaining these experiences, attitudes, and feelings, several avocational interest inventories are identified for potential use as seen in Table I, p. 14.

Other instruments that were developed during the project as listed in Table I, p. 14, represent a number of avocational interests. Expressions of likes, dislikes and attitudes may be facilitated by the counselor during this process with the client. Two techniques that have been used are the Avocational Magazine and Picture Card Sort representing major interest areas. The cards are sorted into two piles by the client, one determining activities of personal interest and the other determining those activities the client is not interested in. The Avocational Magazine depicts various activities that the client may be interested in.

The use of pictures and slides rather than words to aid in the avocation choice process was suggested to be of great value to the mentally retarded, poor readers, illiterates, and individuals with specific perceptual and language deficits. Cassette audio recordings of individuals involved in pursuing an avocational activity in the community were believed to be useful with visually handicapped clients and those clients who can understand English when spoken but cannot read it.

These and other instruments as listed in Table I represent steps one and two as the avocational choice processes. Step three of the avocational model is where the client is provided with pertinent avocational information including community resources for his particular choices, needs and circumstances through the use of the Avocational Activities File and Inventory. The counselor can assist the client in

considering the factors surrounding the implementation of the choices. Finances, transportation, equipment and other such factors are considered (Overs, 1974).

Upon completion of step three, the client is actually referred and entered into the selected activities in step four. In the demonstration project a final or fifth step involved an evaluation of the whole selection, implementation, and referral system. The model as it is used today does not incorporate the fifth step.

Length of the counseling process for this model is specified in Table I, p.14. Unique to this model is its use of computer technology in determining leisure interests for certain clients. Computer use is not applicable for clients who are visually impaired, cannot read or write or have perceptual difficulties. The wide variety of instruments represents a multi-media approach to stimulating avocational choice selection and attempts to accommodate the various atypical segments of society. Currently the model is also utilizing a leisure lifestyle awareness orientation.

The effectiveness of this model is unclear as it lacks a follow-up and evaluative phase. In some cases, depending upon the clientele, only subjective data could be obtained in an attempt to measure avocational satisfaction.

Eason's Leisure Life Style Counseling

Eason's Leisure Life Style Counseling (1972) was developed primarily for mature women as a method to prevent the "psychologically unhealthy" life style of doing nothing among women. In the developmental

life cycle of women, the middle years may hold the greatest amount of stress for them as children leave home and their domestic responsibilities change (Duvall, 1971 and Eason, 1972). Eason (1972) regards the home-oriented and child-rearing activities as a career for many women but suggests that uses of leisure need to be explored and developed with equal thought and consideration given to alternative career development. Through this process an alternative life style providing integration, meaning and structure throughout the life cycle can be explored to prevent "psychological unhealthiness." Eason's life style counseling makes an effort to explore within leisure the opportunity for growth, relationships and creativity.

Eason's exploratory project was held with 35 upper middle class women of varying ages, mostly married. The primary counseling concern was to facilitate the individual's value orientation toward one of four leisure lifestyles as presented by Goldman (1965). Goldman suggests that there are four directions for women seeking fulfillment and productive satisfaction in socially useful but nonreimbursed leisure activities. Each of the four reflects a basic key value in the individual's pursuit of a leisure life style. For purposes of Eason's (1972) study, these four groups were defined as Theoretical, Influential, Aesthetic, and Social. A second counseling goal was to facilitate choices that reflect the value orientation of the individual and become expressions of a unique life style.

Two day conferences were held utilizing a small discussion group format. The first day consisted of sharing experiences related

to the client's lifestyle, early memories of the lifestyle and to considerations of what had influenced the learning of their particular lifestyle. The second day's discussions centered around value concepts, patterns and the problems or conflicts relating to the implementation of the lifestyle. Eason (1972), interpreting her results, states that the lifestyle counseling approach brings clarification and satisfaction to clients who have previously felt themselves floundering from one involvement to another, but that the techniques and theories appropriate to counseling for lifestyle are not yet clear. Personal values, once clarified and accepted, may be refined and lived out within a lifestyle integrating many activities that are open to choice. In trial settings, the individual may require guidance as appropriate patterns are explored and learning how to use the pattern for decision making is worked out. It was evident that the women did represent the four orientations with significant differences among them. The women expressed satisfaction with the counseling conference experience, but the effect on their leisure lifestyle is unclear.

Leisure Education and Recreation Counseling Model

This model was developed as a result of the documented need to provide leisure education and recreation counseling for the retarded. Hayes (1977) states that many retarded individuals "fail in community adjustment as a result of inappropriate use of their leisure time" (p. 208). Like the early efforts in leisure counseling, Hayes' model reflects the concern to provide the newly discharged client with the skills needed to fulfill leisure and recreation experiences in

non-working hours. The goal of leisure education and recreation counseling is to develop a client who has the skills to adjust to new and different situations as they arise (Hayes, 1977). The purpose of this leisure counseling effort includes necessary intervention into the existing lifestyle of the client. This intervention is done on a planned basis so that the client can eventually select which activities and experiences of community leisure living are appropriate to him. This purpose is fulfilled by educating the client to "achieve his own goals and objectives as they relate directly to the involvement in recreation and leisure experiences" (Hayes, 1977, p. 212).

Hayes has attempted to develop a generic model in order to assure general applicability to differing agencies, clients, financial structures and staff. He contends, however, that as a result of its generic nature it is vague in some of its components and inappropriate for some agencies and programs in some areas.

The overall model consists of nine components, each accompanied by goals and objectives. The nine components are identified as the following:

- A. Entry in program, facility or institution.
- B. Initial contact, informal interview, establish rapport, give interest inventory.
- C. Consultation with rehabilitation team or its equivalent.
- D. Develop individualized program to enhance individual and group skills.

- E. Leisure education and recreation counseling service.
 - F. Obtain consensus of discharge date, and discharge location.
- Predischarge sessions may involve previously discharged patients, and a community liaison person.
- G. Discharge follow-up assistance and visitations.
 - H. Evaluation and assessment of community involvement.
 - I. Termination, or suggested remedial or alternative plan of action (Hayes, 1977, pp. 211-216).

The leisure education and recreation counseling component states three primary goals of its services: "(1) involve client in community activities with supervision that have carry-over value and an appropriate cost; (2) discussion, instruction, and facilitation of related activities for successful involvement in total community living; (3) discussion and facilitation sessions concerning the development of positive feelings toward self and total community living" (Hayes, 1977, p. 214).

By definition, the nine components serve to help the client acquire skills, knowledge competencies, personal values and attitudes; individual goals and objectives; self-confidence and self-esteem; and successful experiences (Hayes, 1977; Kearn, 1977).

Similar phases or components can be seen in the efforts of Burk (1975) and Fearn et al., (1974). All three designate a "leisure plan," although the achievement of such a plan can be accounted for in Burk's model (1975) through performance and behavioral criteria. Fearn et al., (1974) and Hayes (1977) do not specify how the achievement of the client's leisure plan is assessed. Both Burk (1975) and Hayes

(1977) suggest that their leisure counseling process enables the client eventually to select and become involved in community recreational and leisure experiences without supervision. The process may take days, weeks or months depending upon the client. The effectiveness of the Recreation Counseling Model (Hayes, 1977) is unclear. As the author states, "to prove its effectiveness and value there must be more intensive testing of the model and the process" (Hayes, 1977, p. 208).

Fulton's Humanistic Lifestyle Counseling Model

Individuals with an altered lifestyle due to terminal illness, accident or disease serve as the clients for the development of Fulton's Humanistic Lifestyle Counseling Model (1973). The model focuses on the individual's lifestyle circumstance in order "to encourage the client through a self-help process to assume some measure of autonomy and control over his life" (Murphy, 1975, p. 87). The six steps involved in the Humanistic Lifestyle Counseling Model are flexible and do not necessarily follow any particular order. The counselor and client must establish rapport. The counselor and client roles are defined and details of the client's existing lifestyle, education, socio-economic background and interpersonal relationships are gathered together. The continuation of a closer client-counselor relationship that involves trust and confidence is strengthened in order to identify the existing lifestyle pattern. Another step deals with the counselor giving support and also questioning and confronting the client's thoughts and feelings concerning his

altered lifestyle. Fulton (1973) suggests that frustration and anxiety are two feelings expressed by clients with altered lifestyles that can be clarified in a counselor-client relationship.

Step five is when lifestyle counseling is initiated after the client has expressed his newly assessed inner feelings, attitudes and thoughts. Step six is the terminating point of the self-help process. The client, in control of his life, makes self-directed choices and decisions toward a new lifestyle. The whole process may take "a period of a week or months," and its effectiveness is unclear to date, as clients themselves are involved in a form of self-evaluation not documented.

Fearn et al., Leisure Education Lifestyle Model

In an effort to foster leisure lifestyle awareness within an academic community Fearn et al., (1974) have developed a Leisure Education-Lifestyle model. Leisure counseling is one service offered through a Leisure Education-Lifestyle Center in an attempt to close the gap between an individual's actual leisure and his desired or ideal leisure existence. The systematic process that identifies this model consists of four phases and nine processes. Phase one has the concept of leisure being introduced to clients as an attitude.

Phase two attempts to foster the client's understanding of his actual leisure and his ideal leisure self. Three processes are needed to accomplish this phase. The client must examine his actual leisure self in concert with his current attitudes and behavior and explore his ideal leisure self, which Fearn et al., suggest means that

the individual understand his leisure potential and "payoff" system of an ideal leisure existence. Once the client understands the gap between his actual and ideal leisure self he must examine the constraints in an effort to "bridge the gap" to ideal leisure achievement.

Phase three helps the client choose and plan leisure. The client may accomplish this through an information dissemination process requiring that he also consider the consequences of his decision to plan for leisure achievement.

In order to close the gap between the actual and ideal leisure self (phase four), the client's leisure plan must be implemented and undergo a continual process of self-evaluation. Fearn et al., utilize a variety of techniques as seen in Table I to assist clients in accomplishing phase four of their model.

To date, no data exist on this model's effectiveness.

Milwaukee Leisure Counseling Model

This model is used in the Milwaukee Public Schools, Division of Municipal Recreation and Community Education (Wilson, 1974; Wilson, Mirenda, Rutkowski, 1975). It was developed in response to three needs: (1) to ease the transition of temporarily sheltered individuals discharged back into community living; (2) to broaden the average individual's potential through recreation/educational outlets available locally; and (3) to provide vocational rehabilitation and counseling opportunities for individuals isolated from the mainstream of life.

For a nominal fee, leisure counseling is available to everyone in the community. Clients are then identified as the mainstream, sheltered or special population. The process, although flexible, usually includes five steps reflecting the leisure resource guidance orientation.

Step one is a simple self-referral or inquiry. For other sources of referral see Table I, p.14. Step two involves the client in completing a leisure interest finder as specified in Table I, p.14. Step three is a direct result of the preceding step. A profile of leisure interests is developed from the leisure interest finder. Step four consists of a counseling session in which the client is referred to activities of interest by using a local leisure resource file. This resource file contains the same information as the Avocational Activities File (Overs, DeMarco, and O'Connor, 1974). Step five is designed to be a follow-up of the client's success in one or more leisure pursuits. There is no in-depth counseling of clients and no evaluation or follow-up on services (Mirenda, 1978). The Milwaukee Leisure Counseling program has made a greater effort at developing a comprehensive and reliable interest finder than in assessing the effectiveness of leisure counseling among the clients they serve.

Burk Community Based Model for the Delivery of Leisure Counseling to Special Populations

In an attempt to provide a leisure resources guidance service to community based special populations, Burk (1975) proposed a six

phased model. In phase one of this model, the client becomes involved in the leisure counseling service by referral from one of several sources identified in Table I. Within this phase the leisure counselor utilizes available referral data in order to determine the appropriateness counseling.

Phase two serves as a client inventory service. The inventory consists of an interview and use of appropriate assessments, as seen in Table I, to try to determine the client's leisure interests, activities, and leisure problems or concerns. As a result of the inventory process, the client and counselor establish a plan of action through stating mutually agreeable behavioral objective(s). Specific performance criteria are established that indicate the frequency, duration and situation for which the behavior is to occur.

Phase three outlines the strategies used to implement leisure counseling services. This is the phase from which the Burk model derives its counseling orientation. Information is conveyed on an instructional basis relating to the activities identified as necessary for the client's successful involvement in community leisure programs. Instructions in budgeting time and money, available transportation, location and procedures for joining community programs are shared with the client. The leisure counselor acts as a liaison between community leisure program personnel and services and its client. The implementation phase assumes that the client will become involved in community programs without counselor supervision. Burk (1975) does not specify who is responsible for providing the client with

instruction or skill development in a specific leisure activity but that it is a part of the leisure counseling information service.

The major emphasis of the implementation phase is resource referral and information; however, Burk includes the objective of fostering an understanding of leisure and work in relation to the community in which the client lives.

Phase four is the follow-up service component of leisure counseling. If the client contacted is experiencing some difficulty in becoming involved in community programs the counselor may provide assistance. Supervisory personnel within the community are contacted if necessary to determine how well the client is fulfilling the performance criteria for each behavioral objective. A follow-up interview between the counselor and client gives the client an opportunity to discuss progress, concerns, and problems. The client and counselor can plan to alter the leisure counseling plan if necessary to foster a more effective leisure situation.

Phase five attempts to evaluate leisure counseling outcomes. The client's level of leisure adjustment is evaluated based upon the following criteria: (1) frequency and degree of social involvement, (2) frequency and degree of community activity participation, (3) effectiveness in budgeting both finances and time for leisure activities, and (4) effectiveness of client-initiated community recreation and leisure activities. The outcomes of the leisure counseling in this evaluative phase are determined by the client's behavioral objectives that were established in phase two. At this point additional

behavior objectives may be indicated, and alternative actions designed to improve successful community recreation and leisure involvement may also be employed.

Phase six terminates the counseling relationship if the leisure counseling process has achieved the desired outcomes. If the desired outcomes have not been achieved, the counselor and client start again at phase two. Little is known about its theoretical base, actual effectiveness and potential use.

Edward's Constructive Leisure Model

In 1968 the first private counseling center specializing in leisure counseling extended its services to the public. Founder, Patsy Edwards (1975, 1977), describes her model as consisting of four basic ingredients: interview, testing, analysis, and research. As a result of using these basic ingredients, the client is referred to an appropriate community resource that can provide a satisfying and practical leisure activity to the client. Edwards identifies eleven types of leisure counseling services, both on a group and individual basis, that utilize any combination of four processes. The interview process involves collecting factual, biographical, and occupational data about the client. The client's motivation, personal preferences and skills, and leisure activities are also ascertained in the initial interview process.

The testing process may utilize informal surveys, a structural published standardized device or a simple list of questions. Selection of the type of test is left to the counselor's discretion. In the analysis process, four steps are used, regardless of the type of leisure

counseling. The four steps are as follows: study the collected information; decide which interests the person really likes; survey and select the practical activities that can stem from the interests; and specify ways and places to follow the activities. Another step, designated as test interpretation, is applicable only when tests are used. To help solidify this information, a referral and remarks sheet is used in the analysis process. The counselor's suggestions on how the client can better enjoy life through more fulfilling leisure experiences are recorded into general remarks, professional, volunteer or enjoyment, and self-improvement categories. If the client is seeking vocational or professional guidance, Edwards' (1975) model attempts to encompass this type of service.

In analyzing a client's interests to ascertain if the client genuinely likes his leisure activity, Edwards suggests that how a client likes or dislikes his work must be considered, as certain elements of work may be similar to the genuine interests of the client.

Once this analysis is completed, an activity file and referral materials are used to assist in the client's actualizing his leisure interests. Edwards' (1975) research process supplies an activity file of local up-to-date leisure resources from which referrals are made. The only way to evaluate the effectiveness of this model is to examine case studies. The first case mentioned involved an individual, Bill, who wanted help in "doing something on Sundays." Bill was given an interview, three tests and referral in two sessions, consisting of a total of three hours. Since Bill basically knew his leisure interests, the counselor focused on an assessment of values and

clarification of those interests. Although he was given both the Kuder Preference Record and Strong-Campbell Interest Inventory, "his referrals could have been suggested on the basis of the interview and activity survey alone" (Edwards, 1975, p. 120). Bill's case is an example of leisure counseling as an activity referral service which Edwards terms a "classic case."

In another case study using the Edwards model, a couple, Leona and Hal, were prompted to seek leisure counseling after their youngest child left home. Interviews conducted with both husband and wife on a separate and combined basis revealed many possible mutual activities. In the referral session the couple stated "they had done some serious thinking since the first session and had taken some action" (Edwards, 1975, p. 105). Acting on her realization that she was lazy and since the children had left home, she needed to adapt to that new situation, Leona joined a YMCA exercise class and decided to diet. Together Leona and Hal signed up for bridge lessons. In this session the counselor recommended Leona consider volunteer work and Hal explore a marina for free boating lessons. With a potential mutual interest in art, the couple were made aware of the public art museum and its activities. Two counseling sessions of an unspecified amount of time were required.

This case demonstrates that the leisure counseling interview may have facilitated some initial action on the part of this couple to improve themselves and their leisure life. The effectiveness of the leisure counseling over a period of a year and a half was discovered

when Leona called Constructive Leisure to refer a relative to Edwards' services. Leona had taken a part-time job in an art museum gift shop and Hal had taken up a profession he was more interested in than his previous employment.

The last case study is from a once a week three hour session workshop conducted over a period of six weeks. Marguerite, a workshop participant in her late 60's, expressed the fact that she felt her life was completely empty and in a state of "nothingness," considering the recent death of her husband and the relocation of several friends. She was desperate to make up her mind to do something. During the next three sessions, however, she made little effort to follow suggestions and resisted taking a simple interest inventory. Her interests were identified in the areas of art, music and literature. Marguerite had written children's poems in the past but had forgotten about them and the activity. At the next session she shared them with the other workshop participants, two of whom asked her to read them to their grammar school classes. The group encouraged her to start writing again, contact the Sunday schools, children's hospitals and school volunteers to offer to present a program of her poetry. Since these suggestions came from the other participants, the group worked as a source of referral for Marguerite.

Although these case studies are subjective in nature, they represent an attempt to present the effectiveness of the Edwards' (1975) leisure counseling process.

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Leisure Counseling Program Model for Mentally Impaired Adults

Working with similar clientele to those with whom Hayes (1977) initiated his model, Joswiak (1975) developed a pilot leisure counseling program designed to enable mentally impaired adults, residing in a group home, to manage their free time, to evaluate program materials and to identify methods for continuing the leisure counseling.

Twenty-six residents were involved in an eight week leisure counseling program including a total of sixteen group sessions, two per week. The first of seven steps is that of evaluating the client using the instruments as seen in Table I. These instruments were designed specifically for use with this particular model although no reliability and validity measures are mentioned in connection with this design.

The second step attempts to educate the client concerning the significance of leisure in his life. A general introduction into the concepts of play, leisure and their effects upon the client was explored in a group session of sixteen clients. The third step involves the client's sharing of attitudes toward the concepts that he has been introduced to in the second step. The fourth step enables clients to expand their leisure repertoire. The fifth step is designed to enable the client to become aware of leisure resources in the community and to develop the ability to identify and locate such resources. Step six is an evaluative phase in which post-assessments are taken on the client. This is the last step in which the individual is involved in the actual counseling program.

Step seven recommends the revision of program materials and client types in line with post-assessment input. It also formulates potential methods and leisure counseling techniques which could be applied to facilitate continued activity involvement of the clients.

The effectiveness of Hoswiak's model was demonstrated by the clients' attainment of objectives, the leisure counselors' and resident counselors' subjective assessment of the clients' participation in leisure activities, and informal observations by the leisure counselor, and staff of the clients' leisure behaviors.

A systems accountability approach was used as a means of measuring the attainment of objectives associated with leisure counseling goals. The total number of objectives during the pilot test was 22. During the leisure counseling program the client attainment of enabling objectives ranged from 0 to 11. A mean gain of 4.8 enabling objectives was attained by each subject during the program. The 4.8 gain in enabling objectives reflected in the client a greater awareness of play and leisure and of leisure resources in the residence and community.

Total number of enabling objectives attained at the time of post-testing and evaluation ranged from 6 to 17, reflecting a mean gain of 14.3 enabling objectives per client. Nearly one-half (46%) of the clients developed an awareness of leisure resources that they could borrow from others in the residence. Thirty eight percent of the clients become aware of leisure resources owned by the facility, and 31% developed the ability to borrow leisure resources from peers and the

ability to use information sources required for the identification and/or location of leisure resources (Joswiak, 1975, pp. 48-52). The leisure counselors' and resident counselors' pre- and post-subjective assessment of the clients' participation in leisure activities through six observations was not deemed to cover enough time to represent a valid measure of change in leisure behaviors. Over one-half of the clients (58%) either registered no change in participation in leisure activities or their improvement was felt not to be a result of the program (Joswiak, 1975, p. 55).

Informal observations revealed that the clients were becoming more aware of resources available to them during free time, clients seemed to be talking more about going places and there was a feeling of more activity. In summarizing his results, Joswiak indicates that a greater awareness of leisure resources was developed in clients along with a greater awareness of the meaning of plan and leisure. Overall leisure behaviors did not change although the beginning of leisure behaviors that utilized the greater awareness of leisure, play and resources was observed in isolated instances by staff.

Joswiak's methodology is inadequate as the group he studied was compared with itself on pretest and posttest assessments. As Campbell and Stanley (1963) point out, the minimum of useful scientific information requires at least one formal comparison. The point is not that the leisure counseling did or did not have an effect, but that, in the absence of any controlled comparison of the performance of the members of the residences with the performance of the members of

the same group not experiencing the leisure counseling, nothing can be said about its effect (Campbell and Stanley, 1973; Kerlinger, 1973).

McDowell's Leisure Counseling Model

McDowell's (1975) model resulted from a study of relevant techniques from counseling, values clarification and resolution, and decision-making models. As described previously and as seen in Table I, McDowell's model has met the criteria of incorporating a philosophical or theoretical construct related to the nature of man and his behavior. More specifically, McDowell has considered the nature of man in the leisure experience to provide his model's theoretical foundation. Citing Aristotle, Hobbs (1962) and Ardrey (1966) for the assumption about the nature of man's need to impose a cognitive-psychological order to his world and everyday living, McDowell bases an expectation of man in his leisure "that he will strive for a cognitive and psychological order to leisure such that his leisure experiences will be active and purposive, based upon a rationality of selection for his own good or psychological well-being" (McDowell, 1975, p. 47). This presupposes that an individual's leisure activities are based upon his perceptual beliefs, habits, attitudes, plans and values, all of which are learned.

By nature man seeks meaning and significant purpose through activities identified as work or leisure. McDowell (1975) states that man's leisure existence is frequently experienced as conflicting with his value system, individual desires versus what is experienced as

forced upon him by role determinants and self-perceived determinants.

Theoretically, McDowell's model incorporates the following basic tenets:

1. Man must perceive a motivation and freedom to want to engage in the leisure experience;
2. Man will seek leisure as a form of aesthetic participation for his well-being;
3. Man must personally assume the responsibility for ordering his waking hours around his well-being (which may or may not include a consideration for leisure or work);
4. Man seeks to understand the meaning of various life experiences, including leisure and work; and
5. Man's perception of the concepts of job, work and leisure are learned (McDowell, 1975, pp. 52-53).

The second criterion for construction of a counseling model is to use an established set of techniques for affecting the behavioral change process. McDowell believes that the individual seeking leisure counseling may be seeking a self-awareness or clarification of his "leisure self." The identification of an individual's "leisure self" may release the person from feelings of guilt, boredom, and obligation which serve as barriers to engaging in leisure experiences which allow for movement toward self-realization and self-fulfillment.

The functional design of McDowell's leisure counseling model proposes five strategies which allow the client to engage in personal self-exploration as well as leisure resource acquisition. First, the

counseling is oriented toward improving decision-making and problem solving abilities and the awareness of the individual's value of the leisure experience. This function is a performance improving strategy rather than solely as a means of increasing individual knowledge. Another function of the counseling design is to focus on a "learning how to learn" approach. The client is consistently provided with the opportunity in the counseling session or between sessions to explore feelings and thoughts about his leisure and work lifestyle (See Alternative Leisure Learning Experiences, Appendix A, p.133). Thirdly, the counseling design embodies an action-learning approach in which the client puts his thoughts into action after considering the likely consequences of the action. Self-motivation and goal orientation as a part of the counseling design allows the client to select leisure goals towards which he is highly motivated. The last function of McDowell's counseling design is that of evaluation. The client can evaluate himself in terms of how well he has accomplished his goals and the likelihood of acting upon his leisure choice again (McDowell, 1975, p. 53).

Specific counseling, values clarification and resolution techniques are embodied in the model. The counselor acts as a facilitator guiding the client's problem-solving and decision-making development. Schaefer (1971) states that the process of decision-making means to act upon a choice after deliberation and judgement. Freedom, rational and voluntary conditions must be fulfilled by the client before a decision can be made. Elaboration, exploration

and understanding of the various alternatives and consequences involved in acting upon a choice are facilitated by the counselor.

This particular model utilizes a "guided inquiry" approach, developed by Sorenson (1967), to solving a problem. The three major components are: 1) identification of goals which are desirable expectations of the counseling process; 2) identification of obstacles that deter goal achievement; and 3) the development of alternatives for overcoming the identified obstacles.

The technique of values clarification enhances the model's decision-making and problem-solving skills. Goals and desires can be values in and of themselves, ultimately becoming the objectives of counseling (Hansen et al., 1972). The process of valuing or values clarification can help a client develop skills in decision-making and add clarification to attitudes, interests and personal values. The valuing process is conceptualized in the following manner:

- Choosing -- 1) freely
 - 2) from alternatives
 - 3) after thoughtful consideration of the consequences of each behavior.
- Prizing -- 4) cherishing, being happy with the choice
 - 5) willing to affirm the choice publicly
- Acting -- 6) doing something with the choice
 - 7) repeatedly, in the same pattern of life (Raths et al., p. 30, 1966).

This process may concretely engage the client in self-exploration through the use of open-ended and thought provoking statements related to self, leisure and work (See Appendix A, p.133). Experiencing the process of valuing with the aid of the alternative sheet, time wheel, and getting started sheet also aids the client in leisure self-exploration.

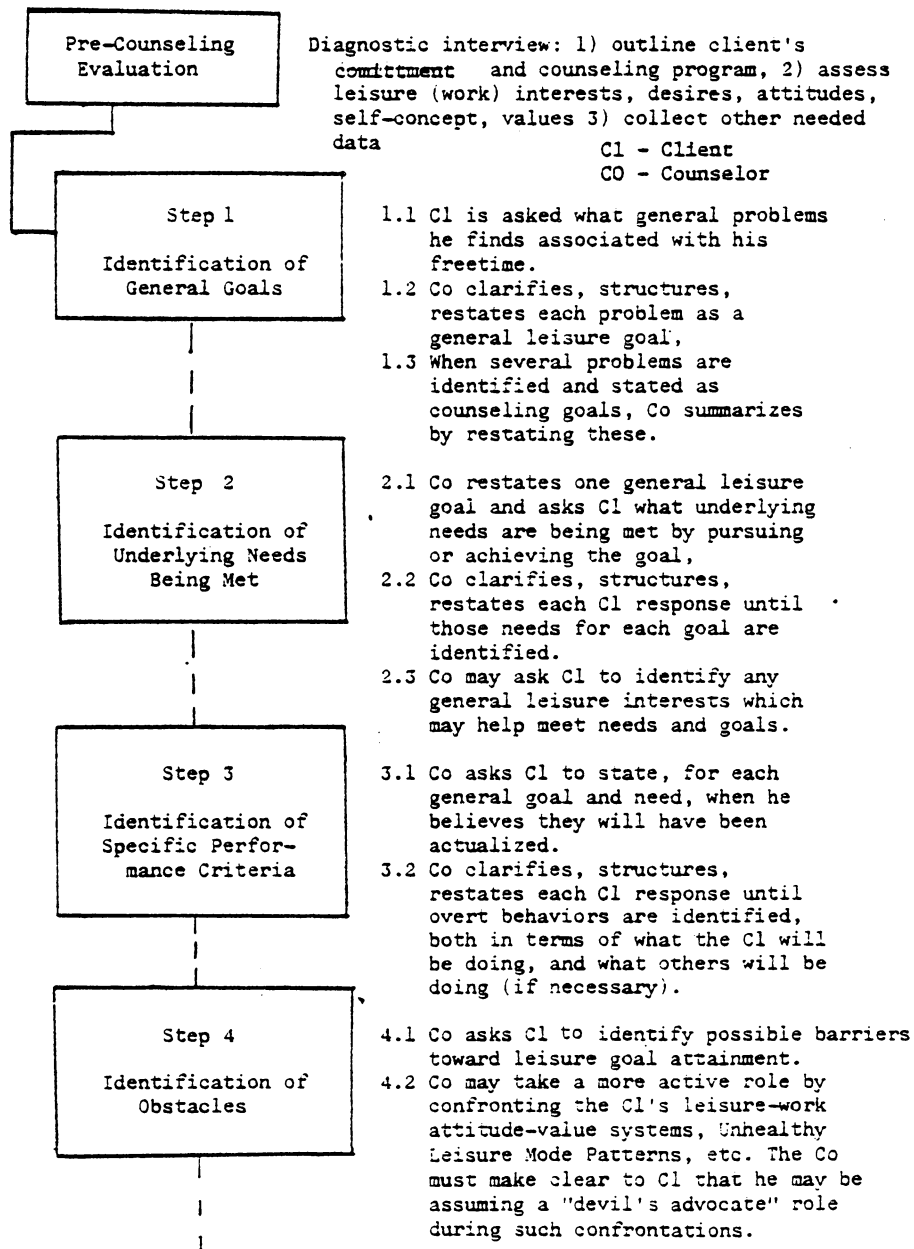
As the client's values are clarified, he may find that his decision for leisure involvement may entail a conflict of values. A client with high blood pressure may face a value conflict between his attitudes toward work and productivity and finding the time to enjoy leisure. Thomas (1970) has identified six processes for dealing with value conflict and clarification. They entail the following:

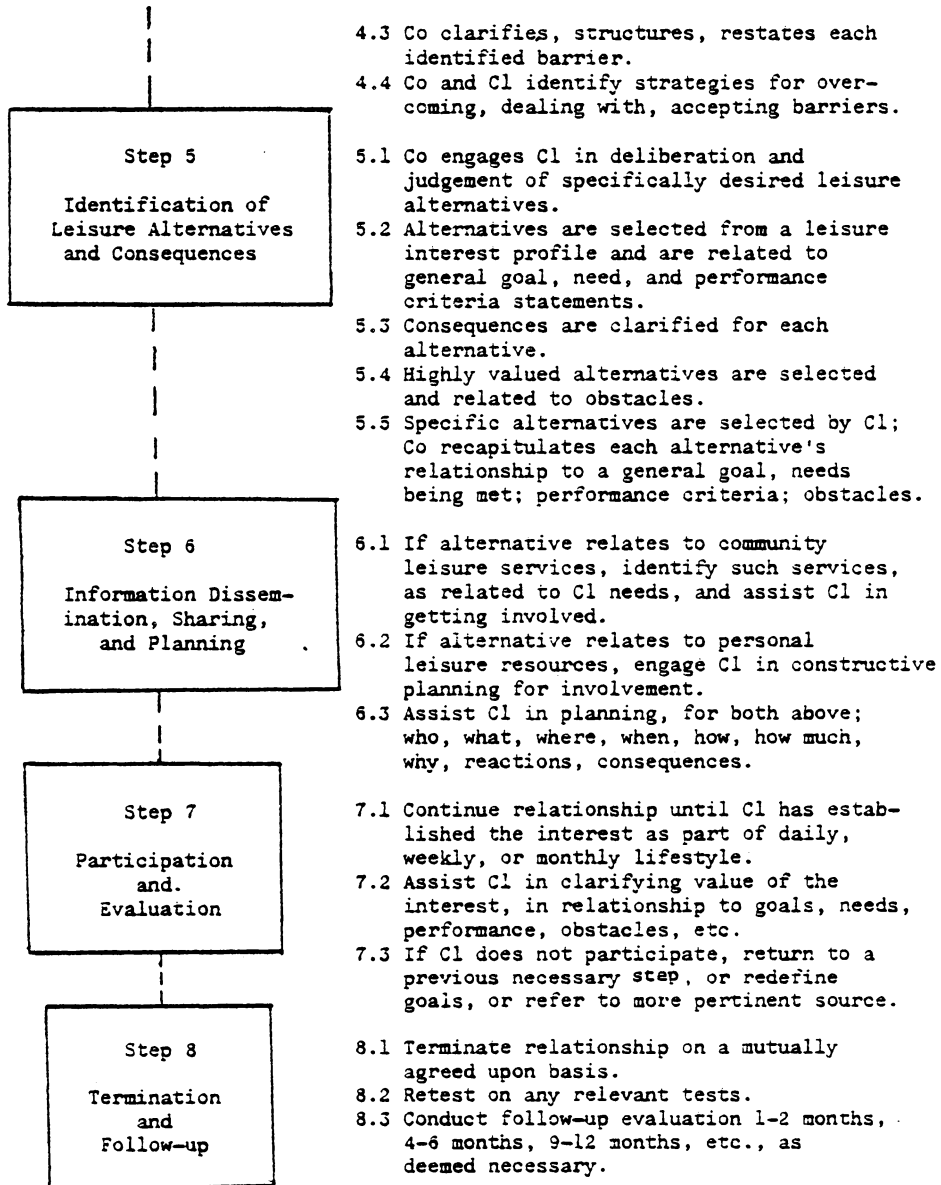
- 1) identification of the value conflict(s);
- 2) identification of value judgements that the person and a portion of the population in society may make about the conflict;
- 3) comparing and contrasting the various value alternative judgements;
- 4) ranking the various alternatives;
- 5) selecting the most acceptable alternative; and
- 6) living the choice.

From these theoretical and counseling concerns a tentative leisure counseling model was developed and tested which resulted in a suggested model as seen in Table II. The dotted lines between the sequential steps indicate that the process is flexible in that the steps can be combined, deleted or returned to. McDowell, like Hayes (1977), developed his model with a broader perspective in mind, proposing integration of the previously cited four leisure counseling orientations as well as incorporating any number of approaches within several interrelated phases. In review, the four leisure counseling orientations have been identified as: 1) leisure related behavioral problems; 2) leisure life-style awareness; 3) leisure resource guidance; and 4) leisure-related skill development.

Prior to step one an evaluative interview is conducted in which assessment of the client's work, leisure interests, attitudes,

TABLE II
McDOWELL'S
A SUGGESTED LEISURE COUNSELING PROCESS





Note: The use of "Alternative Leisure Learning Experiences" are incorporated into the model at any of the steps. These experiences provide exploration between interview sessions of leisure-work attitudes, values, ideas, interests, lifestyle, and so forth. A part of each interview is used to process these experiences (McDowell 1975, pp. 108-109).

values, and self-concepts are collected. Step one, as seen in Table II, was designed to assist the client in clarifying his general leisure goals as they relate to problems of leisure actualization. These problems are then stated as counseling goals, and Step two attempts to discover the underlying needs that are being met by pursuing the general leisure goals. The client may, through analyzing his leisure interest profile, identify activities that meet the underlying needs. Examples of underlying needs may be to become more physically fit or better able to do activities after a physical disability defines parameters for the client. The underlying needs and concomitant reasons why a general goal is desired on the part of a client are also identified. In step three specific performance criteria are identified which enable the client to actualize his general goals and specific behavioral goals in an observable situation. Similar to Burk's (1975) community-based model, performance criteria relate to the client's overt behavior in the real world, including the frequency and duration of such behavior. Performance criteria also consider what others would be doing if the client's goals were attained. An attempt is made to have the client explore his leisure self in relation to significant others. In order to identify this type of information in current, study, a set of questions as seen in Appendix B, p. was used. "The first three steps of the model attempt to define the motivation for pursuing a course of leisure action, and especially the outcome criteria for succeeding in that motivation" (McDowell, 1975, p. 144).

Step four of McDowell's model identifies, analyzes and develops strategies for overcoming obstacles or barriers to the client's leisure involvement. A client, motivated to assume personal responsibility for leisure, may lack confidence in himself and therefore feel that either he or the community lacks the various resources needed to attain his leisure goals. The client's faulty perceptions of his personal resources are seen as an obstacle until the client confronts them and strategies are developed to overcome mobility, money, accessibility, and ability, among other barriers.

As the counseling process continues, the client may have become aware of the many alternatives available to him. Subsequent assistance in identifying alternative leisure experiences through deliberation and judgment of the client's interests which have a potentially high value are clarified and related to any obstacles (step five). Consequences for the alternatives are explored, and the client is free to choose his own alternatives. At this point McDowell (1975) discusses wise leisure choices. A wise leisure choice is determined by how the client anticipated the consequences of his decision toward others and himself. An accurate prediction of a desired consequence results from a wise leisure choice.

Step six is the resource referral guidance component of the model. The matching of the client's alternatives with community leisure services may entail the counselor giving the client a list of people to contact within the community who have the potential to actualize the client's choices. This is not to say that every client will need such personalized referrals.

In this step clients may also be assisted in planning the actual involvement in a leisure experience. If the initial plan fails, a backup plan is formulated. McDowell suggests that clients who are uncertain and indecisive may be helped in developing a plan by writing down specifically what, where, when, how and why they will actualize their alternatives.

In step seven, if the client does not follow through with his specific behavioral goals, it may be necessary to return to a previous step in the model. The counseling relationship is continued until the client has established his interest as a part of his lifestyle. Reviewing previously clarified goals, needs, and performance criteria in this step may help the client integrate the interest into his lifestyle.

Termination (step eight) occurs on a mutually agreed upon basis when the relationship no longer serves the client's interests. To determine the effectiveness of leisure counseling, follow-up evaluations on a monthly basis can be conducted after termination occurs.

To test the effectiveness of the tentative leisure counseling model, middle-to-latter aged female clients with leisure related difficulties were referred through outpatient services of a community mental health center to a leisure counselor. Typically the clients were seeking mental health services because of depression.

An experimental design, utilizing the Solomon Four-Group Design (1947), was conducted with 10 subjects assigned to each group. The effects of leisure counseling using McDowell's model on leisure

attitudes, leisure self-concept, work attitudes, work self-concept and leisure satisfaction between counseled and non-counseled clients were investigated. The investigation revealed significant differences in leisure attitudes, leisure self-concept, work self-concept and leisure satisfaction between experimental and control groups. Since statistically no difference was found in leisure satisfaction over a one to two month post-counseling follow-up period, McDowell (1975) states that "the effect of leisure counseling does encourage maintenance of satisfaction with leisure" (p. 90). The counseled group showed a slightly more positive work attitude (though not significant) than the non-counseled group.

Based upon these results McDowell concluded:

1. A leisure counseling and lifestyle development model can incorporate all four orientations to leisure counseling.

2. For the sample studied, leisure counseling can be inferred to positively affect leisure attitudes, leisure self-concept, and work self-concept. Work attitudes may be affected to be a lesser degree.

3. Leisure counseled clients had a concept of being obligated in leisure as well as work.

4. Leisure attitudes representing "value of leisure" appear to be more positively affected than actual "quality of leisure involvement." Leisure experiences that are consistently repeated gain increased valence as a valued aspect of a person's lifestyle.

5. Leisure self-concepts which represent a "state of mind" of a problematic nature (anxiety, depression, guilt) can be affected by leisure counseling.

6. For the sample studied, high leisure satisfaction is gained from the experience of being relaxed, exerting constructive effort, and a perceived sense of freedom (McDowell, 1975, p. 129).

McDowell's leisure counseling model and his extensive research utilizing the model represents the major effort to document the effects of leisure counseling in the therapeutic recreation profession to date.

Leisure Activities and Cardiac Rehabilitation/Intervention Programs

In reviewing the subject of recreation and leisure in cardiac rehabilitation and intervention programs, the limited literature mentions three distinct areas: (1) recreation personnel as part of the treatment team; (2) the need for recreational and leisure activities; and (3) the inclusion of a leisure activity history on clients' records who are being screened for coronary risk factors and programs.

In discussing the composition of cardiac rehabilitation terms, Landry & Palko (1972) and Fox (1978) include recreational therapists and recreation personnel. Fox (1978) suggests that recreational therapists can help relieve depression and be instrumental in fostering the individual's leisure lifestyle. Landry and Palko (1972) state that there exists a need for better coordination of preventive and rehabilitative services to integrate other "helping services" including

recreational specialists, and to promote and maintain health and fitness.

Oldridge (1977) suggests that a good exercise leader may be a recreation specialist. It is evident that the role of the recreation specialist as a member of the cardiac rehabilitation/intervention team is unclear, but as their recent mention in the literature becomes a reality on cardiac treatment teams, their role function may be clarified.

Goals of cardiac rehabilitation/intervention programs broadly state that they aim to educate to reduce risk factors, improve the quality of life for the surviving heart attack client, and educate or re-educate clients to become more confident and competent in achieving a healthy and constructive lifestyle (American Heart Association 1978; Kavanagh 1972). Dr. Hellerstein (1978) has identified four unmet needs and limitations of current cardiac rehabilitation/intervention methods that relate directly to the previously mentioned goals: 1) the need to provide proof of effect--how much exercise is necessary; 2) the limitation of a preoccupation with physical training; 3) the lack of integration into a comprehensive care system; and 4) the neglect of social and vocational adjustment of the client.

Some programs suggest the need for education in enjoyable activities (Stoedefalke, 1978) and that "good" exercise programs contain the attributes spelled out in the word "variation." "V - variety, A - aerobic, R - relaxing and recreative, I - individualized, A - attitude, T - therapeutic, I - isotonic, O - objective testing, N - noncompetitive and fun" (Oldridge, 1977, p. 86). A variety of activities are

essential as they increase the likelihood that the activity will be carried over to family involvements, vacation time and to individual activities during business trips. Oldridge (1977) also suggests that the individual may join some other recreational groups in the community under his own initiative because of the stimulating variety of activities to which he has been exposed. "Recreative type activities should be stressed, as these can be pursued with the family and other groups during leisure hours" (p. 87). Activities of a recreational nature should be based on the individual's needs and interests, but no mention is made of how and who may assess the client's leisure interests. Although they state the need for recreational and leisure activities, both Oldridge (1977) and Stoedefalke (1978) fail to mention how to implement these individualized activities in the client's total lifestyle.

Clients' attitudes toward the value of activity may be lacking and "the leader's function is educative in that he should help the client change his lifestyle in constructive ways. Education of the client as to his choice of activities and the therapeutic value of the activity is always important especially when he does so without supervision" (Oldridge, 1977, p. 87).

Dr. Meyer (1975) suggests that coronary prevention centers should foster the client's development of "new expressions in the use of leisure time and greater self-understanding" (p. 266). If total rehabilitation/intervention programs are to provide comprehensive services to their clients, these needs must be met on a systematic basis.

Although referral information may include a section on the client's activity status in an attempt to assess the past and present recreational activity, it is not systematically collected or used to enhance the client's lifestyle (Wilson, 1975). A history of the client's leisure activities should not only be used as a basis for individual exercise prescriptions but to help the clients change their lifestyles in constructive ways. Using increased leisure time in passive activities rather than active ones contributes to an increasingly unhealthy lifestyle which can be changed through patient education and counseling (Lalonde, 1972; World Health Association, 1973).

Psychosocial Characteristics of Cardiac Clients

In a search for contributing causes correlated to coronary disease, a sizeable body of empirical research discussing psychological and social risk factors has been identified. Some reviews of this literature (Keith, 1966; Mordkoff and Parsons, 1968) have concluded that there is little clear evidence connecting psychological factors with coronary heart disease. Other research (Syme, 1968) suggests that the evidence for behavioral (both psychological and social) variables are stronger than the support for the role of diet in coronary risk. Retrospective research dealing with life changes as antecedents of coronary disease indicates marked elevations in the magnitude of total life changes during the 6 months prior to infarction and sudden death (Rahe and Lind, 1971; Rahe, Romo, Bennett and Siltanen, 1974).

Research has been conducted showing that stressful events provoke physiological and biochemical functionings that are present in

coronary compared to noncoronary subjects. During stress, increased heart rate, blood pressure and blood cholesterol levels among others have been measured (Friedman, 1969; Glass and Singer, 1972; Williams, 1975).

Coronary-Prone Behavior Patterns

The notion of "coronary prone behavior patterns" has been discussed by cardiologists and researchers from the nineteenth century to modern times. Deep involvement in work or, as House (1975) implies, "work overload," difficulty in relaxing, aggressive striving for achievement and the need to maintain a rapid pace of life's activities are components of the Type A behavior pattern designated as risk factors for coronary disease (Dreyfuss, Shanahan and Sharn, 1966; Liljefors and Rahe, 1970; Theorell and Rahe, 1972). A further distinction of a coronary-prone client is suggested by Wolf (1969) in his description of someone who "strives without joy" and exhibits lack of fulfillment and satisfaction in his lifestyle. The pattern is described as "a characteristic action--emotion complex which is exhibited by those individuals who are engaged in a relatively chronic struggle to obtain an unlimited number of poorly defined things from their environment in the shortest period of time and if necessary, against the opposing effects of other things or persons in this same environment" (Friedman, 1969, p. 84). Individuals who exhibit this behavior to a greater degree are called Type A's as opposed to Type B's, who manifest serenity, a pattern of relaxation and no time urgency. Indicators of Pattern A include few sources of gratification other than

the job and a compulsive attraction to competition (Friedman and Rosenman, 1974).

Several techniques have been developed in an attempt to measure the coronary-prone behavior pattern; they include: Standardized Stress Interview; Jenkins Activity Survey for Health Prediction (JAS), and Adult and Student JAS.

In the development of Type A behavior, little is known on the psychosocial conditions in an individual's life history that may lead to the emergence of these patterns of behavior. Despite the results discussed in this section, the task of establishing a relationship between coronary disease and personality is extremely difficult. The inherent research limitations of personality constructs and measurements hinder such investigations (Glass, 1977).

Lowering the Risk Factors

Coronary heart diseases are in part attributed to the seemingly pathogenic lifestyle many individuals adopt (Fox, 1972; Glass, 1977; Hockbaum, 1977; Lalonde, 1972; Silze, 1972). In a discussion of lifestyles and attitudes regarding an individual's behavior, several factors became apparent: (1) a person's lifestyle consists of a value system, attitudes, and ideas which in some way affect behavior, (2) the degree to which values are emphasized by a social system may influence an individual's susceptibility of the value, and (3) lifestyles or behavior patterns once learned can be changed through value clarification techniques (Desharmais, 1972; Eason, 1972; McDowell, 1975; Wilde, 1972). Other risk factors previously mentioned can be reduced

through diet, exercise and education. It is obviously more desirable to do something about valid risk factors than to wait for disease to develop.

Two comprehensive review collations of empirical research concerned with psychosocial variables provide a complete summary of these variables (Jenkins, 1971, 1976). Therefore little effort will be made here to review all the material on psychosocial risk factors.

Three general classes of psychological stresses have been studied in connection with a client's coronary disease: (1) dissatisfaction with various aspects of life; (2) chronic or relatively long-term life events experienced by the individual as stressful; (3) acute life events, defined by the individual and culture as stressful (Glass, 1977).

Job dissatisfaction, difficulties, pressures and working over time have been reported more frequently among coronary clients (both post-myocardial and the coronary prone) than among matched controls (Bruhn, McGrady and dePlessis, 1969; Theorell and Rahe, 1972; Sales and House, 1971; Wolf, 1969). Wolf (1969) also suggests that an inability to derive fulfillment and satisfaction from leisure activities may contribute to cardiac stress.

The chronic stress of excessive work and the client's feeling that the demands of his work are beyond his control have been factors credited with precipitating the development of coronary disease (House, 1975; Jenkins, 1971; 1976; Sales, 1969; Smith, 1967).

Stressful life events, death, sudden loss of self-esteem, and retirement, among others, have been classified as acute stress in

the client's immediate and past environment. Holmes and Rahe (1967) have developed an objective instrument for measuring a variety of stressful events.

Life change events are assigned values on a scale. The highest value of 100 is equated with "death of a spouse," while the lowest value (11) is assigned to "minor violations of the law." The event of "retirement" is assigned the value of 45; "revision of personal habits" value 24 while "change in recreation" is equated with a value of 19. "Change in social activities" has a value of 18, and "vacation" a value of 13. "Change in recreation" is 19 life change units. Holmes' actual procedures include adding the total score in life change units for a time interval under consideration to ascertain a certain degree of change.

Processes used in an attempt to enhance prudent living habits are unfortunately hard to measure (Hockbaum, 1977; Fox, 1972). The rehabilitative and preventive efficiency cannot guarantee protection from a subsequent heart attack or coronary disease. If "health" and "freedom from disease" become ultimate motivating goals, then a whole range of desirable habits becomes a unified means of achieving them. The role any education for widespread behavior changes plays in lowering the risk factors of heart disease should be urged not only because of its preventive value but because of its role in the satisfaction of people's individual needs and desires (Hockbaum, 1977).

In shifting away from the clinical setting, Hockbaum (1977) states that "where people fight the battle for success in acquiring

habits to protect themselves against disease is where they live, work and in leisure" (p. 105). The key to success is a broadening of our efforts of intervention and rehabilitation into these personal areas of life on a systematic basis. Relating to a client's attitudes and values within the radius of an individual's personal and private setting has been suggested as a unified means to lowering coronary risk factors (Hochbaum, 1977; Fox, 1972). "The time is here to identify recreation as an instrument of preventive medicine" (Lalonde, 1972, p. 95). If recreational services including leisure counseling can contribute to lowering the risk factors by increased satisfaction in leisure, more positive work and leisure attitudes, its value as an instrument of preventive medicine will be increased. The limited empirically based research that identifies the efficacy of recreational and leisure experiences as a means of changing attitudes (leisure and work) in coronary prone clients is to date inadequate.

Physical activity programs, such as many of the nation's cardiac rehabilitation and intervention programs, have been found to reflect feelings of "improved health" and "greater stamina," and, of particular interest, to stimulate a reassessment of lifestyle and to provide a more "Positive Attitude Toward Work" (Fox, 1972).

One research study has been identified that supports the hypothesis that stress, one of the risks involved in heart disease, is relieved to a significantly greater extent by perceived recreation experience than by non-recreative experience for five of six physiological variables--skin resistance, heart rate, upper back tension,

number of respiration cycles, and depth of respiration. Measurable physiological differences occur between tension relieving treatment perceived as recreative experience (listening to rock music; listening to classical music, reading poetry; reading a professional psychology journal; viewing a television show; and, viewing a televised ice-hockey game) and tension inducing treatment (a mental arithmetic problem deliberately designed to be frustrating) (Heywood, 1978).

SUMMARY

Many leisure counseling models exist which incorporate learning experiences that should promote exploration of attitudes, values, ideas, lifestyle as related to leisure and work. McDowell's (1975) model has demonstrated its efficacy within a mental health population but needs to be proven effective among other segments of society before it can be considered reliable. The relationship between leisure experiences and the cardiac rehabilitation/intervention process has become a concern of medical and health professions in order to provide more comprehensive services. Limited studies have been conducted in which cardiac clients are given the opportunity to explore leisure attitudes, work attitudes, leisure and work self-concepts, and leisure satisfaction. Dissatisfaction in these areas has been identified as a possible correlate with stress, a coronary risk factor. Understanding how leisure and work values and attitudes integrate within one's lifestyle is generally seen as a valuable contribution in cardiac rehabilitation/intervention programs. The implementation of a process with the

potential to change attitudes of work and leisure and leisure satisfaction with cardiac clients has not been explored. In a short term study of the effects of leisure counseling using McDowell's Model (1975) on work attitudes, work self-concept, leisure attitudes, leisure self-concept and leisure satisfaction between a counseled and non-counseled cardiac client can provide external validity to the model and a possible addition to comprehensive cardiac care.

Chapter 3

METHODOLOGY

This study is designed to compare the effects of McDowell's Leisure Counseling Model (1975) on five dependent variables between a counseled cardiac intervention client and a non-counseled cardiac intervention client. With the use of the accompanying instruments to McDowell's model, the five dependent variables as affected by leisure counseling will be evaluated. This chapter is divided into three sections: the selection of subjects and procedures, selection of instruments, and selection of research design and statistical treatment.

Selection of Subjects and Procedures

The population will consist of all individuals participating in the Wake Forest University Intervention/Adult Fitness Program at Winston-Salem, North Carolina (approximate number N=59, including one woman and 58 men). From this population, volunteer subjects (N=26) were recruited for the study through a general explanation of a leisure counseling-lifestyle development program and its fitness program at Wake Forest University. Using a table of random numbers half the subjects (N=13) were assigned to either one of two groups, after which experimental status was randomly assigned to one group. The leisure counseling program was offered as a part of the Patient Education

Component of the Cardiac Rehabilitation/Intervention Program. Criteria for inclusion in the experimental and control group are (1) participation in the Wake Forest University Intervention/Adult Fitness Program and (2) expressed interest in the study as being beneficial to them.

An explanation of the leisure counseling program is seen in Appendix C, p.172, written by the researcher and the director of the Wake Forest University Rehabilitation/Intervention Program in Wake Forest University stationary, was sent to all possible subjects (N=59). Care was taken that the estimated day the mailed cover letter would be a Wednesday. Manley (1970) states that Monday appears to be the worst day for the arrival of cover letters or questionnaires because of busy schedules at the beginning of the week. Using this reasoning, all instruments, follow-up letters and telephone calls were received on Wednesday. The estimated mailing time between Blacksburg, Virginia, and the greater Winston-Salem area was two days. This estimate was arrived at by the researcher's frequent mail correspondence with the Wake Forest University Adult Fitness staff.

A file of interested subjects who telephoned was kept by the director of the Wake Forest University Adult Fitness Program. The 26 subjects who expressed an interest in the project were then randomly assigned to either the experimental or control group by use of a table of random numbers. Each subject received a telephone call. The experimental subjects (N=13) were given an appointment for a pre-counseling evaluation during which individuals were given pretest measures and a Consent Form of Participation as required by the Virginia

Polytechnic Institute and State University Human Subjects Committee (See Appendix D, p.178). The control group was approached from the standpoint that a possible leisure counseling program may be developed at Wake Forest University as a result of this dissertation study and that if they felt such a program would benefit them, they would perhaps be contacted at a later date to see if they were still interested. They were told that a cover letter (See Appendix C, p.172) with five instruments was being sent to them and it would be greatly appreciated if they would fill them out and return them in the pre-stamped envelope. Manly (1970) states that the use of an ordinary stamp enhances greater returns than a prepaid stamp, the reasoning being that people are less likely to throw away a regular stamp but feel that prepaid stamps will not cost anything if used. All pre-stamped envelopes used in this research project utilized regular stamps. Both experimental and control groups were administered the posttest instruments ten weeks after the initial interview.

The control group cover letter for the posttest measures is included in Appendix C, p.172, along with the letter accompanying a one month follow-up measure on the Leisure Satisfaction Questionnaire for both the experimental and control groups. To enhance control group posttest returns, a second letter was sent requesting cooperation in returning the questionnaire.

Demographic data were obtained for all experimental and control subjects (N=24). Specific demographic data were obtained for age, sex, education, marital status, employment and income. These data are reported as seen in Tables XVII-XXII, pgs. 99-103.

Leisure counseling took place on Thursdays and Fridays in the Wake Forest University Terry Dodson Memorial Library. The library was reserved for the researcher from 8:00 a.m. through 9:00 p.m. Thursdays and Fridays. All subjects were given standing weekly appointments at their convenience on Thursdays and Fridays.

For purposes of counselor evaluation and further insight into the actual implementation of the leisure counseling process, clients' permission was sought for taping counseling sessions (See Appendix D, p.178). It was explained to the clients that the tapes would be destroyed after the study and all transcripts would be edited and the individual's name would be replaced with the term "client."

Selection of Instrumentation

This section describes the instruments that were selected or modified from existing ones. They were selected and designed to accompany McDowell's Leisure Counseling model and were deemed necessary here to measure the dependent variables.

Leisure Interests

Self Leisure Interest Profile, (SLIP), form four, (McDowell, 1973) was used to assess leisure interests. The profile has been

adapted from the Avocational Activities Inventory (Overs, 1970) and consists of 471 items, seven separate areas, and their sub-areas of specific activities. Games, Sports, Nature, Collection, Art and Music, Crafts, Education, Cultural and Entertainment are the broad leisure areas. The individual is asked to identify his present and desired leisure activities either as "much," "some" or "none." In all seven broad leisure areas the individual is asked to rank the ten most important present and desired activities. These relative value rankings are then entered into a profile. In McDowell's Model (1975) the information dissemination step in counseling (Step 6, Table 2, p. 50) can be focused on the client's present and/or desired profile. The instrument is used in the pre-counseling diagnostic process comprehensively to assess the client's leisure interests (McDowell, 1975). "For non-counseled subjects, test-retest reliabilities above .90 have been obtained for both present and desired rankings" (McDowell, 1975, p. 67). A complete copy of SLIP is located in Appendix B, p. 146.

Leisure-Work Attitudes

The instrument that McDowell (1975) developed to measure Leisure and Work Attitudes was adapted from the Leisure and Work part of Neulinger's (1974) questionnaire, "A Study of Leisure." The instrument utilizes the semantic differential method of measuring the psychological meaning of concepts (Osgood, et al., 1957). The scale consists of 16 adjective pairs across a seven-point scale. McDowell (1975) substituted three adjective pairs of words thus adapting Neulinger's original instrument. Leisure Attitude and Work Attitude instruments contain the same sixteen adjective pairs as used by McDowell.

The individual is asked to circle the one point on a seven point scale for each adjective word pair. A scale value of one represents an extremely negative attitude toward a word, while a seven represents an extremely positive attitude toward a word. A scale value of four represents a neutral attitude. Positive attitudes are assumed to be the expected outcome of counseling for a cardiac intervention sample which may have previously held neutral or negative attitudes toward work and leisure.

"For persons who were believed to hold positive attitudes (scale values 5, 6, 7) toward their present leisure and work involvement, test-retest reliability over a four-week period showed reliability for Leisure Attitudes to be .87, with a mean scale value of 6.06. For Work Attitude, a reliability coefficient of .90 was found, with a mean scale value of 6.17. The pilot test sample was composed of 14 women, and 11 men enrolled in an introductory recreation class at the University of Utah" (McDowell, 1975, p. 68). Validity is recognized as face validity only. Copies of both Leisure Attitude and Work Attitude Surveys are located in Appendix B, p. 146.

Leisure-Work Self-Concepts

McDowell (1975) developed an instrument to measure Leisure Self-Concept and Work Self-Concept. Each instrument contains 34 items which are "I am . . ." statements reflecting 17 positive and 17 negative self-descriptions (see Appendix B, p.146). The individual is asked to check a column which accurately applies to him ranging from "most of the time" to "practically never." A highly positive self-description

receives a score of five, and a very negative self-description receives a score of one, with a neutral self-concept scoring three.

A panel of three judges (a recreation therapist, psychologist, and social worker) judged the self-description items to be representative of possible leisure-work self-concepts. This acknowledges face validity only. The same pilot test sample used for Leisure-Work Attitudes was used over a four-week test-retest period to test the reliability of the instrument. The sample included 14 women and 11 men enrolled in an introductory recreation class at The University of Utah. A reliability coefficient for Leisure Self-Concept was found to .86, with a scale point mean value of 4.17. This mean rating reflects an "often" positive leisure self-concept. A reliability coefficient for Work Self-Concept was found to be .99, with a scale point mean value of 4.24, reflecting an "often" positive work self-concept (McDowell, 1975, p. 69).

Leisure Satisfaction

The "Leisure Satisfaction Questionnaire" was adapted extensively from the "Milwaukee Vocational Satisfaction Questionnaire" (Overs, et al., 1974) which stemmed from the adaptation of the Minnesota Job Satisfaction Questionnaire (Weiss, et al., 1967).

Individuals are asked to respond to 26 statements that best describe how they feel about their present leisure experiences ranging from "not satisfied" to "extremely satisfied." On the five-choice scale, "not satisfied" receives a score of one and "extremely satisfied" receives a score of five. Research of Overs (1974) and Weiss, et al.,

(1967), utilizing their particular instruments, has shown a normal distribution to occur, with the mean around a scale value of three (satisfied) on this five-choice scale. More recent research by Overs (1976) has found that of 216 individuals in nine Golden Age Clubs, the mean scores of all the clubs exceeded the mean score of 35 clients in the same age range who sought avocational counseling. Overs suggests that those seeking counseling did so because they were not satisfied with their avocational activities. No reliability measurements were obtained for the instrument prior to McDowell's study. "It is assumed that validity is only that of face validity" (McDowell, 1975, p. 69). The questionnaire is located in Appendix B, p. 146.

Most of the questions contained in the instrument of leisure-work attitudes and leisure-work self-concept are regarded as positive, higher values indicate more positive self-concepts. Some of the work pairs and concepts were reversed in the instruments to prevent the respondent from circling or checking the same number or column without really responding to its meaning. The following questions were recoded for the statistical analysis: leisure-work attitudes surveys 1, 2, 3, 4 to 1=7, 2=6, 3=5, 4=4, 5=3, 6=2, 7=1; leisure-work self-concept surveys 4, 5, 7, 10, 11, 13, 14, 17, 21, 22, 25, 26 through 30, 33 to 5=1, 4=2, 3=3, 2=4, 1=5.

The third step in McDowell's model, identification of specific performance criteria, attempts to have the client view himself in relation to significant others. To help in meeting the client's goals, his relation to significant others and the support/non-support they

may give him are important. To further this understanding the following open questions were designed by the researcher:

1. Does your family support your decision to participate in the Adult Fitness Program?
2. Specifically, in what ways do they support you?
3. Who is most supportive within your family or living situation?
4. What leisure activities does your whole family engage in?

These questions were asked by the counselor at appropriate points during the counseling process. For individuals who were single, divorced or separated, the word "family" was replaced by "friend."

Selection of Research Design and Statistical Treatment

A Pretest-Posttest Control Group Design as identified by Campbell and Stanley (1963) has been selected for the study (see Table III, p. 76). This design indicates that the two groups have been formed through randomization procedures. In this case, a table of random numbers will be used to assign half of the subjects (N=13) to one group and the other half to the second group. Since the initial equivalence of the two groups was assumed to be maximized through the use of randomization, it was believed that strong inferences regarding the merits of the treatment could be possible. The pre-test-posttest design also controls for most of the threats to internal validity (history, motivation testing and instrumentation) with the exception of mortality. Mortality was reported in a general descriptive sense only. Two subjects dropped

TABLE III

Pretest-Posttest Control Group Design

1.	R	O	X	O	(Pre-Posttest Experimental Group)
2.	R	O		O	(Pre-Posttest Control Group)

Note: R represents the randomization of both the experimental and control groups. O represents a pretest or posttest. An X represents the experimental treatment. The horizontal line separating the two groups indicate that the experimental and control group do have pre-experimental sampling equivalence. The names of each group are in parentheses next to each other.

out of the study. The only woman in the study from the experimental group was taking a three week cruise with her husband and did not want to continue in leisure counseling. This particular mortality occurred during the second week of the six to ten week program. A second subject from the control group sent back his cover letter and instruments with a note saying he did not want to be a part of the study. No other explanation was given. Since this mortality occurred during initial weeks of the leisure counseling and appears to be random between the experimental and control group, these subjects were treated as if they had never been selected to their respective groups. The initial mortality changed the number of subjects assigned to each group to 12. It was hoped that more subjects could be involved in this study; however, 12 indicated a commitment to the leisure counseling process. Descriptive statistics would make possible the description and summarization of the observations about the study. Inferential statistics were to be used to generalize the findings to the larger population of cardiac intervention/adult fitness clients.

The analysis of covariance will attempt to "equalize" the intact experimental and control groups on each of the five dependent variables by adjusting for the initial differences on the variables pretest measures. The adjustment for the covariate (pretest) will reportedly add to a reduction in the error term and provide a sensitive analysis. The analysis uses the subjects' pretest scores to predict their posttest scores on the basis of the regression of their pretest scores on the posttest scores. If Y_{ij} is the actual

pretest score of individual i in group j , then Y'_{ij} is his predicted score. $Y_{ij} - Y'_{ij}$ is the residual. Calculating the residuals for all subjects, one arrives at a set of scores (residuals) which have zero correlations with the pretest scores. An F-test for significance between the residuals of the experimental (counseled) and control (non-counseled) will indicate whether the groups differ significantly after their scores have been adjusted for possible differences on each of five pretested dependent variables (Kerlinger and Pedhazur, 1973, p. 267).

A specific computer program analysis identified as GLM (General Linear Model) Analysis of covariance, from SAS (Statistical Analysis System (Barr, et al., 1976)) was used to analyze the data. Probability level for rejection or acceptance of the five hypotheses was selected at the .05 level of confidence. If any foccured with a probability less than .05 it was reported. A check for the homogeneity of regression between the experimental and control groups was also made using the SAS test for equality of slopes. The process of adjustment for the covariance (Pretest scores) involves the assumption of homogeneity of regression. Simply stated the test for homogeneity of regression checks to see if the slopes of the regression lines for the experimental and control group are parallel. Equality of slopes means that the initial leisure/work attitudes, leisure and work self-concepts and leisure satisfaction are similar in their regression towards the mean. If a single regression level

fits the data for both groups, there is really no difference between them. Homogeneity of regression is a necessary research assumption that must be met before any interpretation of the analysis of covariance can be made. The probability level for failing to reject the null hypotheses was selected at the .01 level of confidence. Missing values or responses were treated as zero in the statistical analysis, since .1% of the total values were missing, this was considered insignificant.

Chapter 4

RESULTS

This chapter is a report of the data and data analysis used to test each hypothesis presented in Chapter 1. It begins with an analysis of the pretest measures for the five dependent variables in a test for the homogeneity of regression. The level of confidence is set at .01. A one-way analysis of covariance is used to analyze the differences between the counseled and non-counseled groups when the assumption of homogeneity of regression is tenable.

Demographic data for counseled and non-counseled group and the counseled group's responses to four open-ended questions, designed for further understanding of the clients' family support, are also reported.

The total length of weeks that each client spent in leisure counseling and the average amount of time each weekly session took is reported within this chapter.

Test For Homogeneity of Regression

In the test for homogeneity of regression it was expected that the researcher would fail to reject the null hypotheses at the .01 level of significance. All dependent variables with the exception of Work Self-Concept were non-significant at the .01 level; thus

allowing the researcher to fail to reject the null hypotheses. For the variable of Work Self-Concept the null hypothesis was rejected, thus indicating that the assumption that the regression lines were parallel for the experimental and control groups on this variable was not tenable. It was concluded that there was an interaction between the covariate and the dependent variable, thus, an analysis of covariance could not be preformed. For Leisure Satisfaction, the test for homogeneity of regression as seen in Table IV is non-significant ($F .01, df=1,20$); therefore, the researcher failed to reject the null hypothesis. This indicated that the assumption of parallel regression lines was tenable, permitting the use of the analysis of covariance. For Work Attitudes, the test for homogeneity of regression as seen in Table V is non-significant ($F .01, df=1,20$); therefore, the researcher failed to reject the null hypothesis. This indicated that the assumption of parallel regression lines was tenable, permitting the use of the analysis of covariance. For Leisure Attitudes, the test for homogeneity of regression as seen in Table VI is non-significant ($F .01, df=1,20$); therefore, the researcher failed to reject the null hypothesis. This indicated that the assumption of parallel regression lines were tenable, permitting the use of the analysis of covariance. For Work Self-Concept the test for homogeneity of regression as seen in Table VII is significant ($F .01, df=1,20$); therefore, the null hypothesis is rejected. The assumption that the regression lines were parallel for the experimental and control

Table IV

Leisure Satisfaction Questionnaire
Test for Homogeneity of Regression

Source of Variance	df	SS	F	PR 7 F
Leisure Satisfaction Questionnaire pretest X Group	1	.34025	4.40	.05*

* = non significant at the .01 level.

Table V

Work Attitude Survey Test for Homogeneity of Regression

Source of Variance	df	SS	F	PR 7 F
Work Attitude Survey pretest X Group	1	.11087	.49	.49*

*=non-significant at the .01 level.

Table VI

Leisure Attitudes Survey Test for Homogeneity of Regression

Source of Variance	df	SS	F	PR 7 F
Leisure Attitude Survey Pretest X Group	1	1.07269	7.33	.01*

* = non-significant at the .01 level

Table VII

Work Self-Concept Survey Test for Homogeneity of Regression

Source of Variance	df	SS	F	Pr > F
Work Self-Concept Survey Pretest X Group	1	.38586	8.02	.01*

* = .01 level of significance

group in this variable was not tenable and it was concluded that there was an interaction between the covariate and the dependent variable thus an analysis of covariance could not be performed. For Leisure Self-Concept the test for homogeneity of regression as seen in Table VIII is significant ($F .01, df=1,20$); therefore, the researcher failed to reject the null hypothesis. This indicated that the assumption of parallel regression lines was tenable, permitting the use of the analysis of covariance.

Test For Differences Among Counseled and Non-Counseled Groups

This section deals with the measured differences between the experimental (counseled) and the control (non-counseled) groups on the posttest means. Based upon the results of the test for homogeneity of regression, analysis of covariance was utilized with the following dependent variables; Leisure Attitudes, Leisure Self-Concept, Work Attitudes and Leisure Satisfaction.

Hypothesis One

There will be a positive increase in Leisure Attitudes as measured by the Leisure Attitudes Survey for those individuals who received leisure counseling. For Leisure Attitudes, the analysis of covariance as seen in Table IX is non-significant ($F.05, df=1,21$); therefore, the researcher failed to reject the null hypothesis, and rejected the research hypothesis. In addition, the regression of

Table VIII
 Leisure Self-Concept Survey Test for
 Homogeneity of Regression

Source of Variance	df	SS	F	PR 7 F
Leisure Self-Concept Survey Pretest X Group	1	.34325	4.57	.04*

* = non-significant at the .01 level

Table IX
 Analysis of Covariance: Comparison of
 Experimental and Control Groups on
 Leisure Attitude Survey

Source of Variance	df	SS	MS	F	PR 7 F
Model	2	3.367	1.683	8.84	.01
Group	1	.7460	.7460	3.92	.06
LASA	1	2.575	2.575	13.52	.01
Error	21	3.999	.1905		
Total	23	7.366			

the pretest on the posttest (LASA) contributed to the model variance ($p > .01$). Table X reports the adjusted and unadjusted posttest means used in the analysis of covariance on the dependent variable Leisure Attitude. Appendix E, p. 182, reports unadjusted posttest and pretest means for counseled and non-counseled groups in leisure-work attitudes, leisure-work self-concept and leisure satisfaction.

Hypothesis Two

There will be a positive increase in Leisure Self-Concept as measured by the Leisure Self-Concept Survey for those individuals who received leisure counseling. For Leisure Self-Concept, the analysis of covariance as seen in Table XI is significant ($F(01, df=1,21)$); therefore, the null hypothesis is rejected and the research hypothesis accepted indicating a treatment effect did occur. In addition, the regression of the pretest on the posttest (LSCA) contributed to the model variance ($p > .09$). Table XII reports the adjusted and unadjusted posttest and pretest means used in the analysis of covariance on the dependent variable Leisure Self-Concept.

Hypothesis Three

There will be a positive increase in Work Attitudes as measured by the Work Attitudes Survey for those individuals who received leisure counseling. For Work Attitudes, the analysis of covariance as seen in Table XIII is non-significant ($F(05, df=1,21)$); therefore, the researcher failed to reject the null hypothesis and

Table X
Leisure Attitude Survey Adjusted Posttest Means
and Unadjusted Means for Experimental
and Control Groups

	Unadjusted Means	Adjusted Posttest Means
Experimental (counseled)		
pretest	2.562	
posttest	2.319	2.325
Control (non-counseled)		
pretest	2.584	
posttest	2.682	2.677

Table XI

Analysis of Covariance: Comparison of
Experimental and Control Groups on Leisure
Self-Concept Survey

Source of Variance	df	SS	MS	F	PR 7 F
Model	2	.8442	.4221	4.81	.02
Group	1	.6910	.6910	7.87	.01
LSCA	1	.2738	.2738	3.12	.09
Error	21	1.844	.0878		
Total	23	2.688			

Table XII
 Leisure Self-Concept Survey Adjusted
 Posttest Means and Unadjusted Means
 for Experimental and Control Groups

	Unadjusted Means	Adjusted Posttest Means
Experimental (counseled)		
pretest	3.500	
posttest	3.759	3.777
Control (non-counseled)		
pretest	3.630	
posttest	3.450	3.432

Table XIII
 Analysis of Covariance: Comparison of
 Experimental and Control Groups on
 Work Attitudes Survey

Source of Variance	df	SS	MS	F	PR 7 F
Model	2	2.809	1.405	6.31	.01
Group	1	.0022	.0022	0.01	.92
WASA	1	2.806	2.806	12.60	.01
Error	21	4.677	.2227		
Total	23	7.487			

rejected the research hypothesis. In addition, the regression of the pretest on the posttest (WASA) contributed to the model variance ($p > .01$). Table XIV reports adjusted and unadjusted posttest means used in the analysis of covariance on the dependent variable Work Attitude.

Hypothesis Five

There will be a positive increase in Leisure Satisfaction as measured by the Leisure Satisfaction Questionnaire for those individuals who received leisure counseling. For Leisure Satisfaction, the analysis of covariance as seen in Table XV is significant ($F_{.01, df=1,21}$); therefore, the researcher rejected the research hypothesis, indicating that a treatment effect did occur. In addition, the regression of the pretest on the posttest (LSQA) contributed to the model variance ($p < .0001$). Table XVI reports the adjusted and unadjusted posttest means used in the analysis of covariance.

Demographic Data

Demographic data were obtained from all experimental and control subjects ($N=24$). Specific data were obtained for Age (Table XVII), Yearly Income (Table XVIII), Marital Status (Table XIX), Occupational Frequencies (Table XX); Religious (Table XXI); and Education (Table XXII).

Table XIV
 Work Attitude Survey Adjusted
 Posttest Means and Unadjusted Means
 For Experimental and Control Groups

	unadjusted means	adjusted post- test means
Experimental (counseled)		
pretest	2.410	
posttest	2.427	2.424
Control (non-counseled)		
pretest	2.401	
posttest	2.403	2.405

Table XV
 Analysis of Covariance: Comparison of
 Experimental and Control Groups on Leisure
 Satisfaction Questionnaire

Source of Variance	df	SS	MS	F	PR 7 F
Model	2	2.745	1.372	15.27	.0001
Group	1	.6518	.6518	7.25	.01
LSQA	1	2.360	2.360	26.26	.0001
Error	21	1.887	.0899		
Total	23	4.632			

Table XVI
 Leisure Satisfaction Questionnaire
 Adjusted and Unadjusted Posttest Means For
 Experimental and Control Groups

	Unadjusted Means	Adjusted Posttest Means
Experimental (counseled)		
pretest	2.903	
posttest	3.205	3.244
Control (non-counseled)		
pretest	3.028	
posttest	2.951	2.912

Table XVII

Mean, Range, Median and Standard Deviation
Between Experimental and Control Groups
on Age

Experimental (Counseled)				Control (Non-counseled)			
Range	Mean	Median	S.D.	Range	Mean	Median	S.D.
31-63	45.47	46	10.01	40-64	52.17	52.50	7.60

Table XVIII
 Mean, Range, Median and Standard Deviation
 Between Experimental and Control Groups on
 Yearly Income

Range	Experimental (Counseled)			Range	Control (Non-counseled)		
	Mean	Median	S.D.		Mean	Median	S.D.
\$15,000- \$45,000	\$28,416.67	\$26,000	8.86	\$15,000- \$90,000	\$28,916.67	\$21,500	27.11

Table XIX

Marital Status Frequencies Between Experimental and Control Groups

Marital Status	Experimental (Counseled)	Control (Non-Counseled)
Single	1	0
Married	8	12
Separated	3	0

Table XX

Occupational Frequencies Between Experimental and Control Groups

Occupation	Experimental (Counseled)	Control (Non-Counseled)
Accountant	1	0
Attorney	0	1
Business Executive	2	2
Counselor	0	1
Dentist	0	1
Educator	1	2
Engineer	5	2
Minister	0	2
Police Officer	1	0
Publisher	1	0
Skilled Craftsmen	1	0
Writer	0	1

Table XXI

Religious Frequencies Between Experimental and Control Groups

Religion	Experimental (Counseled)	Control (Non-Counseled)
Catholic	1	2
Protestant	8	9
Non-Affiliated	3	1

Table XXII

Education Frequencies Between Experimental and Control Groups

Educational Level	Experimental (Counseled)	Control (Non-Counseled)
Some High School	0	1
High School Graduate	1	2
Some College	3	1
College Graduate	4	4
Post Baccalaureate	4	4

Open Ended Questions and Responses

1. Does your family support your decision to participate in the Adult Fitness Program?

In answering this question all 12 experimental subjects responded "yes."

2. Specifically, in what ways do they support you?

Client #1 - "My son jogs with me."

Client #2 - "The wife asks about the distance I'm running these days."

Client #3 - My girlfriend jogs with me."

Client #4 - "The kids ask about my resting heart rate and if I've lost weight."

Client #5 - "My wife says I look better and pats my back."

Client #6 - "The club I'm in always asks me how my program is going and my son will run with me when he visits."

Client #7 - "My wife usually asks me when I get home how much I weigh and how far I ran. She says I'm in a better frame of mind when I keep up with the program."

Client #8 - "My family reminds me when I'm eating things I shouldn't be because I've asked them to help me. They ask about my progress and how I feel."

Client #9 - "My friends say I look better and even jog with me once in awhile."

Client #10 - My co-workers have come in to check out the program because I've sold them on it, and it'll be nice to all support each other's activity instead of talking about it. Their joining would be a great support for me.

Client #11 - My son and daughter both run with me on weekends and brag to their friends about their "running" Dad. That makes me feel good to know they care."

Client #12 - "My family supports me by understanding this is time for myself and they don't interfere with it."

3. Who is most supportive within your family or living situation?

Four clients said their son and daughter were most supportive; one said his girlfriend; and three reported that their wives gave them the most support. One said a particular male co-worker supported him most while another named a specific male club member. Two clients could not identify anyone in particular that supported them most. They felt all friends and family gave equal support to their self-improvement endeavors.

4. What leisure activities does your whole family participate in?

Client #1 - "My wife and I participate in civic organizations, bridge clubs, travel, and chess."

Client #2 - "My wife and I golf and travel. Once in a while we'll read together."

Client #3 - "Since I'm divorced, I rarely see my son, so my pattern of recreational activities with my family is non-existent."

Client #4 - "We bowl, go out to eat and church activities together."

Client #5 - "Just photography with friends and every once in a while we'll play pool."

Client #6 - My children, one girl and a son, snow ski together, and on family vacations we all go, including my wife."

Client #7 - "Nothing. We all go our separate ways."

Client #8 - "My girlfriend and I jog together, go to the movies and the basketball games."

Client #9 - "Just family vacations."

Client #10 - "Our annual two week vacation is an all together affair. We fish, swim and party with the other campers. Sometimes we'll all play tennis."

Client #11 - "I can't think of anything I do with my friends other than an occasional phone call. I'm too busy."

Client #12 - "Visit relatives, play with the kids indoors and that's about it!"

For a complete list of the client's leisure activities at the beginning of the leisure counseling program, termination and one month follow-up see Appendix F, p. 175.

Length of Total Leisure Counseling and Weekly Sessions

The total member weeks that each counseled client spent in leisure counseling is reported as seen in Table XXIII. The average length of the weekly counseling session is also reported in Table XXIII.

Table XXIII
 Number of Weeks of Counseling and
 Average Length of Weekly Counseling Session

Client	# of Weeks of Counseling	Average length of Weekly Session
1	4	1 hour, 19 minutes
2	6	1 hour, 4 minutes
3	9	1 hour
4	7	1 hour, 7 minutes
5	8	1 hour, 15 minutes
6	11	1 hour, 6 minutes
7	5	1 hour, 15 minutes
8	10	1 hour, 7 minutes.
9	10	52 minutes
10	9	48 minutes
11	9	1 hour, 20 minutes
12	8	59 minutes.

Chapter 5

DISCUSSION

This chapter contains a discussion of the results as reported in Chapter 4, based upon the data with subsequent discussion, conclusion, implications and recommendations.

The purpose of this study was to verify the efficiency of McDowell's Leisure Counseling Model for potential use with cardiac intervention clients. This study investigated if McDowell's model had a significant effect on the clients' leisure attitudes, work attitudes, work self-concept, leisure self-concept and leisure satisfaction.

A review of the literature showed that a theoretically based leisure counseling model had been developed and was seen as effective in affecting one's leisure attitudes, leisure self-concept and work self-concept. The literature also showed that dissatisfaction in leisure has been reported as an element which may cause psychosocial stress, a factor that can be correlated with coronary risk factors. Understanding how leisure and work values and attitudes integrate within one's lifestyle is generally seen as a valuable contribution in cardiac rehabilitation/intervention programs.

A Pretest-Posttest Control Group Design was used. The independent variable was counseling and the dependent variables were

effects on leisure attitudes, work attitudes, leisure self-concept and leisure satisfaction.

In the study, the counseled clients were typically characterized as middle-ages, married, white-collar male workers that had been to college, of which 66% either graduated or received post baccalaureate education. Typically, the clients were affiliated with the Protestant church, and younger than the control group. The marital status of the experimental group included three separated clients, one of whom was divorced during the leisure counseling research. As Holmes and Rahe (1967) indicated on their life change events scale that divorce is assigned the value of 73 while separation is assigned a value of 65. The highest value being 100. It is interesting to note that even though these clients were experiencing this type of stress requiring the revision of personal habits, social and recreational activities, leisure counseling positively affected their leisure self-concept, and leisure satisfaction. Considering that the review of the literature suggests dissatisfaction in leisure may correlate with stress which correlates with coronary heart disease, leisure counseling may reduce the stress associated with leisure satisfaction.

The research hypotheses under investigation were as follows:

1. There will be a positive increase in leisure attitudes as measured by the Leisure Attitudes Survey for those individuals who receive leisure counseling.

2. There will be a positive increase in leisure self-concept as measured by the Leisure Self-Concept Survey for those individuals who receive leisure counseling.

3. There will be a positive increase in work attitudes as measured by the Work Attitudes Survey for those individuals who receive leisure counseling.

4. There will be a positive increase in work self-concept as measured by the Work Self-Concept Survey for those individuals who receive leisure counseling.

5. There will be a positive increase in leisure satisfaction as measured by the Leisure Satisfaction Questionnaire for those individuals who receive leisure counseling.

To measure the dependent variables, five instruments were selected that were designed to accompany McDowell's Leisure Counseling Model. The data from the leisure counseling sample were subjected to a test for the homogeneity of regression to see if the slopes of the regression lines were parallel. Based upon the results of the test for homogeneity of regression, analysis of covariance was applied only to the posttest means of the following dependent variables; leisure satisfaction, work attitudes, leisure attitudes, and leisure self-concept. The findings of the statistical treatments allowed for the researcher to reject the null hypothesis for the dependent variable Work Self-Concept thus indicating that the assumption that the regression lines were parallel for the experimental and control groups on this variable was not tenable. Because this assumption was

not met, the experimental and control groups were considered generally unrepresentative of the same population on the variable of Work Self-Concept. In this research the non-homogeneity is most likely due to sampling error and small sample size. The greater the sample size, the smaller the sampling error will be. Random selection, especially with small samples, does not guarantee a sample will represent the population. In this research the experimental and control groups were considered generally representative of the same population except in the case of Work Self-Concept.

The analysis of covariance for hypothesis one revealed that a treatment effect did not occur ($p > .06$), therefore, the researcher failed to reject the null hypothesis, and rejected the research hypothesis. The analysis of covariance for the hypothesis two revealed that a treatment effect did occur, therefore, the null hypothesis is rejected and the research hypothesis accepted. There was a positive increase in Leisure Self-Concept as measured by the Leisure Self-Concept Survey for the experimental (counseled) group. A treatment effect occurred ($p > .01$) even after correction for the regression of the pretest on the posttest (LSCA, $p > .09$). Even though there may have been some pretest sensitization, the counseling was apparently effective after the relationship between the pretest and the posttest had been accounted for. This suggests that the utilization of another research design which identifies both the main effects of testing and interaction of testing and treatment may be more appropriate for this research. The analysis of covariance for hypothesis three revealed

that a treatment effect did not occur ($p > .92$), therefore, the researcher failed to reject the null hypothesis, and rejected the research hypothesis. The analysis of covariance hypothesis five revealed that a treatment effect did occur, therefore, the null hypothesis is rejected and the research hypothesis accepted. There was a positive increase in Leisure Satisfaction as measured by the Leisure Satisfaction Questionnaire for the experimental (counseled) group. A treatment effect occurred ($p > .01$) even after correction for the regression of the pretest on the posttest (LSQA, $p > .0001$). Even though there may have been some pretest sensitization, the counseling was apparently effective after the relationship between the pretest and the posttest had been accounted for. This suggests that the utilization of another research design which identifies both the main effects of testing and the interaction of testing and treatment may be more appropriate for this type of research.

Types of Leisure Activities Involved
In For the Counseled Group

Because of the small sample size, the types of activities that the counseled group showed involvement in cannot be broadly generalized. Seasonal trends can be seen however as snow skiing decreased, and fishing, golf, tennis, and general outdoor activities increased (see Appendix F, p. 188). The types of leisure activities also reflected the accomplishment of counseling goals for several clients (see Appendix G, p. 191). An increase at the time of termination and follow-up in adult education reflects those clients who

were interested in piano, painting and fine arts classes. A decrease in the number of individuals watching T.V. also reflects the accomplishment of counseling goals. Jogging, karate, camping, volunteering and the use of the family council provide a reflection of accomplished goals and objectives. At the time of the one-month follow-up, two clients and their families indicated their continued involvement in the technique of the family council. This suggests that the use of the family council technique as an alternative leisure experience is effective.

Specific Determined Goals and
Objectives of Counseled Clients

Individual goals for leisure counseling are stated in behavioral objectives with desired outcomes in mind. This important process reflected Step 3 of McDowell's Model (see Table II, p. 50). Terminal performance objectives (T.P.O.) are designed so the counselor can specify the actual measurable kind of behavior that will be accepted as evidence the client has achieved the objective. Performance objectives are designed so the client can process the terminal performance objective through structured procedures of activities. These goals and objectives as seen in Appendix G, p. 191, incorporated Steps 1-7 of McDowell's model. Alternative learning experiences serve to guide the client toward his terminal performance objectives. The goals reflect the flexibility of McDowell's model and the individualization of the counseling process.

The concern for the identification of family interests supports the research concerning the family and leisure. The ideology of family interaction in a leisure context reflects desirable family cohesion (Carisse, 1975). Kelly (1975) reports that parenthood "brings a shift to activities that complement the family roles" (p. 188). In two cases in this study, the lack of family cohesion in leisure concerned the clients. Instituting a regular family council to discuss leisure as well as other family related concerns was reportedly received with some skepticism by the clients' children. The children of both clients disbelieved that leisure decisions concerning a family vacation would be made by the whole family instead of by parents only. Spending more time with their families and in recreational activities that were planned together helped prove to the children that their suggestions were going to be acted upon. Establishment of this type of family interaction is not something that could occur within a ten week counseling program, and the use of a family council for fostering family leisure patterns and lifestyles remains a potential research area.

The length of time needed by each client to complete his specific goals and objectives varied. This reflected the individual differences encountered among clients. Some could overcome barriers to actualizing their goals quickly, while for others the process took a longer period of time (see Table XXIII, p. 107). This may be due in part to the groups orientation toward the task at hand. Being for the most part white collar male professionals who have had

management training including goal setting which may have contributed to some of the clients actualizing their goals in a short period of time. McDowell's sample were typically housewives with presenting symptoms of depression. Assuming that these females may have not been used to decision-making and goal setting compounded by their depression may have accounted for the fact that McDowell's counseling lasted nine months. Another explanation may be that in order to establish new leisure behaviors, McDowell scheduled appointments two to three weeks apart for this clients. Overall, the leisure counseling process seems to take on the characteristic of being short-termed when compared to other counseling processes and techniques.

Transcript of a Counseling
Session

It was felt that a full tape transcript may reflect how the counselor implemented McDowell's model. Despite the fact that the researcher assured clients of confidentiality, it was difficult to obtain taping permission. Perhaps taping reflected some sort of recorded permanence to the clients.

An edited tape as seen in Appendix H, p. 200, depicts a second counseling session in which the counselor tries to keep the client's focus on leisure and establishing goals. Standard counseling procedure requires that the counselor defines his/her role to the client. Although this was done in the first session, it became evident

that the counselor's role needed to be redefined. Because the tape is edited, it lacks continuity in several sections. Although this particular client had difficulty establishing goals as evidenced by his many contradictory statements throughout the transcript, he did succeed in accomplishing his goals. He was, however, referred to a marriage counselor upon termination of the leisure counseling.

CONCLUSIONS

Based upon the results of this study, the following conclusions appeared justified:

1. Leisure counseling as a component of cardiac rehabilitation/intervention programs using McDowell's model was said to be neither effective or ineffective for the sample studied.

2. For the sampled studied McDowell's leisure counseling model can be said to have positively increased the client's leisure self-concept and leisure satisfaction.

3. The results must be considered in light of the research methodology which was not able to identify what has been called "reactive effect of measurement" (Campbell and Stanley, 1963). The pretest measurement activity may have produced a change in what was being measured. This change or interaction may have compounded the treatment effect.

IMPLICATIONS

In counseling research a limitation exists that creates several research problems. The number of clients that can be effectively

counseled by one counselor reduced the sample size. If future studies are to include larger sample sizes, more than one trained counselor would be needed. Counseling techniques are highly individualized even within the framework of a leisure counseling model; thus, the treatment (counseling) may not be delivered in the same manner to each client.

Research in leisure counseling is a new concept which may attract the "curious, exhibitionistic and succorant" which are likely to populate any sample of volunteers (Webb, et al., 1966, p. 25). Yet, the basic premise of counseling generally relies upon volunteerism. This concern implies that the researcher must make an ethical decision when attempting such research. In attempting research with "special populations" such as intact cardiac intervention groups which are small in number to start with, researchers may consider more descriptive research techniques to overcome the problems inherent in statistical designs for smaller sample sizes.

Matching special populations on certain characteristics may not be a possible solution to the sampling problem, especially since therapeutic recreation, counseling, and special education are highly individualized programs, allowing for individual differences.

RECOMMENDATIONS

The following recommendations for further study are based upon the conclusions of this study:

1. To validate effectively the instruments used in this study, normative data for various populations should be gathered.

Item intercorelation and factor analysis should be used to strengthen the instruments.

2. Further research utilizing McDowell's leisure counseling model should use the Solomon (1949) Four-Group Design. For this research design the pre-posttest experimental and control groups with experimental and control groups which lack pretest measures, both the main effects of testing and the interaction of testing and treatment can be identified.

3. A larger sample size should be obtained.

4. McDowell's model and its potential effectiveness should be compared to other leisure counseling models designed to change attitudes and self-concepts associated with work and leisure with similar populations.

5. Reword the cover letters and consent forms if required to remove possible subject sensitization to the treatment.

6. Utilizing leisure counseling at the differing developmental periods of life should be considered for future longitudinal studies.

7. Initial and post-counseling stress or life changes should be measured by a life events scale for each client to determine if leisure counseling can contribute to stress reduction.

REFERENCES

REFERENCES

- Acuff, S. Recreation counseling as an aspect of programming for the short term psychiatric patient. Recreation in Treatment Centers, Vol. V (September 1966), 5-7.
- American Heart Association. Heart Facts, 1977, American Heart Association, Inc.
- Ardrey, R. The Territorial Imperative, New York: Dell Publishing Co., 1966.
- Arje, T. B. Recreation counseling. Hospital Management, 1960, 89 (4), 36-37.
- Barr, A. J. Goodnight, J. H., Sall, J. P., Halwig, J. T. Statistical Analysis System, Institute, Inc., Raleigh, North Carolina.
- Brenner, M. H. Economic changes and heart disease mortality. American Journal of Public Health. In D. C. Glass, Behavior Patterns, Stress, and Coronary Disease, New Jersey: John Wiley and Sons, 1977.
- Brightbill, C. K. Educating for Leisure-Centered Living. Harrisburg, Pennsylvania: Stackpole, 1966.
- Bruhn, J. G., McGrady, K. E. and DePlessis, A. Evidence of "emotional drain" preceding death from myocardial infarction. Psychiatric Diagnosis, 1968, 29, 34-40.
- Bruning, J. L. and Kintz, B. L. Computational Handbook of Statistics. Glenview, Illinois: Scott, Foresman and Co., 1968.
- Brunner, D. and Manelis, G. Myocardial infarction among members of communal settlements in Israel. Lancet, 2:1049, 1960.

- Burk, G. A community-based model for the delivery of leisure counseling services to special populations. Unpublished Master's Project, University of Iowa, Department of Recreation Education, 1975.
- Butler, G. D. Introduction to Community Recreation. New York: McGraw-Hill, 1959.
- Campbell, D. T., and Stanley, J. C. Experimental and Quasi-Experimental Designs for Research. Chicago: Rand McNally College Pub. Co., 1963.
- Carisse, C. B. Family and leisure: a set of contradictions. The Family Coordinator, 1975, 51, 190-197.
- Corbin, H. D. and Tait, W. J. Education for Leisure. Englewood Cliffs, New Jersey: Prentice-Hall, 1973.
- Dinkmeyer, D. and McKay, G. D. Raising a Responsible Child. New York: Simon and Schuster, 1973.
- Dreyfuss, F., Shanan, J. and Sharon, M. Some personality characteristics of middle-aged men with coronary artery disease. Psychotherapy and Psychosomatics, 1966, 14, 146.
- Dumazedier, J. Toward a Society of Leisure. New York: The Free Press, 1967.
- Duvall, E. M. Family Development. 3rd ed. New York: J. B. Lippincott, 1971.
- Eason, J. Lifestyle counseling for a reluctant leisure class. Personnel and Guidance Journal, 1972, 51 (2), 127-132.

- Edwards, P. Finding the right leisure for every life style.
Journal of Health, Physical Education and Recreation, 1974, 45
(9), 61.
- Edwards, P. Leisure counseling techniques: Individual and group
counseling step-by-step. Los Angeles: University Publishers,
1975.
- Fearn, M., O'Brien, S. and Prosser, L. Leisure education lifestyle
center. Program proposal abstract, University of Oregon, 1974.
- Fox, S. M. and Haskel, W. Physical activity and health maintenance.
Journal of Rehabilitation, 47:33, 1969.
- Fox, S. M. and Oglesby, P. Physical activity and coronary heart
disease. American Journal of Public Health, 47:33, 1969.
- Fox, S. Exercise and coronary heart disease. Proceedings of the
National Conference on Fitness and Health. Ministry of National
Health and Welfare, Ottawa, Canada, 1972.
- Fox, S. M., Naughton, J. P., and Gorman, P. A. Physical Activity
and Cardiovascular Health. Modern Concepts of Cardiovascular
Disease, 1972, 41, 17.
- Fox, S. "Scope of the problem," Session I Introductory Remarks -
Heart Disease and Rehabilitation. Heart Disease and Rehabilita-
tion Symposium, Milwaukee, Wisconsin, May 1978.
- Fox, S. M. Physical activity in the community. In G. A. Hellmuth,
ed. Prevention of Heart Attack - A Challenge to Health Pro-
fessions. University Microfilms, International, 1977.
- Fulton, K. Humanistic life-style counseling model. In J. Murphy,
Recreation and Leisure Services - A Humanistic Perspective.
Dubuque, Iowa: Wm. C. Brown Co. Pub., 1975.

- Friedman, M. Pathogenesis of coronary artery disease. New York: McGraw-Hill, 1969.
- Friedman, M., and Rosenman, R. H. Type A behavior and your heart. New York: Knopf, 1974.
- Galli, N. Foundations and Principles of Health Education. New York: John Wiley and Sons, Inc., 1978.
- Glass, D. C. Behavior Patterns, Stress, and Coronary Disease. New Jersey: John Wiley and Sons, 1977.
- Godbey, G. and Parker, S. Leisure Studies and Services: An Overview. Philadelphia: W. B. Saunders Co., 1974.
- Goldman, F. H. A turning to take next: Alternative goals in the education of women. Boston: Center for the Study of Liberal Education for Adults, 1965.
- Gunn, S., and Peterson, C. A. Leisure Education: A Component of Therapeutic Recreation Services. A paper submitted for publication in the Therapeutic Recreation Journal, 1976.
- Gray, D. This Alien Thing Called Leisure, ed. D. Gray and D. Pelegrino. Reflections on the Recreation and Park Movement. Dubuque: William C. Brown Co. Pub., 1973.
- Hansen, J. C., Stevic, R. R., and Warner, R. W. Counseling: Theory and Process. Boston: Allyn and Bacon, Inc., 1972.
- Haun, P. Recreation A Medical Viewpoint. New York: Columbia University: Teachers College Press, 1971.
- Hayes, G. Model for leisure education and counseling in therapeutic recreation. University of Waterloo, Waterloo, Ontario, Canada, 1974.

- Hellerstein, H. "Cardiac Rehabilitation in Retrospect" Session VI Cardiac Rehabilitation in Perspection. Heart Disease and Rehabilitation Symposium, Milwaukee, Wisconsin, May 1978.
- Herbert, W. Introduction to Cardiac Rehabilitation and Adult Physical Fitness Programs (Mimeograph outline distributed for course use). Dept. of HPER, VPI & SU, October 1978.
- Heywood, L. A. Perceived Recreative Experience and the Relief of Tension. Journal of Leisure Research, 1978 (10), 2, 86-97.
- Hobbs, N. Sources of gain in pschotherapy. American Psychologist, 1962, 17 (11), 741-747.
- Hochbaum, G. Psychosocial Aspects of CHD Prevention. In G. A. Hellmuth, ed. Prevention of Heart Attack - A Challenge to Health Professions. University Microfilms, International, 1977.
- Holems, T. H. and Rahe, R. H. The Social Readjustment Rating Scale. Journal of Psychosomatic Research, 1967, 11, 213-218.
- House, J. S. Occupational stress as a precursor to coronary disease. In W. D. Gentry and R. B. Williams, Jr. eds., Psychological aspects of myocardial infarction and coronary care. St Louis: Mosby, 1975.
- Jenkins, C. D., Rosenman, R. H., and Zyzanski, S. J. The Jenkins Activity Survey for Health Prediction. Boston: Publ. by the authors, 1972.
- Joswiak, K. The design, implementation and evaluation of leisure counseling program materials for use with mentally impaired adults in a group home setting. Unpublished Master's project, Michigan State University, 1975.

- Kando, T. M. Leisure and Popular Culture in Transition. St. Louis: C. V. Mosby Co., 1975.
- Kaplan, M. Implications for Gerontology from a General Theory of Leisure (Paper presented at the Third International Course, "Leisure and the Third Age," Dubrovnik, Yugoslavia, May 15-19, 1972.
- Kavanagh, T. Post Coronary Exercise Programs. Proceedings of the National Conference on Fitness and Health. Ministry of National Health and Welfare, Ottawa, Canada, 1972.
- Keith, R. A. Personality and coronary heart disease: A review. Journal of Chronic Diseases, 1966, 19, 1231-1243.
- Kelly, J. R. Life styles and leisure choices. The Family Coordinator, 1975, 51, 185-190.
- Kerlinger, F. N. Foundations of Behavioral Research. 2nd ed. New York: Holt, Rinehart and Winston, Inc., 1964.
- Kerlinger, F. N., Pedhagen, E. J. Multiple Regression In Behavioral Research. Holt, Rinehart and Winston, Inc., 1973.
- Kraus, R. Recreation and Leisure in Modern Society. New York: Appleton-Century Crofts, 1971.
- Lalonde, M. National fitness and health. Proceedings of the National Conference on Fitness and Health. Ministry of National Health and Welfare, Ottawa, Canada, 1972.
- Liljefors, I., and Rahe, R. H. An indentical twin study of psychosocial factors in coronary heart disease in Sweden. Psychosomatic Medicine, 1970, 32, 523-542.

- Manley, G. J. *The Science of Educational Research* (2nd ed.)
New York: Von Nostrand Reinhold, 1970.
- Martin, F. W. Therapeutic recreation research content area,
methodology, and setting. In G. S. Fain and G. L. Hitzhusen,
eds., Therapeutic Recreation State of the Art. National
Recreation and Park Association, 1977.
- McDowell, C. F. *A Suggested Leisure Counseling Model: Its Use
and Effectiveness in a Therapeutic Community*. Doctoral
Dissertation, University of Utah, 1975.
- McDowell, C. F. Leisure Counseling: Selected Lifestyle Processes.
Center of Leisure Studies, University of Oregon, 1976.
- Merriman, J. Coronary Risk Factors Screening. Circulation
Supplement, Vol. XLII. December 1970, p. A55.
- Meyer, H. D., and Brightbill, C. Community Recreation. Englewood
Cliffs, N. J.: Prentice-Hall, 1961.
- Mirenda, J. *Mirenda Leisure Interest Finder*. Milwaukee Public
Schools, Department of Municipal Recreation and Adult Education,
Milwaukee, Wisconsin, 1973.
- Montoye, H. Summary of research on relationship of exercise to
heart disease. Journal of Sports, Medicine and Physical
Fitness, 2:35, 1962.
- Mordkoff, A. M., and Parsons, O. A. The coronary personality: A
critique. International Journal of Psychiatry, 1968, 5, 413-
426.
- Morris J., Kagan, A., Patterson, D. C., Gardner, M. J., and Raffle,
P. A. B. Incidence and prediction of ischemic heart disease
in London Busmen. Lancet, 1966, 2, 553.

- Morris, J. N., Chave, S. P. W., Adam, C., Sirey, E., Epstein, L. and Sheehan, D. J. Vigorous exercise in leisure time and the incidence of coronary heart disease. Lancet, 1:333, 1973.
- Murphy, J. F. Recreation and Leisure Service. Dubuque, Iowa: William C. Brown Co., 1975.
- Myers, C. R. Future directions of YMCA Physical Fitness. In P. K. Wilson, ed., Adult Fitness and Cardiac Rehabilitation. Baltimore: University Park Press, 1975.
- Nagle, F. J. Cardiovascular Effects of Exercise. In P. K. Wilson, ed., Adult Fitness and Cardiac Rehabilitation. Baltimore: University Park Press, 1975.
- Naughton, J. P. Physical Activity and Coronary Heart Disease. In P. K. Wilson, ed., Adult Fitness and Cardiac Rehabilitation. Baltimore, University Park Press, 1975.
- Naughton, J. P., Hellerstein, H. K., and Mohler, I. C. The Principles of Conducting Exercise Programs by Karl Stoedefolke in Exercise Testing and Exercise Training in Coronary Heart Disease, New York: Academic Press, 1973.
- Neulinger, J. The Psychology of Leisure. Springfield, Ill.: Charles C. Thomas, 1974.
- Nie, N. H., Hull, C. H., Jenkins, J. G., Steinbrenner, K., Bent, D. H. Statistical Package for the Social Sciences. 2nd ed. New York: McGraw-Hill Book Co., 1975.
- Oldridge, Neil B. What to look for in an exercise class leader. The Physician and Sports Medicine, April, 1977, 85-88.

- Olson, W. E. and McCormick, J. B. Recreational Counseling in the psychiatric service of a general hospital. Journal of Nervous and Mental Disease, 1957, 125, 21, 237-239.
- O'Morrow, G. S. A study of Recreation Service to Psychiatric Patients in Relation to Pre-discharge Planning and Aftercare. Doctoral dissertation, Teachers College, Columbia University, 1968.
- Osgood, C., Suci, G. and Lannenbaum. The Measurement of Meaning. Urbana, Ill.: University of Illinois Press, 1957.
- Overs, R. P. and Healy, J. R. Educating Stroke Patient Families, Vol. 1). Milwaukee, Wisc.: Curative Workshop of Milwaukee, July, 1971.
- Overs, R. P., Taylor, S., and Adkins, C. Avocational Counseling in Milwaukee (Final Report). Milwaukee, Wisc.: Curative Workshop of Milwaukee, May, 1974.
- Parker, S. The Future of Work and Leisure. New York: Praeger Publishers, Inc., 1971.
- Pieper, J. Leisure: The Basis of Culture. New York: Pantheon Books, Inc., 1952.
- Pietrofesa, J. J., Leonard, G. E., and Hoose, W. V. The Authentic Counselor. Chicago: Rand McNally Co., 1972.
- Rahe, R. H., Lind, E. Psychosocial factors and sudden cardiac death: A pilot study. Journal of Psychosomatic Research, 1971, 51, 19-24.
- Raths, L. E., Harmin, M., and Simon, S. B. Values and Teaching. Columbus, Ohio: Charles E. Merrill Books, Inc., 1966.

- Romo, M., Siltanen, P., Theorell, T., and Rahe, R. H. Work behavior, time urgency and life dissatisfactions in subjects with myocardial infarction: A cross-cultural study. Journal of Psychosomatic Research, 1974, 18, 1-8.
- Sales, S. M., and House, J. S. Job dissatisfaction is a possible risk factor in coronary heart disease. Journal of Chronic Diseases, 1971, 23, 861-873.
- Smith, T. Factors involving sociocultural incongruity and change: A review of empirical findings. Milbank Memorial Fund Quarterly, 1967, 45, 23-39.
- Solomon, R. L. An extension of control group design. Psychology Bulletin, 1949, 46, 137-50.
- Sorenson, G. Toward an instructional model for counseling. CSEIP Occasional Report Number 6, University of California, Los Angeles, April, 1967.
- Stoedefalke, K. The Exercise Clinic. Research in the College of Health, Physical Education and Recreation. The Pennsylvania State University, March 1978, pp. 6-7.
- Syme, S. L. Psychological factors and coronary heart disease. International Journal of Psychiatry, 1968, 5, 429-433.
- Taylor, J. A. A personality scale of manifest anxiety. Journal of Abnormal and Social Psychology, 1953, 48, 285-290.
- Thomas, W. L. Toward a Concept for Affective Education. Chicago: Combined Motivation Educational Systems, 1970.

- Tremble, N. A community cardiovascular fitness clinic for the apparently healthy and for the coronary-prone adult. In P. K. Wilson, ed. Adult Fitness and Cardiac Rehabilitation. Baltimore: University Park Press, 1975.
- Webb, E. J., Campbell, D. T., Schwartz, R. D., Sechust, L. Unobtrusive Measures: Nonreactive Research in Social Sciences. Chicago: Rand McNally, 1966.
- Wiess, D. J., Dawis, R. V., England, G. W., and Lofquist, L. H. Manual for the Minnesota Satisfaction Questionnaire. University of Minnesota Industrial Relations Center, Bulletin 45, 1967.
- Wilson, G. T., Miranda, J. J. and Rutkowski, B. H. Milwaukee leisure counseling model. Leisurability, July (3rd quarter) 1975, 2 (3), 11-17.
- Wilson, P. K., ed. Adult Fitness and Cardiac Rehabilitation. University Park Press: Baltimore, 1975.
- Williams, R. B., Jr. Physiological mechanisms underlying the association between psychosocial factors and coronary disease. In W. D. Gentry and R. B. Williams, Jr. Eds. Psychological Aspects of Myocardial Infarction and Coronary Care. St Louis: Mosby, 1975.
- Witt, P., Witt, J., Campbell, M., Hurtubise, A., and Poirier, A. Leisure counseling/recreation (a project report on leisure and recreation counseling funded by the Sport and Recreation Branch, Ministry of Community and Social Services, Government of Ontario, 1973.

Wolf, S. Psychosocial forces in myocardial infarction and sudden death. In S. Bondurant ed., Research on acute myocardial infarction. New York: American Heart Association, 1969.

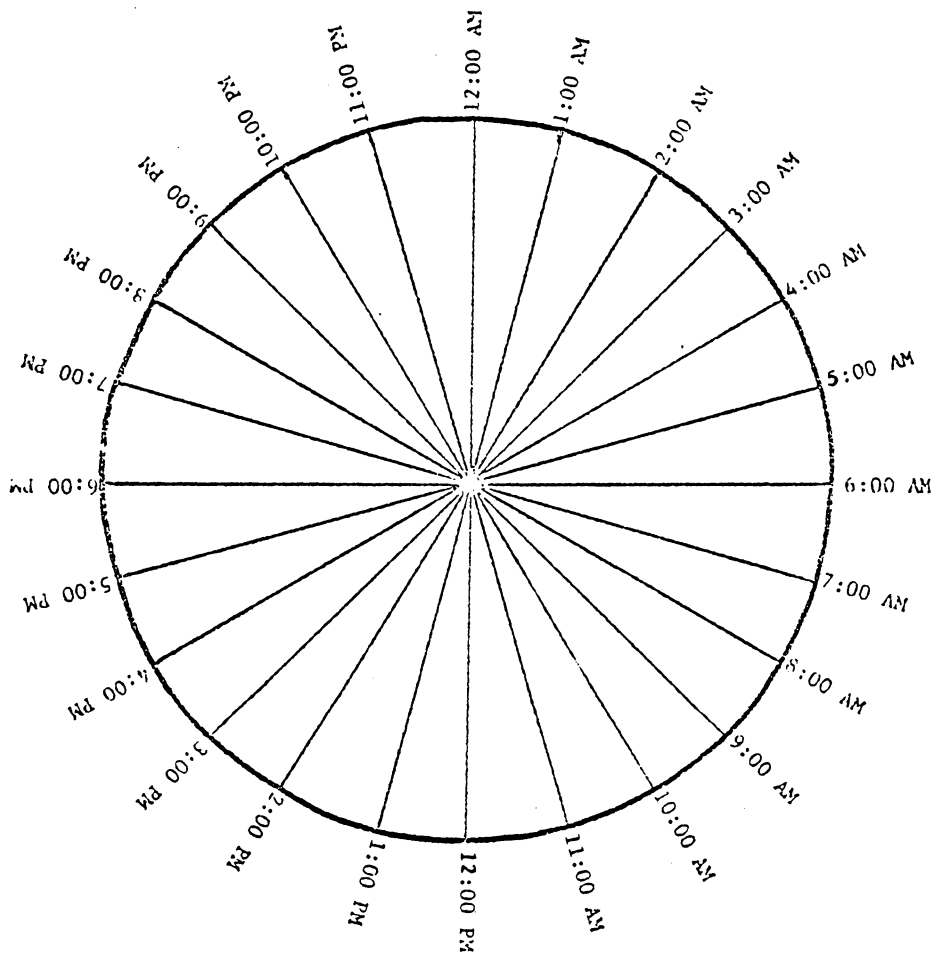
Zohman, L. R. Philosophy of Exercise Testing and Exercise Programs. In P. K. Wilson, ed. Adult Fitness and Cardiac Rehabilitation. Baltimore: University Park Press, 1975.

APPENDICES

APPENDIX A
ALTERNATIVE LEISURE EXPERIENCES

PIE OF LIFE

Directions: Fill in each hour with how you spend your time.



PROVOCATIVE QUESTIONS RELATED AROUND VALUES AND LEISURE

1. What is *good* about leisure, freetime, work?
2. What is *not good* about leisure, freetime, work?
3. Should you do what you like to do? When and when not?
4. How often do you do things in leisure just because others expect you to do them? Discuss.
5. How do you know when something is *good* or right?
6. How often do you do things of which you are not proud? Discuss.
7. How often do you consider the consequences of your leisure choice before you act upon it? Discuss.
8. What is in conforming for you, especially when it relates to a leisure pursuit?
9. How does obligation affect you in your leisure choices and pursuits?
10. What is the good of boredom? How does it affect you? When? Can you put it to good uses? Why or why not?
11. What is doing nothing to you?

ALTERNATIVE SHEET

ALTERNATIVE	I'll try it.	I'll consider it.	I won't try it.
-------------	-----------------	-------------------------	--------------------

1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			
13.			
14.			
15.			
16.			
17.			
18.			

CONSEQUENCE SHEET

Directions: Rank the top three preferences from the Alternative Sheet and list all consequences (good or bad) of each alternative.

First Preference	Second Preference	Third Preference
Consequences	Consequences	Consequences

FAMILY COUNCIL

- I. Meeting takes place once a week at the same time each week, and lasts no longer than a specified time limit. All members of family are invited.
- II. Parliamentary procedure is followed. Positions of chairman and secretary are rotated among all verbal members, older members helping younger ones if necessary.
- III. All decisions made must be by consensus vote and not by majority. This is to insure against an uncooperative minority, children ganging up against parents or vice versa, and to encourage creative solutions to problems. Each has an equal vote and opportunity to talk.
- IV. Procedure suggested:
 1. Reading of minutes of last meeting (might ask how it worked out during the week).
 2. Financial business - allowances, family purchases, etc.
 3. Problems, decisions, rules, etc., which need to be discussed or solved.
 - a. What is the problem?
 - b. How do you feel about it?
 - c. What can we all do about it?
 4. Schedule for the coming week.
 5. Planning a fun time for the family (each member might have a turn at choosing).
- V. Blaming is discouraged and each member is urged to indicate only what he or she is willing to do, how he feels and not what any other members should do. If this occurs, the parents and chairman need not respond.
- VI. Every family member is invited to attend but no one is to be forced to come. All those present will represent the group and council rules made will apply to all members.
- VII. It is strongly suggested that a treat be served during or after the meeting and that the family play a game together at the close of the meeting (the members who are present at the end of the meeting).

NOTES:

1. It is helpful for parents to refrain from offering solutions to problems until the children have had an opportunity to try. Poor decisions suggested by children (unless disastrous) are sometimes worth going along with in order to teach children - have them discover later that it didn't work and discuss why at the next meeting. A new decision can then be made.
2. An agenda box, list, envelope, or whatever, is helpful to have available during the week for jotting down ideas to bring up at the council meeting.
3. For a young secretary: scribble the decisions made and another member can write it in English while the secretary dictates what he has scribbled.
4. If no consensus can be arrived at during the time allotted, the matter must wait until the following week. If something has to be done before that time, parent might say, "Until next week, I shall do..."

The Cardiac Rehabilitation Program At Wake Forest University
Relaxation Therapy

The relaxation therapy program was developed by the coordinator of the exercise programs and the staff psychologist.

Through verbal instruction and portable tape recordings, relaxation instruction has been an important part of the total therapy program. Each Friday, following the exercise session cool down, the recreational games are replaced by lessons in relaxation. All patients report to a carpeted room where they lie down and receive instruction in the use and the skill of relaxation. Additional opportunity to practice relaxation techniques is provided through the use of tape recordings produced by the above mentioned staff members. Unpublished research in reducing blood pressures and heart rate as in vivo instruction. Thus, a patient may derive the same beneficial results by using tapes at home, work or while on vacation.

The following section provides (A) important components to be included in a relaxation program, (B) an example of a progressive mental relaxation protocol, (C) cautions in the use of relaxation and (D) suggested readings.

A. Components of a Relaxation Program

1. Educate patients to the value of muscular relaxation techniques as an aid in coping with daily stressful events.
 - a. A method for combatting heart disease.
 - b. A plan for living a more enjoyable life.
2. Discuss the basic differences between various types of relaxation.
 - a. Progressive to complete muscular relaxation (lying down, stretched out).
 - b. Differential relaxation (sitting in a chair).
3. Undertake muscular relaxation techniques as a part of the exercise session.
 - a. The main objective is to create muscle tension consciously and then release it in order to be able to compare muscle involvement when tensed or relaxed.
 - * Instruct the patient to create tension in his feet, hold it for 10 to 20 seconds, then release it gradually. Continue the procedure with the legs, then the hips, chest, arms, and finally, the head.

- * Each part of the body should be tensed, held, and relaxed independent from the rest of the body.
- b. The use of positive suggestive cues are extremely helpful in developing the correct mood during the session and later as the patient attempts to relax at home.
- c. Ask the patient to picture himself lying on the mat in a very relaxed state.
- d. Ask the patient to think about his arms and legs -- "Are they tensed? If so, loosen them and assume a more relaxed position."
- e. Tell the patient that this practice of relaxing is to be performed daily, especially when he is tense.
- f. Introduce the concept of differential relaxation, e.g. while relaxing in the office or driving long distances. Parts of the body can be active while other parts assume a less active role.
- g. Always use positive suggestions to help the patient believe in the process and the benefits that he will derive from practicing muscular relaxation.
- h. Alternate method: Avoid muscle tension and create a physically relaxed state through the power of concentration. Each area of the body should be examined mentally for tension. When tension occurs, the patient should be instructed to concentrate on less tension-producing thoughts, obtaining finally a negative muscular state.
- i. During the muscular relaxation sessions, allow for periods of time without verbal commands to the patient. These periods are beneficial to the patient by allowing him to practice relaxation and perceive himself as an isolated entity succumbing to his own suggestive feelings.
- j. In concluding the muscular relaxation session, allow for spontaneous discussion with the patient regarding the parts of his body he found most difficult to relax and his feeling or interpretation of the experience.

Generally, a relaxation program is built into the rehabilitative process by encouraging the patients to relax under the instruction of a trained leader once a week. Instructions in the appropriate use of a variety of relaxation techniques are possible at this time.

B. Sample Protocol of a Relaxation Session

The following text is a sample of the actual wording that can be used in a live or a taped session. It can be read aloud or taped and played back on a recorder.

Stretch out, --- close your eyes and make yourself as comfortable as you can. --- Just think of stretching out your body like a cat as you make yourself as comfortable as you can. Take a couple of deep breaths to help your body relax naturally. This prepares your body to relax and helps your body relax naturally.

What we're going to do now is relax every part of your body --- progressively. While we're doing this, you will hear my voice clearly and distinctly, --- even though it may go down to a whisper from time to time. You'll be aware of your surroundings although you may care less and less about what goes on around you.

As you lie there quietly, direct your attention to your feet and think --- imagine -- that all the muscles in your feet are becoming completely relaxed. --- Think of the bottom of your feet, your toes, the top of your feet, your ankles --- imagine that there's a warm feeling of relaxation beginning at your heels, spreading across the bottom of your feet to your toes --- spreading from your toes up the top of your feet to your ankles. A warm feeling of relaxation spreading deep --- deep within your feet. All the muscles within your feet are becoming completely relaxed --- relaxed --- fully, completely relaxed. Simply by thinking of certain parts of your body you are able to throw off all tension and with it, all fatigue and irritation.

Now imagine that this warm pleasant feeling of relaxation is spreading from your feet up the calves of your legs to your knees --- deep within the calves of your legs --- so that all the muscles in the lower part of your legs are relaxing. Relaxation is spreading from your knees up into your thighs --- into the upper part of your legs --- deep, deep within your thighs. --- Relaxed --- fully relaxed. --- Your feet and your legs are relaxed --- fully --- completely relaxed.

Now think of your hips, your pelvic region and allow all the muscles in this region to relax --- relax. Direct your attention to your stomach and relax all the muscles in this region. Your whole body is becoming so very relaxed. It's such a very pleasant, restful feeling --- to just let yourself go --- as relaxation spreads throughout your body.

Now direct your attention to your back. Imagine that there's a warm feeling of relaxation beginning at the base of your spine --- spreading up your spine --- into the sides of your back, so that all the muscles in your back are becoming completely, profoundly relaxed. Such a pleasant, warm feeling of relaxation spreading up your back, into your shoulders, into the back of your neck --- deep --- deep within your back. Your back is becoming very relaxed. Feel this pleasant sense of relaxation within your back.

Just let yourself go --- just go limp all over --- permit every organ, every fiber of your being to become completely, --- profoundly relaxed. Your whole body is becoming more and more relaxed.

Now direct your thoughts to your chest and allow all the muscles within your chest to relax. As these muscles relax, your breathing becomes deep --- and --- easy --- and --- regular. Relaxed --- fully relaxed.

Now think of your arms and your hands and allow all the muscles in your arms and your hands to relax. Concentrate very carefully on your hands and become aware of any sensations that you might feel in your hands. As all the muscles in your hands relax, you may notice a slight tingling sensation or a slight numbness in your hands. This is such a pleasant sense of relaxation in your hands. Feel all the muscles within your hands relaxing --- relaxed --- fully relaxed.

Now imagine that this warm, soothing feeling of relaxation is spreading from your hands up your arms to your elbows so that all the muscles in the lower part of your arms are relaxing. From your elbows, the relaxation is spreading up your arms into your shoulders --- spreading into your neck --- deep, deep within your back. Relaxed --- fully relaxed.

Now direct your attention to the back of your head. Become aware of the support against the back of your head. Feel how gently, yet firmly your head is supported.

Now think of the top of your head, your scalp, and imagine that whatever tension is there is rapidly vanishing. Your scalp is becoming less and less tight and the very top of your head is relaxing.

Now think of your face and all the small muscle groups within your face and allow these muscles to relax. Think of your forehead --- your eyes --- and all the tiny muscles around your eyes. Think of your cheeks and all the small muscles around your mouth --- allow all these muscles to relax --- relax --- fully relaxed.

Your whole body is now very relaxed. It feels so restful --- so pleasant to be fully relaxed. You are now very relaxed and you feel a warm, heaviness coming all over your body --- just like when you go to sleep. Relax and sleep --- deeply --- soundly.

Awakening Procedure

Continue to relax, deeply --- soundly, until I begin to count. When I begin to count, you'll begin to wake up slowly --- so that by the time I reach the count of 10 you'll be wide awake and alert. You'll be free of all discomfort and wake up feeling very happy --- relaxed and refreshed. Now I shall begin counting and at the count of 10 you'll be wide awake and alert. ---1 ---2 ---3 ---4 ---5 ---6 ---7 ---8 ---9 ---10. Open your eyes --- wide awake and alert.

C. Cautions To Be Observed While Using Any Relaxation Technique

1. Control the environment. Provide a space which is free from distractions, maintains a constant temperature and is dimly lit.
2. Always use a complete awakening procedure.
3. Follow a carefully predetermined outline of the relaxation protocol. All scripts which are used should be memorized or read.
4. Word all instructions carefully. An individual who is relaxed interprets instructions literally.

5. Maintain control and remain calm.
6. Individuals who wear contact lenses may experience some discomfort if their eyes remained closed for an extended period of time. Inform these individuals of appropriate methods to counteract the discomfort.

D. Suggested Readings

Benson, H. The Relaxation Response. New York: William Morrow and Company, Inc., 1975.

Frederick, A. B. "Tension Control" Journal of Health, Physical Education and Recreation, 38: 42-44, 78-80, 1967.

Jacobson, E. Progressive Relaxation. Chicago: The University of Chicago Press, 1938.

Jacobson, E. Self-Operation Control. Philadelphia: J. B. Lippincott Company, 1964.

Rathbone, J. L. Relaxation. Philadelphia: Lea and Febiger, 1969.

Selye, H. The Stress of Life. New York: McGraw-Hill Book Company, 1956.

Tappan, F. M. Massage Techniques. New York: Macmillan Publishing Company, Inc., 1961.

APPENDIX B
INSTRUMENTS

LEISURE ATTITUDES SURVEY

Below are sixteen 7-point scales each referring to a word pair. Use these scales to describe what leisure means to you. (Leisure is that free time from work, chores, eating, sleeping, etc.)

The scale points indicate the following:

- 1 = extremely
 2 = quite
 3 = slightly
 4 = neutral or unrelated
 5 = slightly
 6 = quite
 7 = extremely

Put a circle around that point on the scale which best describes what Leisure presently means to you. For example, if the word pair is

fragrant 1 (2) 3 4 5 6 7 foul

and you feel that leisure is presently quite fragrant to you, you would circle 2 on the scale; on the other hand, if you feel that leisure presently is extremely foul to you, you would have circled 7 on the scale.

WORD PAIRS

Generally speaking, presently my Leisure is:

- | | | | | | | | | | |
|------|------------|---|---|---|---|---|---|---|--------------|
| (1) | boring | 1 | 2 | 3 | 4 | 5 | 6 | 7 | interesting |
| (2) | empty | 1 | 2 | 3 | 4 | 5 | 6 | 7 | full |
| (3) | passive | 1 | 2 | 3 | 4 | 5 | 6 | 7 | active |
| (4) | solitary | 1 | 2 | 3 | 4 | 5 | 6 | 7 | social |
| (5) | refreshing | 1 | 2 | 3 | 4 | 5 | 6 | 7 | tiring |
| (6) | meaningful | 1 | 2 | 3 | 4 | 5 | 6 | 7 | meaningless |
| (7) | satisfying | 1 | 2 | 3 | 4 | 5 | 6 | 7 | unsatisfying |
| (8) | desirable | 1 | 2 | 3 | 4 | 5 | 6 | 7 | undesirable |
| (9) | good | 1 | 2 | 3 | 4 | 5 | 6 | 7 | bad |
| (10) | pleasant | 1 | 2 | 3 | 4 | 5 | 6 | 7 | unpleasant |
| (11) | sweet | 1 | 2 | 3 | 4 | 5 | 6 | 7 | sour |
| (12) | honest | 1 | 2 | 3 | 4 | 5 | 6 | 7 | dishonest |
| (13) | nice | 1 | 2 | 3 | 4 | 5 | 6 | 7 | awful |
| (14) | necessary | 1 | 2 | 3 | 4 | 5 | 6 | 7 | unnecessary |
| (15) | valuable | 1 | 2 | 3 | 4 | 5 | 6 | 7 | worthless |
| (16) | deep | 1 | 2 | 3 | 4 | 5 | 6 | 7 | shallow |

CONFIDENTIAL

NAME: _____ AGE: _____ SEX: M F
 MARITAL STATUS: _____ RELIGION (Optional): _____
 OCCUPATION: _____ EDUCATION: _____ years

WORK ATTITUDES SURVEY

Below are sixteen 7-point scales each referring to a word pair. Use these scales to describe what work means to you.

The scale points indicate the following:

- 1 = extremely
- 2 = quite
- 3 = slightly
- 4 = neutral or unrelated
- 5 = slightly
- 6 = quite
- 7 = extremely

Put a circle around that point on the scale which best describes what work presently means to you. For example, if the word pair is

fragrant 1 (2) 3 4 5 6 7 foul

and you feel that work is presently quite fragrant to you, you would circle 2 on the scale; on the other hand, if you feel that work presently is extremely foul to you, you would have circled 7 on the scale.

WORD PAIRS

Generally speaking, presently by Work is:

(1)	boring	1	2	3	4	5	6	7	interesting
(2)	empty	1	2	3	4	5	6	7	full
(3)	passive	1	2	3	4	5	6	7	active
(4)	solitary	1	2	3	4	5	6	7	social
(5)	refreshing	1	2	3	4	5	6	7	tiring
(6)	meaningful	1	2	3	4	5	6	7	meaningless
(7)	satisfying	1	2	3	4	5	6	7	unsatisfying
(8)	desirable	1	2	3	4	5	6	7	undesirable
(9)	good	1	2	3	4	5	6	7	bad
(10)	pleasant	1	2	3	4	5	6	7	unpleasant
(11)	sweet	1	2	3	4	5	6	7	sour
(12)	honest	1	2	3	4	5	6	7	dishonest
(13)	nice	1	2	3	4	5	6	7	awful
(14)	necessary	1	2	3	4	5	6	7	unnecessary
(15)	valuable	1	2	3	4	5	6	7	worthless
(16)	deep	1	2	3	4	5	6	7	shallow

CONTINUE

NAME: _____ AGE: _____ SEX: M F
 MARITAL STATUS: _____ RELIGION (Optional): _____
 OCCUPATION: _____ EDUCATION: _____ years

WORK SELF-CONCEPT SURVEY

HOW WOULD YOU PRESENTLY DESCRIBE YOURSELF IN WORK?

Put a check (✓) after each statement, in the column that best describes YOU, in your present work/job involvements.

	MOST OF THE TIME	OFTEN	OCCASIONALLY	INFREQUENTLY	PRACTICALLY NEVER
1. I am happy					
2. I am satisfied					
3. I am hesitant					
4. I am bored					
5. I am uncreative					
6. I am independent					
7. I am restless					
8. I am playful					
9. I am certain					
10. I am obligated					
11. I am flighty					
12. I am creative					
13. I am anxious					
14. I am procrastinating					
15. I am sure					
16. I am active					
17. I am unsatisfied					
18. I am interested					
19. I am stable					
20. I am unobligated					
21. I am sad					
22. I am dependent					
23. I am motivated					
24. I am confident					
25. I am uncertain					
26. I am stimulated					
27. I am incapable					
28. I am unsure					
29. I am passive					
30. I am depressed					
31. I am enthusiastic					
32. I am capable					
33. I am lazy					
34. I am accomplishing					

LEISURE SATISFACTION QUESTIONNAIRE

Ask yourself: How satisfied am I with this particular aspect of my Leisure experience(s)? (Leisure is that free time from work, chores, sleeping, eating, etc.)

For each of the following statements, check (✓) only that response which best describes how you feel about that particular aspect of your leisure experience(s).

Not satisfied — This aspect of my leisure experience is much poorer than I would like it to be.

Only slightly satisfied — This aspect of my leisure experience is not quite what I would like it to be.

Satisfied — This aspect of my leisure experience is what I would like it to be.

Very satisfied — This aspect of my leisure experience is better than I expected it to be.

Extremely satisfied — This aspect of my leisure experience is much better than I hoped it could be.

In my present Leisure experience(s), this is how I feel about:	<u>Not satisfied</u>	<u>Only slightly satisfied</u>	<u>satisfied</u>	<u>Very satisfied</u>	<u>Extremely satisfied</u>
1. The enjoyment I get	_____	_____	_____	_____	_____
2. The feelings of accomplishment I get	_____	_____	_____	_____	_____
3. How well I plan to participate	_____	_____	_____	_____	_____
4. The experience, compared to what I think others would feel	_____	_____	_____	_____	_____
5. The opportunity to develop my personal skill and ability	_____	_____	_____	_____	_____
6. The freedom to use my own judgement and make my own choices	_____	_____	_____	_____	_____
7. How well my talents and capabilities are expressed	_____	_____	_____	_____	_____
8. The opportunity for socialization	_____	_____	_____	_____	_____
9. The opportunity to learn more about myself	_____	_____	_____	_____	_____
10. The confidence it gives me	_____	_____	_____	_____	_____
11. The chance to do different things from time to time	_____	_____	_____	_____	_____
12. Where I participate	_____	_____	_____	_____	_____
13. The chance to feel like "somebody"	_____	_____	_____	_____	_____

In my present Leisure experience(s) this is how I feel about:	Not satisfied	Only slightly satisfied	satisfied	Very satisfied	Extremely satisfied
14. The recognition I get from others	_____	_____	_____	_____	_____
15. Being able to keep active and stimulated	_____	_____	_____	_____	_____
16. The opportunity to develop close friendship with others	_____	_____	_____	_____	_____
17. How much time I am able to devote	_____	_____	_____	_____	_____
18. How much I must plan	_____	_____	_____	_____	_____
19. How satisfied my family, mate, or friend(s) are for me to participate	_____	_____	_____	_____	_____
20. How genuinely me and honest I am able to be	_____	_____	_____	_____	_____
21. Being relaxed from work, chores, duties, worries, etc.	_____	_____	_____	_____	_____
22. The opportunity to do something that makes use of my abilities	_____	_____	_____	_____	_____
23. The chance to use my creativity and imagination	_____	_____	_____	_____	_____
24. The chance to be independent	_____	_____	_____	_____	_____
25. The chance to do what I want	_____	_____	_____	_____	_____
26. The possible opportunity I may have to help others	_____	_____	_____	_____	_____

CONFIDENTIAL

NAME: _____ AGE: _____ SEX: M F

MARITAL STATUS: _____ RELIGION (Optional): _____

OCCUPATION: _____ EDUCATION: _____ years

If STUDENT, specify major: _____

LEISURE SELF-CONCEPT SURVEY

HOW WOULD YOU PRESENTLY DESCRIBE YOURSELF IN LEISURE?

Put a check (✓) after each statement, in the column that best describes YOU, in your present leisure involvements (that free time from work, school, sleeping, eating, etc.).

	MOST OF THE TIME	OFTEN	OCCASIONALLY	INFREQUENTLY	PRACTICALLY NEVER
1. I am happy					
2. I am satisfied					
3. I am hesitant					
4. I am bored					
5. I am uncreative					
6. I am independent					
7. I am restless					
8. I am playful					
9. I am certain					
10. I am obligated					
11. I am flighty					
12. I am creative					
13. I am anxious					
14. I am procrastinating					
15. I am sure					
16. I am active					
17. I am unsatisfied					
18. I am interested					
19. I am stable					
20. I am unobligated					
21. I am sad					
22. I am dependent					
23. I am motivated					
24. I am confident					
25. I am uncertain					
26. I am stimulated					
27. I am incapable					
28. I am unsure					
29. I am passive					
30. I am depressed					
31. I am enthusiastic					
32. I am capable					
33. I am lazy					
34. I am accomplishing					

SELF LEISURE INTEREST PROFILE

This survey offers you the opportunity to communicate your own leisure interests — the activities in which you already participate in your "free time" (that time off from work, household chores, eating, sleeping, etc.) and the activities in which you desire to participate. The survey is not a test, and there are no right or wrong answers.

Directions

On each sheet is a list of leisure interests which are representative of certain areas of leisure, such as Sports, Crafts, etc. Please read the following directions before proceeding.

PRESENT — Circle (for Much) or (for Some) for only those activities in which you presently participate. Leave any activity blank if you do not participate in it. (See "Note" for Much and Some below)

When you have finished identifying your **PRESENT** leisure interests, GO BACK and **RANK** (1), on the line provided next to each activity, only those 10 interests in which you presently have the most interest. A 1 will identify that interest in which you have the most interest. A 2 will identify your next highest interest. A 10 (if needed) will identify your tenth highest interest.

DESIRED — Circle (for Much) or (for Some) for only those activities in which you desire to participate, but feel that something is preventing you from doing it now or in the near future. Leave any activity blank if you do not desire to participate in it. (See "Note" for Much and Some below)

When you have finished identifying your **DESIRED** leisure interests, GO BACK and **RANK** (2), on the line provided next to each activity, only those 10 interests in which you have the most desire to do. A 1 will identify that interest in which you have the most desire. A 2 will identify your next highest desire. A 10 (if needed) will identify your tenth highest desire.

When you have finished, please fill out the remaining information on the back of each sheet.

NOTE

Use the following guide in determining whether your involvement in an activity is or would be Much or Some. In many instances, making such a decision will depend upon the activity and/or the importance of the activity to you.

MUCH — Quite regularly; weekly; daily; every other day; a devoted effort to do often, as in a hobby, or when in season, such as skiing in Winter; all the time as when a leisure interest may closely be a vocation (work interest)

SOME — Infrequently; non-regularly; every now-and-then; generally an easy going decision of doing when feel like doing

SELF LEISURE INTEREST PROFILE — GAMES

PRESENT		DESIRES			PRESENT		DESIRES	
R			R		R			R
___	M S	M S	___	<u>Active Games</u>	___	M S	M S	___
___	M S	M S	___	Running: tag, chase	___	M S	M S	___
___	M S	M S	___	Catch	___	M S	M S	___
___	M S	M S	___	Frisbee	___	M S	M S	___
___	M S	M S	___	<u>Target & Skill</u>	___	M S	M S	___
___	M S	M S	___	Table Sports	___	M S	M S	___
___	M S	M S	___	Darts, Jarts	___	M S	M S	___
___	M S	M S	___	Horseshoes	___	M S	M S	___
___	M S	M S	___	Tiddly winks	___	M S	M S	___
___	M S	M S	___	Pool, billiards	___	M S	M S	___
___	M S	M S	___	Shuffleboard	___	M S	M S	___
___	M S	M S	___	Marbles	___	M S	M S	___
___	M S	M S	___	<u>Table & Board</u>	___	M S	M S	___
___	M S	M S	___	Children's board games	___	M S	M S	___
___	M S	M S	___	Bingo	___	M S	M S	___
___	M S	M S	___	Dice games	___	M S	M S	___
___	M S	M S	___	Roulette	___	M S	M S	___
___	M S	M S	___	Tantrix	___	M S	M S	___
___	M S	M S	___	Paranecmi	___	M S	M S	___
___	M S	M S	___	Chinese checkers	___	M S	M S	___
___	M S	M S	___	Monopoly	___	M S	M S	___
___	M S	M S	___	Chess	___	M S	M S	___
___	M S	M S	___	Checkers	___	M S	M S	___
___	M S	M S	___	<u>Cards</u>	___	M S	M S	___
___	M S	M S	___	Solitaires	___	M S	M S	___
___	M S	M S	___	Cribbage	___	M S	M S	___
___	M S	M S	___	Gin Rummy	___	M S	M S	___
___	M S	M S	___	Rummy	___	M S	M S	___
___	M S	M S	___	Hearts	___	M S	M S	___
___	M S	M S	___	Black Jack	___	M S	M S	___
___	M S	M S	___	Canasta	___	M S	M S	___
___	M S	M S	___	Poker	___	M S	M S	___
___	M S	M S	___	Whist	___	M S	M S	___
___	M S	M S	___	Bridge	___	M S	M S	___
___	M S	M S	___	Sheepshead	___	M S	M S	___
___	M S	M S	___	Pinochle	___	M S	M S	___
___	M S	M S	___	<u>Knowledge & Word</u>	___	M S	M S	___
___	M S	M S	___	Paper & pencil (tic-tac-toe, etc.)	___	M S	M S	___
___	M S	M S	___	Guessing	___	M S	M S	___
___	M S	M S	___	Spelling	___	M S	M S	___
___	M S	M S	___	Scrabble	___	M S	M S	___
___	M S	M S	___	Charades	___	M S	M S	___
___	M S	M S	___	General knowledge (proverbs, etc.)	___	M S	M S	___
___	M S	M S	___	Memory (Brainstorm, etc.)	___	M S	M S	___
___	M S	M S	___	<u>Puzzles</u>	___	M S	M S	___
___	M S	M S	___	Jigsaw	___	M S	M S	___
___	M S	M S	___	Crosswords	___	M S	M S	___
___	M S	M S	___	Mathematical	___	M S	M S	___
___	M S	M S	___	Mechanical	___	M S	M S	___
___	M S	M S	___	Brain teasers	___	M S	M S	___
___	M S	M S	___	<u>Model Racing (cars, boats, planes, etc.)</u>	___	M S	M S	___
___	M S	M S	___	<u>Others</u>	___	M S	M S	___
___	M S	M S	___	Dominoes	___	M S	M S	___
___	M S	M S	___	Computer games	___	M S	M S	___
___	M S	M S	___	Quija	___	M S	M S	___
___	M S	M S	___	Real Life simulation	___	M S	M S	___
___	M S	M S	___	_____	___	M S	M S	___
___	M S	M S	___	_____	___	M S	M S	___
___	M S	M S	___	_____	___	M S	M S	___

You have just finished reviewing 8 broad categories of GAMES (this includes the category "Others"). These categories are listed below. Please rank them according to your personal interest in them. A 1 will mean this category has the highest interest to you in relation to the others. A 2 will mean the next highest interest, etc. The category which has the least interest to you should be ranked 8.

Rank:

___	Active Games	___	Knowledge & Word
___	Target & Skill	___	Puzzles
___	Table & Board	___	Model Racing
___	Cards	___	Others

CONFIDENTIAL

NAME: _____ AGE: _____ SEX: M F
 MARITAL STATUS: _____ RELIGION (Optional): _____
 OCCUPATION: _____ EDUCATION: _____ years
 IF STUDENT, specify major: _____

<u>PRESENT</u>			<u>DESIRE</u>			<u>PRESENT</u>			<u>DESIRE</u>		
<u>P</u>	<u>1</u>	<u>2</u>	<u>P</u>	<u>1</u>	<u>2</u>	<u>P</u>	<u>1</u>	<u>2</u>	<u>P</u>	<u>1</u>	<u>2</u>
<u>Combative</u>						<u>Racing</u>					
___	M	S	___	M	S	___	M	S	___	M	S
___	M	S	___	M	S	___	M	S	___	M	S
___	M	S	___	M	S	___	M	S	___	M	S
___	M	S	___	M	S	___	M	S	___	M	S
___	M	S	___	M	S	___	M	S	___	M	S
___	M	S	___	M	S	___	M	S	___	M	S
<u>Team</u>						<u>Others</u>					
___	M	S	___	M	S	___	M	S	___	M	S
___	M	S	___	M	S	___	M	S	___	M	S
___	M	S	___	M	S	___	M	S	___	M	S
___	M	S	___	M	S	___	M	S	___	M	S
___	M	S	___	M	S	___	M	S	___	M	S
___	M	S	___	M	S	___	M	S	___	M	S
___	M	S	___	M	S	___	M	S	___	M	S
___	M	S	___	M	S	___	M	S	___	M	S
___	M	S	___	M	S	___	M	S	___	M	S
___	M	S	___	M	S	___	M	S	___	M	S
___	M	S	___	M	S	___	M	S	___	M	S
___	M	S	___	M	S	___	M	S	___	M	S
___	M	S	___	M	S	___	M	S	___	M	S
___	M	S	___	M	S	___	M	S	___	M	S
___	M	S	___	M	S	___	M	S	___	M	S
___	M	S	___	M	S	___	M	S	___	M	S
___	M	S	___	M	S	___	M	S	___	M	S
___	M	S	___	M	S	___	M	S	___	M	S

You have just finished reviewing 3 broad categories of SPORTS (this includes the category "Others"). These categories are listed below. Please rank them according to your personal interest in them. A 1 will mean this category has the highest interest to you in relation to the others. A 2 will mean the next highest interest, etc. The category which has the least interest to you should be ranked 6.

Rank:

___ Professional Sports Observation	___ Combative
___ Individual Non-Competitive	___ Team
___ Individual Competitive	___ Racing
___ Dual	___ Others

CONFIDENTIAL

NAME: _____ AGE: _____ SEX: M F

MARITAL STATUS: _____ RELIGION (Optional): _____

OCCUPATION: _____ EDUCATION: _____ years

If, STUDENT, specify major: _____

<u>PRESENT</u>		<u>DESIRE</u>			<u>PRESENT</u>		<u>DESIRE</u>		
<u>P</u>	<u>S</u>	<u>P</u>	<u>S</u>		<u>P</u>	<u>S</u>	<u>P</u>	<u>S</u>	
				Natural Science (continued)					Others
___	M S	___	M S	Conservation or ecology	___	M S	___	M S	_____
___	M S	___	M S	Geology	___	M S	___	M S	_____
___	M S	___	M S	Physics	___	M S	___	M S	_____
___	M S	___	M S	Zoology, including ornithology, entomology, ichthyology, etc.	___	M S	___	M S	_____

You have just finished reviewing 10 broad categories of NATURE (this includes the category "Others"). These categories are listed below. Please rank them according to your personal interest in them. A 1 will mean this category has the highest interest to you in relation to the others. A 2 will mean the next highest interest, etc. The category which has the least interest to you should be ranked 10.

Rank:

- | | | | |
|-----|--|-----|---|
| ___ | Passive Enjoyment of
Scenery & Wildlife | ___ | Hunting |
| ___ | Observation, Exploration
or Discovery | ___ | Raising, Caring For, &
Breeding of Plants |
| ___ | Gathering Wild Plant Foods | ___ | Animal Care, Training,
Breeding & Exhibiting |
| ___ | Camping | ___ | Natural Science |
| ___ | Fishing | ___ | Others |

CONFIDENTIAL

NAME: _____ AGE: _____ SEX: M F

MARITAL STATUS: _____ RELIGION (Optional): _____

OCCUPATION: _____ EDUCATION: _____ years

IF STUDENT, specify major: _____

SELF LEISURE INTEREST PROFILE — COLLECTION

PRESENT		DESIRE				PRESENT		DESIRE			
R		R		R		R		R		R	
—	M S	M S	—	—		—	M S	M S	—	—	Dolls
—	M S	M S	—	—		—	M S	M S	—	—	Antique
—	M S	M S	—	—		—	M S	M S	—	—	Bride
—	M S	M S	—	—		—	M S	M S	—	—	Ethnic
—	M S	M S	—	—		—	M S	M S	—	—	Celluloid
—	M S	M S	—	—		—	M S	M S	—	—	China
—	M S	M S	—	—		—	M S	M S	—	—	Paper
—	M S	M S	—	—		—	M S	M S	—	—	Rag
—	M S	M S	—	—		—	M S	M S	—	—	Rubber & wax
—	M S	M S	—	—		—	M S	M S	—	—	Art Objects
—	M S	M S	—	—		—	M S	M S	—	—	Books
—	M S	M S	—	—		—	M S	M S	—	—	China
—	M S	M S	—	—		—	M S	M S	—	—	Glass
—	M S	M S	—	—		—	M S	M S	—	—	Paintings, drawings, etc
—	M S	M S	—	—		—	M S	M S	—	—	Photographs
—	M S	M S	—	—		—	M S	M S	—	—	Records, old 78's
—	M S	M S	—	—		—	M S	M S	—	—	Sculpture
—	M S	M S	—	—		—	M S	M S	—	—	Antiques
—	M S	M S	—	—		—	M S	M S	—	—	Books and documents
—	M S	M S	—	—		—	M S	M S	—	—	Cars
—	M S	M S	—	—		—	M S	M S	—	—	Clocks
—	M S	M S	—	—		—	M S	M S	—	—	Dishes, glass, bottles
—	M S	M S	—	—		—	M S	M S	—	—	Furniture
—	M S	M S	—	—		—	M S	M S	—	—	Photographs
—	M S	M S	—	—		—	M S	M S	—	—	Toys
—	M S	M S	—	—		—	M S	M S	—	—	Weapons
—	M S	M S	—	—		—	M S	M S	—	—	Others
—	M S	M S	—	—		—	M S	M S	—	—	Almanacs
—	M S	M S	—	—		—	M S	M S	—	—	Buttons
—	M S	M S	—	—		—	M S	M S	—	—	Calendars
—	M S	M S	—	—		—	M S	M S	—	—	Match covers
—	M S	M S	—	—		—	M S	M S	—	—	Recipes
—	M S	M S	—	—		—	M S	M S	—	—	Firearms
—	M S	M S	—	—		—	M S	M S	—	—	Swords & knives
—	M S	M S	—	—		—	M S	M S	—	—	_____
—	M S	M S	—	—		—	M S	M S	—	—	_____
—	M S	M S	—	—		—	M S	M S	—	—	_____

You have just finished reviewing 9 broad categories of COLLECTION (this includes the category "Others"). These categories are listed below. Please rank them according to your personal interest in them. A 1 will mean this category has the highest interest to you in relation to the others. A 2 will mean the next highest interest, etc. The category which has the least interest to you should be ranked 9.

Rank:

_____ Autographs, Photographs, & Posters	_____ Dolls
_____ Coin & Medal	_____ Art Objects
_____ Stamps	_____ Antiques
_____ Natural Objects	_____ Others
_____ Models	

CONFIDENTIAL

NAME: _____ AGE: _____ SEX: M F

MARITAL STATUS: _____ RELIGION (Optional): _____

OCCUPATION: _____ EDUCATION: _____ years

If STUDENT, specify major: _____

SELF LEISURE INTEREST PROFILE — CRAFTS

PRESENT		DESIRED			PRESENT		DESIRED		
R	S	R	S		R	S	R	S	
—	M S	M S	—	Cooking & Food	—	M S	M S	—	Sports & games repair
—	M S	M S	—	General special desserts	—	M S	M S	—	<u>Paper</u>
—	M S	M S	—	Preserving	—	M S	M S	—	Scrapbooks
—	M S	M S	—	Ethnic specialties	—	M S	M S	—	Silhouettes
—	M S	M S	—	Party & holiday foods	—	M S	M S	—	Crepe paper
—	M S	M S	—	Sausage making	—	M S	M S	—	Papier-mache sculpture
—	M S	M S	—	Wine, beer making	—	M S	M S	—	Origami, paper folding
—	M S	M S	—	<u>Decorating</u>	—	M S	M S	—	Card making
—	M S	M S	—	Floral arrangements	—	M S	M S	—	Bookbinding
—	M S	M S	—	Small objects	—	M S	M S	—	<u>Leather & Textile</u>
—	M S	M S	—	Table setting and centerpiece making	—	M S	M S	—	Clothing making
—	M S	M S	—	Holiday displays	—	M S	M S	—	Felt crafts
—	M S	M S	—	Window displays	—	M S	M S	—	Leather crafts
—	M S	M S	—	General interior	—	M S	M S	—	Drapery making
—	M S	M S	—	<u>Interlacing & Interlocking</u>	—	M S	M S	—	Sewing
—	M S	M S	—	Basketweaving & wickerwork	—	M S	M S	—	Reupholstering
—	M S	M S	—	Macrame	—	M S	M S	—	<u>Wood & Metal</u>
—	M S	M S	—	Flytying	—	M S	M S	—	Whittling
—	M S	M S	—	Quilting	—	M S	M S	—	Woodburning
—	M S	M S	—	Hooked, braided or woven rugs	—	M S	M S	—	General carpentry
—	M S	M S	—	Crocheting	—	M S	M S	—	Metal decorative crafts (jewelry, brass, etc.)
—	M S	M S	—	Knitting	—	M S	M S	—	<u>Handy Men</u>
—	M S	M S	—	Lacework and embroidery, tapestry	—	M S	M S	—	General do-it-yourself
—	M S	M S	—	Weaving	—	M S	M S	—	House painting
—	M S	M S	—	Needlepoint	—	M S	M S	—	Repairing, staining, furniture
—	M S	M S	—	Crewel	—	M S	M S	—	Plumbing
—	M S	M S	—	<u>Toy, Model & Kit Assembly</u>	—	M S	M S	—	Appliance repair
—	M S	M S	—	Doll, puppet & marionette projects	—	M S	M S	—	Automobile maintenance
—	M S	M S	—	Scale model projects	—	M S	M S	—	Electrical work
—	M S	M S	—	Model kits (ships, etc.)	—	M S	M S	—	<u>Others</u>
—	M S	M S	—	Electronic kits	—	M S	M S	—	Collage and decoupage
—	M S	M S	—	Layouts for model trains, cars, etc.	—	M S	M S	—	Candlemaking
—	M S	M S	—		—	M S	M S	—	Mosaics
—	M S	M S	—		—	M S	M S	—	Kits making
—	M S	M S	—		—	M S	M S	—	Musical instrument making
—	M S	M S	—		—	M S	M S	—	Shadow boxes

	<u>PRESENT</u>	<u>DESIRE</u>		
<u>R</u>			<u>1</u>	<u>2</u>
	M S	M S	_____	_____
_____	M S	M S	_____	_____
_____	M S	M S	_____	_____
_____	M S	M S	_____	_____

Other (continued)

You have just finished reviewing 9 broad categories of CRAFTS (this includes the category "Others"). These categories are listed below. Please rank them according to your personal interest in them. A 1 will mean this category has the highest interest to you in relation to the others. A 2 will mean the next highest interest, etc. The category which has the least interest to you should be ranked 9.

Ranks:

- | | | | |
|-------|----------------------------|-------|-------------------|
| _____ | Cooking & Food | _____ | Leather & Textile |
| _____ | Decorating | _____ | Wood & Metal |
| _____ | Interlacing & Interlocking | _____ | Handy Man |
| _____ | Toy, Model & Kit Assembly | _____ | Others |
| _____ | Paper | | |

CONFIDENTIAL

NAME: _____ AGE: _____ SEX: M F

MARITAL STATUS: _____ RELIGION (Optional): _____

OCCUPATION: _____ EDUCATION: _____ years

If STUDENT, specify major: _____

SELF LEISURE INTEREST PROFILE — ART and MUSIC

PRESENT		DESIRE			PRESENT		DESIRE		
<u>1</u>	<u>2</u>	<u>1</u>	<u>2</u>		<u>1</u>	<u>2</u>	<u>1</u>	<u>2</u>	
—	M S	M S	—	—	M S	M S	—	Photography	Stone sculpture
—	M S	M S	—	—	M S	M S	—	Snapshot or Polaroid picture taking	<u>Drama</u>
—	M S	M S	—	—	M S	M S	—	Family movies, slides	Improvisation
—	M S	M S	—	—	M S	M S	—	Special interest photographs	Monologues, joke
—	M S	M S	—	—	M S	M S	—	Developing film	Pantomime, mime
—	M S	M S	—	—	M S	M S	—	Enlargement and reproduction	Shadow, puppet shows
—	M S	M S	—	—	M S	M S	—	Special techniques photography	Psychodramas, role playing
—	M S	M S	—	—	M S	M S	—	Contest entering or free lance	Choral speaking
—	M S	M S	—	—	M S	M S	—	<u>Drawing & Painting</u>	Stage acting
—	M S	M S	—	—	M S	M S	—	Stenciling	Play production, direction
—	M S	M S	—	—	M S	M S	—	Lettering or lithographing	Operettas, musicals
—	M S	M S	—	—	M S	M S	—	Etching	<u>Dance</u>
—	M S	M S	—	—	M S	M S	—	Drafting & design	Rhythmic exercises
—	M S	M S	—	—	M S	M S	—	Cartoon & caricature	Popular dancing
—	M S	M S	—	—	M S	M S	—	Clothes design	Ballroom dancing
—	M S	M S	—	—	M S	M S	—	Sketching landscapes, still life, etc.	Square dancing
—	M S	M S	—	—	M S	M S	—	Sketching portraits	Folk dancing (polka)
—	M S	M S	—	—	M S	M S	—	<u>Painting</u>	Tap dancing
—	M S	M S	—	—	M S	M S	—	Finger	Modern interpretive
—	M S	M S	—	—	M S	M S	—	Abstract	Ballet
—	M S	M S	—	—	M S	M S	—	Op and pop art	<u>Music</u>
—	M S	M S	—	—	M S	M S	—	Surrealistic	Informal percussion playing
—	M S	M S	—	—	M S	M S	—	Landscape, still life	Solo singing
—	M S	M S	—	—	M S	M S	—	Portrait	Solo instrument playing
—	M S	M S	—	—	M S	M S	—	<u>Sculpture & Carving</u>	Informal group singing or playing
—	M S	M S	—	—	M S	M S	—	Clay, putty modeling	Formal singing groups (Choir, quartets, etc.)
—	M S	M S	—	—	M S	M S	—	Snow & ice sculpture	Formal music group (band, orchestra, etc.)
—	M S	M S	—	—	M S	M S	—	Wax & soap carving	Conducting, arranging choral groups
—	M S	M S	—	—	M S	M S	—	Wood, ivory, bone carving	Conducting, arranging instrumental groups
—	M S	M S	—	—	M S	M S	—	Plastic, glass sculpture	Writing song lyrics
—	M S	M S	—	—	M S	M S	—	Ceramics	Writing music for songs
—	M S	M S	—	—	M S	M S	—	Metal, wire sculpture	

<u>PRESENT</u>		<u>DESIRE</u>			<u>PRESENT</u>		<u>DESIRE</u>		
<u>R</u>			<u>P</u>		<u>R</u>			<u>P</u>	
	M	S	M	S		M	S	M	S
___					___				
	M	S	M	S		M	S	M	S
___					___				
	M	S	M	S		M	S	M	S
___					___				
	M	S	M	S		M	S	M	S
___					___				
	M	S	M	S		M	S	M	S
___					___				
	M	S	M	S		M	S	M	S
___					___				
	M	S	M	S		M	S	M	S
___					___				

You have just finished reviewing 9 broad categories of ART and MUSIC (this includes the category "Others"). These categories are listed below. Please rank them according to your personal interest in them. A 1 will mean this category has the highest interest to you in relation to the others. A 2 will mean the next highest interest, etc. The category which has the least interest to you should be ranked 9.

Rank:

___	Photography	___	Dance
___	Drawing & Printing	___	Music
___	Painting	___	Writing
___	Sculpture & Carving	___	Others
___	Drama		

CONFIDENTIAL

NAME: _____ AGE: _____ SEX: M F

MARITAL STATUS: _____ RELIGION (Optional): _____

OCCUPATION: _____ EDUCATION: _____ years

If STUDENT, specify major: _____

SELF LEISURE INTEREST PROFILE — EDUCATIONAL, ENTERTAINMENT, and CULTURAL

<u>PRESENT</u>		<u>DESIRE</u>			<u>PRESENT</u>		<u>DESIRE</u>		
<u>R</u>			<u>R</u>		<u>R</u>			<u>R</u>	
___	M S	M S	___	<u>Radio Listening</u>	___	M S	M S	___	Science fiction
___	M S	M S	___	General news, weather	___	M S	M S	___	Comics
___	M S	M S	___	Interview, talk shows	___	M S	M S	___	Non-fiction
___	M S	M S	___	Popular, rock'n roll	___	M S	M S	___	Literary review clubs
___	M S	M S	___	Broadway shows	___	M S	M S	___	Poetry
___	M S	M S	___	Jazz and blues	___	M S	M S	___	<u>Art & Music</u>
___	M S	M S	___	Classical	___	M S	M S	___	Record, tape listening
___	M S	M S	___	Radio Mystery	___	M S	M S	___	Going to informal musical events
___	M S	M S	___	<u>Television Watching</u>	___	M S	M S	___	Going to formal musical events (symphony, etc.)
___	M S	M S	___	Soap operas, melodrama	___	M S	M S	___	Attending lectures, taking music courses
___	M S	M S	___	Comedies	___	M S	M S	___	Going to art festivals
___	M S	M S	___	Cartoons	___	M S	M S	___	Going to museums & public art galleries
___	M S	M S	___	Sports	___	M S	M S	___	Attending lectures, taking art courses
___	M S	M S	___	Movies and drama	___	M S	M S	___	<u>Traveling</u>
___	M S	M S	___	Talk, variety shows	___	M S	M S	___	Informal outings
___	M S	M S	___	News and commentary	___	M S	M S	___	Visiting relatives, friends, etc.
___	M S	M S	___	Quiz and game shows	___	M S	M S	___	Seasonal scenery
___	M S	M S	___	Documentaries	___	M S	M S	___	National, state parks
___	M S	M S	___	Educational broadcasts	___	M S	M S	___	Historical sites
___	M S	M S	___	<u>Entertainment & Drama</u>	___	M S	M S	___	Conservation centers (preserves, etc.)
___	M S	M S	___	Special amusements (fair, rodeo, etc.)	___	M S	M S	___	Inter-state
___	M S	M S	___	Special exhibitions	___	M S	M S	___	Foreign
___	M S	M S	___	Movie going	___	M S	M S	___	<u>Religious Activities</u>
___	M S	M S	___	Ballet, dance programs	___	M S	M S	___	Prayer, contemplation
___	M S	M S	___	Youth plays and drama	___	M S	M S	___	Home or group study
___	M S	M S	___	University or little theater	___	M S	M S	___	Radio services (& TV)
___	M S	M S	___	Professional theater	___	M S	M S	___	Church attendance
___	M S	M S	___	<u>Reading & Literature</u>	___	M S	M S	___	Pilgrimages & retreats
___	M S	M S	___	Newspapers	___	M S	M S	___	
___	M S	M S	___	Popular nontechnical magazines	___	M S	M S	___	
___	M S	M S	___	Special interest magazines	___	M S	M S	___	
___	M S	M S	___	Technical journals	___	M S	M S	___	
___	M S	M S	___	Fiction, plays	___	M S	M S	___	
___	M S	M S	___	Fiction, novels & short stories	___	M S	M S	___	

<u>PRESENT</u>			<u>DESIRE</u>			
<u>R</u>					<u>R</u>	
___	M S	M S	___			<u>Self-Development</u>
___	M S	M S	___			Figure control, exercises, sauna, sun bathing
___	M S	M S	___			Yoga, Meditation
___	M S	M S	___			Chara, poise courses
___	M S	M S	___			Reading improvement
___	M S	M S	___			Language, vocabulary improvement
___	M S	M S	___			Attending lectures on special subjects
___	M S	M S	___			Skill improvement courses
___	M S	M S	___			Academic courses
___			___			<u>Others</u>
___	M S	M S	___			Informal get togethers
___	M S	M S	___			Formal
___	M S	M S	___			Debata, public speaking
___	M S	M S	___			Special interest groups, clubs
___	M S	M S	___			Going to auctions swaps, etc.
___	M S	M S	___			Dining out
___	M S	M S	___			Night spot, pub going
___	M S	M S	___			_____
___	M S	M S	___			_____
___	M S	M S	___			_____

You have just finished reviewing 9 broad categories of EDUCATIONAL, ENTERTAINMENT, and CULTURAL (this includes the category "Others"). These categories are listed below. Please rank them according to your personal interest in them. A 1 will mean this category has the highest interest to you in relation to the others. A 2 will mean the next highest interest, etc. The category which has the least interest to you should be ranked 9.

Rank:

___ Radio Listening	___ Traveling
___ Television Watching	___ Religious Activities
___ Entertainment & Drama	___ Self-Development
___ Reading & Literature	___ Others
___ Art & Music Appreciation	

CONFIDENTIAL

NAME: _____ AGE: _____ SEX: M F

MARITAL STATUS: _____ RELIGION (Optional): _____

OCCUPATION: _____ EDUCATION: _____ years

If STUDENT, specify major: _____

NOTE ON PROFILE SHEET (SLIP)

The purpose of the Profile Sheet is to aid the counselor or researcher in establishing a data base of highly relevant, or considered by the client to be relatively important or valued, leisure interests both engaged in presently and/or desired in the future.

The Profile is obtained by listing the first 10 ranked leisure interests (M & S for each leisure area (such as Games, Sports, etc.)). At the counselor's or researcher's discretion, this Profile can be obtained for just Present leisure interests or Desired leisure interests, or both. In either case, the listing will be drawn from that column (Present or Desire) on the client's completed SLIP for the specific leisure area.

On the back of each SLIP leisure area the client is asked to rank the broad categories comprising that leisure area. Just the first 4 ranked categories are entered in the Profile Sheet. If more are deemed beneficial for counseling or research purposes, just add them to the Categories column on the Profile Sheet.

Totals are necessary for each Profile, Present and Desire. Totals represent numerical data for research purposes, as well as add to the data base needed to quantify SLIP, that is contribute to normative data for various populations or factors.

Scores for Much and Some are obtained for the first 10 ranked interests for each leisure area (this score is entered in the Totals box on the Profile Sheet on the LEFT side of the slash (/)), and scores for Much and Some are obtained for the Total number of interests identified on each completed leisure area (this score is entered in the Totals box on the Profile Sheet on the RIGHT side of the slash (/)).

The following formula is used to obtain scores for identified leisure interests:

Score for Much (first 10 ranked, and total number) = 2 X the number of interests identified Much within the first 10 ranked as well as within the total leisure area

Score for Some (first 10 ranked, and total number) = 1 X the number of interests identified Some within the first 10 ranked as well as within the total leisure area.

Example: In filling out the leisure area Sports, a client identified 15 interests as Present involvement Some, and 6 interests as Present involvement Much. In his 10 ranked Present interest involvements, 4 were identified as Much and the remaining 6 were identified as Some. Applying the above appropriate formula the scores are entered in the Totals box for Sports with the scores on the LEFT side of the slash representing the 10 ranked interests, and the scores on the Right side of the slash representing the total interests identified.

SPORTS: MUCH 8 / 12 SOME 6 / 15

If the Avocational Activities Inventory is utilized in counseling the leisure interests identified on the Profile Sheet can be coded, using the classification of the AAI. This coding can be obtained by using the Orange section of the Guide To Avocational Activities (Volume III of the AAI).

The flexibility of the Self Leisure Interest Profile is such that just a Profile may desired for Desires, or just for Present interests. Similarly, only one or any number of leisure areas may be requested. If this is so, just administer the specific area(s) and obtain a profile and score.

SLIP — PRESENT PROFILE

<u>GAMES</u>		<u>SPORTS</u>		<u>NATURE</u>	
<u>Interests</u>	<u>Categories</u>	<u>Interests</u>	<u>Categories</u>	<u>Interests</u>	<u>Categories</u>
1. _____	1. _____	1. _____	1. _____	1. _____	1. _____
2. _____	2. _____	2. _____	2. _____	2. _____	2. _____
3. _____	3. _____	3. _____	3. _____	3. _____	3. _____
4. _____	4. _____	4. _____	4. _____	4. _____	4. _____
5. _____		5. _____		5. _____	
6. _____		6. _____		6. _____	
7. _____		7. _____		7. _____	
8. _____		8. _____		8. _____	
9. _____		9. _____		9. _____	
10. _____		10. _____		10. _____	

<u>COLLECTION</u>		<u>CRAFTS</u>		<u>ART & MUSIC</u>	
<u>Interests</u>	<u>Categories</u>	<u>Interests</u>	<u>Categories</u>	<u>Interests</u>	<u>Categories</u>
1. _____	1. _____	1. _____	1. _____	1. _____	1. _____
2. _____	2. _____	2. _____	2. _____	2. _____	2. _____
3. _____	3. _____	3. _____	3. _____	3. _____	3. _____
4. _____	4. _____	4. _____	4. _____	4. _____	4. _____
5. _____		5. _____		5. _____	
6. _____		6. _____		6. _____	
7. _____		7. _____		7. _____	
8. _____		8. _____		8. _____	
9. _____		9. _____		9. _____	
10. _____		10. _____		10. _____	

EDUCATIONAL, ENTERTAINMENT,
& CULTURAL

<u>Interests</u>	<u>Categories</u>
1. _____	1. _____
2. _____	2. _____
3. _____	3. _____
4. _____	4. _____
5. _____	
6. _____	
7. _____	
8. _____	
9. _____	
10. _____	

<u>TOTALS</u>				
GAMES:	MUCH	____/____	SOME	____/____
SPORTS:	MUCH	____/____	SOME	____/____
NATURE:	MUCH	____/____	SOME	____/____
COLLECTION:	MUCH	____/____	SOME	____/____
CRAFTS:	MUCH	____/____	SOME	____/____
ART/MUSIC:	MUCH	____/____	SOME	____/____
EDUC., ENT., CULTURAL:	MUCH	____/____	SOME	____/____

NAME: _____ AGE: _____ SEX: _____
 MARITAL STATUS: _____
 OCCUPATION: _____ EDUCATION: _____

SWP — DESIRES PROFILE

<u>GAMES</u>		<u>SPORTS</u>		<u>NATURE</u>	
<u>Interests</u>	<u>Categories</u>	<u>Interests</u>	<u>Categories</u>	<u>Interests</u>	<u>Categories</u>
1. _____	1. _____	1. _____	1. _____	1. _____	1. _____
2. _____	2. _____	2. _____	2. _____	2. _____	2. _____
3. _____	3. _____	3. _____	3. _____	3. _____	3. _____
4. _____	4. _____	4. _____	4. _____	4. _____	4. _____
5. _____		5. _____		5. _____	
6. _____		6. _____		6. _____	
7. _____		7. _____		7. _____	
8. _____		8. _____		8. _____	
9. _____		9. _____		9. _____	
10. _____		10. _____		10. _____	

<u>COLLECTION</u>		<u>CRAFTS</u>		<u>ART & MUSIC</u>	
<u>Interests</u>	<u>Categories</u>	<u>Interests</u>	<u>Categories</u>	<u>Interests</u>	<u>Categories</u>
1. _____	1. _____	1. _____	1. _____	1. _____	1. _____
2. _____	2. _____	2. _____	2. _____	2. _____	2. _____
3. _____	3. _____	3. _____	3. _____	3. _____	3. _____
4. _____	4. _____	4. _____	4. _____	4. _____	4. _____
5. _____		5. _____		5. _____	
6. _____		6. _____		6. _____	
7. _____		7. _____		7. _____	
8. _____		8. _____		8. _____	
9. _____		9. _____		9. _____	
10. _____		10. _____		10. _____	

**EDUCATIONAL, ENTERTAINMENT,
& CULTURAL**

<u>Interests</u>	<u>Categories</u>
1. _____	1. _____
2. _____	2. _____
3. _____	3. _____
4. _____	4. _____
5. _____	
6. _____	
7. _____	
8. _____	
9. _____	
10. _____	

TOTALS				
GAMES:	MUCH	____/____	SOME	____/____
SPORTS:	MUCH	____/____	SOME	____/____
NATURE:	MUCH	____/____	SOME	____/____
COLLECTION:	MUCH	____/____	SOME	____/____
CRAFTS:	MUCH	____/____	SOME	____/____
ART/MUSIC:	MUCH	____/____	SOME	____/____
EDUC., ENT., CULTURAL	MUCH	____/____	SOME	____/____

NAME: _____ AGE: _____ SEX: _____
 MARITAL STATUS: _____
 OCCUPATION: _____ EDUCATION: _____

1. Does your family support your decision to participate in the Adult Fitness/Intervention program?
2. Specifically, in what ways do they support you?
3. Who is most supportive within your family or living situation?
4. What leisure activities does your whole family engage in?

APPENDIX C
COVER AND FOLLOW-UP LETTERS



CARDIAC REHABILITATION PROGRAM
WAKE FOREST UNIVERSITY
**DEPARTMENTS of
Medicine and Physical Education**

Dear Adult Fitness Participant:

As a part of an important project you will have the opportunity to personally explore your leisure-work lifestyle, attitudes, and values. Utilizing your leisure for your well-being and fitness, finding out why you think you can't do those things you want to do in leisure, and discovering leisure time satisfaction through weekly experiences with a trained leisure counselor will be offered to you free of charge during the next eight to ten weeks.

Ms. Thea M. Hoeft, a Doctoral Candidate from Virginia Polytechnic Institute and State University, Blacksburg, Virginia will meet with you individually and privately for one hour per week for the next eight to ten weeks in your local community (or your home) on a regular basis. You will be asked to fill out a Leisure Attitudes Survey, Work Attitudes Survey, Leisure Self-Concept Survey, Work Self-Concept and a Leisure Satisfaction Questionnaire, at the beginning of the eight to ten week period, again at the end, and sometime in April the Leisure Satisfaction Questionnaire will be sent to you.

You may expect to increase your leisure awareness, participation in leisure activities and leisure satisfaction. There are a limited number of spaces for you to take advantage of this free service. First come, first serve!! Contact us by January 31, 1979. Contact Mr. Don Bergey, Director of Adult Fitness Program, Wake Forest University, Phone (919) 761-5394. Mr. Bergey will refer your name and number to Ms. Hoeft for an appointment, and answer any questions you may have. You can also call Ms. Hoeft collect at (703) 639-3537 after 6:00 p.m.

We sincerely hope you will take advantage of this exciting new opportunity.

Thea Marie Hoeft

Mr. Don Bergey

Ed.D. Candidate
VPI & SU, Gym 208
Blacksburg, VA 24061
Office (703) 961-5839
Home (703) 639-3537

Director of Adult Fitness Program
Wake Forest University
Winston-Salem, NC 37109
(919) 761-5394

box 7234, REYNOLDA STATION, WINSTON-SALEM, NORTH CAROLINA 27109



CARDIAC REHABILITATION PROGRAM

WAKE FOREST UNIVERSITY

DEPARTMENTS of
Medicine and Physical Education

Dear Adult Fitness Participant:

I would like to ask you to help me in my dissertation research entitled "The Effects of Leisure Counseling Upon Selected Attitudes of Potential Cardiac Clients." I would appreciate your help by filling out the enclosed five instruments; leisure attitudes survey, work attitudes survey, leisure self-concept survey, work self-concept survey and leisure satisfaction questionnaire. Approximately eight to ten weeks later I will again ask you to fill out the same five instruments. Some time in April I will also require your assistance in filling out the leisure satisfaction questionnaire.

Please return the filled-out instruments to me in the provided pre-stamped envelope. All data will remain confidential and be reported by group only. The results of this study will be sent to you in June.

As specified by the VPI&SU Committee on Human Subjects, your signature on the enclosed consent form is also needed.

Thank you for making this research possible through your participation. If you have any questions, please contact me, my advisor, or Mr. Don Bergey at the phone and address below.

Thank you!!

Thea M. Hoeft
Ed.D. Candidate

Mr. Don Bergey
Director of Adult Fitness Program
Wake Forest University
Winston-Salem, NC 37109
(919) 761-5394

Thea M. Hoeft
519 Davis Street
Radford, Virginia 24141
Office: 208 War Memorial Gym
VPI&SU
Blacksburg, Virginia 24061
Phone: Home: (703) 639-3537
961-5839

Dr. Gene Hayes
111 War Memorial Gym
VPI&SU
Blacksburg, Virginia 24061
(703) 961-5743

Box 7234, Reynolds Station, Winston-Salem, North Carolina 27109



CARDIAC REHABILITATION PROGRAM

WAKE FOREST UNIVERSITY

DEPARTMENTS OF
Medicine and Physical Education

Dear Mr.

A few weeks ago, Mr. Bergey and myself asked you to help us by filling out a leisure attitudes survey, work attitude survey, leisure self-concept survey, work self-concept survey and leisure satisfaction questionnaire. Since we have not received the information from you, we are awaiting your reply. Your participation in this valuable project may lead to the development of leisure counseling services for adult fitness groups across the nation.

If you have any questions, please contact us.

Awaiting your reply,

Mr. Don Bergey
Director of Adult Fitness Program
Wake Forest University
Winston-Salem, NC 37109
(919) 761-5394

Thea M. Hoeft
Ed.D. Candidate
Home (703) 639-3537
Office (703) 961-5839

TMH/jpc



CARDIAC REHABILITATION PROGRAM

WAKE FOREST UNIVERSITY

DEPARTMENTS OF
MEDICINE AND PHYSICAL EDUCATION

Dear Mr.

Our research project is drawing to a close and we need your assistance once again. The success of this project depends upon your filling out the enclosed forms: 1 - leisure satisfaction questionnaire; 1 - work self-concept survey; 1 - leisure self-concept survey; 1 - work attitudes survey; and 1 - leisure attitudes survey.

Please return them in the pre-stamped envelope as soon as possible.

We thank you for your valuable time and will share results with you in June.

Awaiting your reply,

Thea M. Hoeft
Ed.D. Candidate
Home (703) 639-3537
Office (703) 961-5839

Don Bergey
Director of Adult Fitness Program
Wake Forest University
Winston-Salem, NC 37109
(919) 761-5394

jpc

Enclosures



CARDIAC REHABILITATION PROGRAM

WAKE FOREST UNIVERSITY

DEPARTMENTS OF
Medicine and Physical Education

Dear Mr.

Don and I require your final assistance for our research project. Please fill out the enclosed Leisure Satisfaction Questionnaire and return it in the provided pre-stamped envelope.

Thank you for your prompt reply and participation.

Thea M. Hoeft
Ed.D. Candidate
Home (703) 639-3537
Office (703) 961-5839

Don Bergey
Director of Adult Fitness Program
Wake Forest University
Winston-Salem, NC 37109
(919) 761-5394

Box #154, Reynolds Station, Winston-Salem, North Carolina 27709

APPENDIX D
CONSENT FORMS

Taping Consent Form

I, _____, hereby give permission for
participant

Ms. Thea Marie Hoeft to tape record counseling sessions for research purposes.

I understand that the transcripts will be included in her dissertation without identifying my name. The term client will be used in place of my name. Upon completion of the study, all counseling tapes will be destroyed. Transcripts will be shown me for my approval before they are included in the dissertation.

I further understand that I am free, at any time, to withdraw my consent and discontinue participation in this study.

Consent of the ParticipantName:Address:Telephone Number:Date:

Study Consent Form

Consent Form for Consent of Participation in a Leisure Counseling
Study at Wake Forest University, Winston-Salem, North Carolina

I have received a written and/or oral explanation of the study and I understand the following:

I will be asked to fill out five instruments: leisure attitudes survey, work attitudes survey, leisure self-concept survey, work self-concept survey and a leisure satisfaction questionnaire. Approximately eight to ten weeks later I will be asked to fill out the same forms. Also sometime in late April or early May, I will be asked to fill out the leisure satisfaction questionnaire.

The information used to develop my Self Leisure Interest Profile and the profile itself will be shared and discussed with me. Subsequent appointments will include my identification of general goals related to "free time" and leisure identification of Leisure Alternatives and Consequences; information dissemination, sharing and planning; participation and evaluation; retaking the five surveys and agreeing to terminate the relationship.

Information such as age, sex, occupation, education, and all other data analyzed will remain confidential, being analyzed by number only. Results of the study will be shared with individuals through the mail and will be published in terms of groups and no description of a particular case will be presented for publication.

The procedures including the leisure counseling process in this study involve minimal or no risk to the participant. The participant can expect to increase his/her leisure awareness, participation in leisure activities and leisure satisfaction.

If at any time a participant has questions concerning this study, and its procedures, they may contact Ms. Hoeft, or any one of her committee members. Phone number including the Chairman of the Institutional Review Board's will be duplicated in this study.

I understand the above and agree to participate in the Leisure Counseling study conducted through Virginia Polytechnic Institute and State University and Wake Forest University under the supervision of Ms. Thea M. Hoeft, Candidate Ed.D., EDPE and her committee.

I further understand that I am free, at any time, to withdraw my consent and discontinue participation in this study.

Consent of ParticipantName:Address:Telephone Number:Date:

Study Consent Form

Consent Form for Consent of Participation in a Leisure Counseling
Study at Wake Forest University, Winston-Salem, North Carolina

I have received a written and/or oral explanation of the study and I understand the following:

I will be asked to fill out five instruments: leisure attitudes survey, work attitudes survey, leisure self-concept survey, work self-concept survey and a leisure satisfaction questionnaire. Approximately eight to ten weeks later I will be asked to fill out the same forms. Also sometime in late April or early May, I will be asked to fill out the leisure satisfaction questionnaire.

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I further understand that I am free, at any time, to withdraw my consent and discontinue participation in this study.

Consent of ParticipantName:Address:Telephone Number:Date:

APPENDIX E

PRETEST AND POSTTEST MEAN COMPARISONS FOR
COUNSELED AND NON-COUNSELED GROUPS

Pretest Mean Comparisons For Counseled and Non-Counseled Groups on
Leisure-Work Self-Concept

Concept	Counseled		Non-Counseled	
	Leisure Self-Concept	Work Self-Concept	Leisure Self-Concept	Work Self-Concept
1. I am happy	4.17	4.18	4.25	4.42
2. I am satisfied	3.92	4.00	4.42	4.50
3. I am hesitant	2.92	2.50	2.75	2.33
4. I am bored	3.50	3.67	3.75	3.75
5. I am uncreative	2.83	3.75	3.00	3.67
6. I am independent	4.33	4.42	4.17	4.08
7. I am restless	2.42	2.92	2.83	2.75
8. I am planful	3.25	4.00	3.50	3.83
9. I am certain	3.83	4.42	3.92	4.25
10. I am obligated	2.75	1.92	2.83	1.92
11. I am flighty	3.50	4.25	3.83	3.75
12. I am creative	3.00	4.08	3.33	3.92
13. I am anxious	3.33	2.92	3.25	3.00
14. I am procrastinating	3.08	3.33	3.42	3.08
15. I am sure	3.75	4.42	4.08	3.92
16. I am active	4.42	4.33	4.17	4.42
17. I am unsatisfied	3.17	3.25	3.33	3.08
18. I am interested	4.25	4.50	3.83	4.17
19. I am stable	4.33	4.83	4.25	4.08
20. I am unobligated	3.00	2.50	3.17	2.42
21. I am sad	3.83	3.92	4.00	3.67
22. I am dependent	3.17	3.58	3.83	3.25
23. I am motivated	4.00	4.08	3.83	4.25
24. I am confident	3.75	4.50	4.08	4.25
25. I am uncertain	3.25	4.08	3.42	3.33
26. I am stimulated	2.25	2.17	2.42	2.00
27. I am incapable	3.58	4.42	3.73	3.83
28. I am unsure	3.58	4.17	3.50	3.83
29. I am passive	3.33	3.83	3.67	3.58
30. I am depressed	4.68	4.00	3.92	3.75
31. I am enthusiastic	3.58	4.00	3.75	3.92
32. I am capable	3.83	4.50	4.08	4.42
33. I am lazy	3.58	4.00	3.50	3.37
34. I am accomplishing	3.42	3.83	3.58	4.42
Total Mean	3.500	3.941	3.630	3.632

Note: Means represent possible scores on a scale from 5 to 1, with a mean or score of 3 depicting a neutral self-concept. Means or scores above 3 depict a more positive concept than means or scores below 3, these of which depict more negative concepts.

Pretest Mean Comparisons For Counseled and Non-Counseled Groups on
Leisure-Work Attitudes

<u>Work Pair</u>	Counseled		Non-Counseled	
	<u>Leisure Attitude</u>	<u>Work Attitude</u>	<u>Leisure Attitude</u>	<u>Work Attitude</u>
1. boring-interesting	2.25	2.42	2.33	2.08
2. empty-full	2.50	2.33	2.58	1.75
3. passive-active	2.50	1.83	2.50	1.75
4. solitary-social	3.50	3.17	3.42	2.50
5. refreshing-tiring	3.42	4.00	2.67	4.00
6. meaningful	2.67	2.17	2.67	2.42
7. satisfying-unsatisfying	2.67	2.25	2.58	2.08
8. desirable-undesirable	2.67	2.58	2.25	2.42
9. good-bad	2.50	2.25	2.42	2.25
10. pleasant-unpleasant	2.25	2.58	2.25	2.42
11. sweet-sour	2.92	3.33	3.17	3.58
12. honest-dishonest	1.92	2.00	2.25	2.08
13. nice-awful	2.00	2.58	2.50	2.75
14. necessary-unnecessary	2.42	1.58	2.33	2.00
15. valuable-worthless	2.17	1.67	2.33	1.92
16. deep-shallow	<u>2.92</u>	<u>1.83</u>	<u>3.08</u>	<u>2.17</u>
Total Mean	2.562	2.411	2.584	2.402

Note: Means represent possible scores on a scale from 1 to 7, with a mean or score of 4 depicting a "neutral" attitude toward the word pair. The higher the mean or score, the more positive the attitude toward the right hand word of the word pair. The lower the mean or score, the more negative the attitude toward the left hand word of the word pair.

Posttest Mean Comparisons For Counseled and Non-Counseled Groups on
Leisure-Work Self-Concept

Concept	Counseled		Non-Counseled	
	Leisure Self-Concept	Work Self-Concept	Leisure Self-Concept	Work Self-Concept
1. I am happy	4.58	4.33	4.33	4.42
2. I am satisfied	4.25	4.50	4.25	4.42
3. I am hesitant	2.33	2.33	2.75	2.42
4. I am bored	3.67	3.67	3.58	3.75
5. I am uncreative	3.58	3.58	3.42	3.50
6. I am independent	4.17	4.42	4.08	3.92
7. I am restless	3.17	2.92	2.33	2.67
8. I am planful	3.92	4.00	3.08	4.00
9. I am certain	4.17	4.25	3.92	4.33
10. I am obligated	2.92	2.25	2.58	2.00
11. I am flighty	4.08	3.83	3.58	3.58
12. I am creative	3.50	3.33	3.33	3.50
13. I am anxious	3.58	3.00	2.67	2.67
14. I am procrastinating	3.17	3.00	3.67	3.33
15. I am sure	4.08	4.25	3.88	4.08
16. I am active	4.50	4.25	4.25	4.00
17. I am unsatisfied	3.67	3.08	2.67	2.92
18. I am interested	4.42	4.00	3.42	4.67
19. I am stable	4.42	4.67	4.25	4.33
20. I am unobligated	.308	2.83	3.25	2.50
21. I am sad	4.00	3.58	3.67	3.50
22. I am dependent	3.42	3.25	3.67	3.25
23. I am motivated	4.08	3.83	3.67	4.25
24. I am confident	4.17	4.17	3.92	4.17
25. I am uncertain	3.75	2.91	2.75	3.42
26. I am stimulated	2.08	2.83	2.83	2.42
27. I am incapable	3.83	4.00	3.27	3.83
28. I am unsure	3.92	4.33	3.50	3.92
29. I am passive	3.83	4.08	3.17	3.75
30. I am depressed	4.25	3.67	3.17	3.42
31. I am enthusiastic	4.17	3.75	3.58	4.00
32. I am capable	3.75	3.92	4.08	4.42
33. I am lazy	3.58	3.50	3.25	3.92
34. I am accomplishing	3.82	4.08	3.50	4.50
Total Mean	3.759	3.658	3.450	3.640

Note: Means represent possible scores on a scale from 5 to 1, with a mean or score of 3 depicting a neutral self-concept. Means or scores above 3 depict a more positive concept than means or scores below 3, these of which depict more negative concepts.

Posttest Mean Comparisons For Counseled and Non-Counseled Groups on
Leisure-Work Attitudes

<u>Word Pair</u>	<u>Counseled</u>		<u>Non-Counseled</u>	
	<u>Leisure Attitude</u>	<u>Work Attitude</u>	<u>Leisure Attitude</u>	<u>Work Attitude</u>
1. boring-interesting	2.25	2.33	2.67	2.50
2. empty-full	2.42	2.17	3.16	2.00
3. passive-active	2.33	2.25	3.00	1.92
4. solitary-social	2.92	3.33	3.66	2.92
5. refershing-tiring	2.83	3.58	2.83	4.00
6. menaingful	2.42	2.67	2.83	2.50
7. satisfying-unsatisfying	2.25	2.67	2.92	1.83
8. desirable-undesirable	2.00	2.42	2.25	2.25
9. good-bad	1.83	2.00	2.42	2.00
10. pleasant-unpleasant	2.00	2.33	2.42	2.00
11. sweet-sour	2.92	3.08	2.58	3.50
12. honest-dishonest	2.00	1.92	2.33	2.33
13. nice-awful	2.25	2.17	2.33	2.42
14. necessary-unnecessary	2.08	1.92	2.58	2.08
15. valuable-worthless	1.83	1.58	2.33	1.83
16. deep-shallow	2.75	2.42	2.75	2.08
Total Mean	<u>2.319</u>	<u>2.427</u>	<u>2.682</u>	<u>2.403</u>

Note: Means represent possible scores on a scale from 1 to 7, with a mean or score of 4 depicting a "neutral" attitude toward the word pair. The higher the mean or score, the more positive the attitude toward the right hand word of the word pair. The lower the mean or score, the more negative the attitude toward the left hand word of the word pair.

Pretest and Posttest Mean Comparisons For Counseled and Non-Counseled
Groups on Leisure Satisfaction Questionnaire

<u>Questions</u>	<u>Counseled</u>		<u>Non-Counseled</u>	
	<u>Pretest</u>	<u>Posttest</u>	<u>Pretest</u>	<u>Posttest</u>
1. The enjoyment I get	2.75	3.17	3.17	3.00
2. The feelings of accomplishment I get	3.33	3.67	3.00	3.00
3. How well I plan to participate	2.82	3.42	2.83	2.92
4. The experience, compared to what I think others would feel	2.83	3.17	3.00	2.83
5. The opportunity to develop my personal skill and ability	2.67	3.08	2.83	2.83
6. The freedom to use my own judge- ment and make my own choices	3.25	3.50	3.50	3.42
7. How well my talents and capabili- ties are expressed	2.75	2.92	2.83	2.83
8. The opportunity for socialization	3.00	3.25	3.00	2.67
9. The opportunity to learn more about myself	2.67	2.92	3.17	2.92
10. The confidence it gives me	3.08	3.25	3.08	3.00
11. The chance to do different things from time to time	2.83	3.33	2.75	2.92
12. Where I participate	3.08	3.25	3.33	3.33
13. The chance to feel like "somebody"	3.25	3.33	3.08	3.17
14. The recognition I get from others	3.17	3.25	3.17	3.08
15. Being able to keep active and stimulated	3.08	3.83	3.67	3.25
16. The opportunity to develop close friendship with others	2.92	3.08	2.92	2.58
17. How much time I am able to devote	2.33	2.33	2.50	2.42
18. How much I must plan	2.67	2.92	2.83	2.75
19. How satisfied my family, mate, or friend(s) are for me to participate	2.67	3.58	3.00	3.00
20. How genuinely me and honest I am able to be	3.17	3.33	3.08	3.17
21. Being relaxed from work, chores, duties, worries, etc.	2.58	3.33	3.08	3.17
22. The opportunity to do something that makes use of my abilities	2.92	3.00	2.67	2.83
23. The chance to use my creativity and imagination	2.50	2.58	3.00	3.00
24. The chance to be independent	3.25	3.25	3.42	3.00
25. The chance to do what I want	2.83	3.25	3.00	3.00
26. The possible opportunity I may have to help others	<u>3.08</u>	<u>3.33</u>	<u>2.83</u>	<u>2.64</u>
Total Mean	2.903	3.205	3.028	2.951

APPENDIX F
LEISURE ACTIVITIES INVOLVED IN FOR THE
COUNSELED GROUP

Leisure Activities Involved In For Counseled Clients at the time of the initial interview, and termination of counseling and at the one month follow-up.

Initial Interview

N=12

Individual/Non Competitive

Boating (1)
Jogging (11)
Snow skiing (2)
Fishing (2)

Sports

Bowling (2)
Golf (1)
Tennis (1)

Nature

Hikes (3)
Observation (2)
Lawn care (1)

Collection

Swords & knives (1)
Paintings, drawings (1)

Handy Man

Several do-it-yourself (3)

Toy, Model & Kit Assembly

Model Kits (2)
Electronic kits (1)

Art & Music

Special interest photography (1)
Drafting & design (1)
Formal Choral group (2)
Stage acting (2)
Play production (1)

Educational, Entertainment & Cultural

Radio new listening (11)
T.V. movies, drama, and news (10)
Movie going (6)
Reading in general (5)
Attending art lectures (2)
Traveling (10)

Religious Activities

Church attendance (9)

Self-Development

Language improvement (1)
Figure control, exercises (9)

Other

Special interest groups (4)
Dining out (9)

Termination of Counseling
N=12

One-month Follow-up

Individual/Non Competitive

Boating (2)
Jogging (12)
Snow skiing (0)
Fishing (4)

Sports

Bowling (4)
Golf (2)
Tennis (2)

Combative

Karate (1)

Nature

Hikes (4)
Observation (6)
Lawn care (4)
Weekend Camping (1)

Collection

Swords & Knives (1)
Paintings, drawings (2)

Handy Man

General do-it-yourself (3)

Toy, Model & Kit Assembly

Model kits (2)
Electronic kits (2)

Art & Music

Special Interest photography (1)
Drafting & design (2)
Formal choral group (2)
Stage acting (2)
Play production (1)

Educational, Entertainment & Cultural

Adult Education (3)
Radio new listening (11)
T.V., movies, new & drama (8)
Movie going (6)
Reading in general (4)
Attending art lectures (3)
Traveling (11)

Religious Activities

Church attendance (9)

Self-Development

Language improvement (2)
Figure control, exercise (10)

Other

Special interest groups (6)
Dining out (9)
Volunteering (1)
Family Council (2)

APPENDIX G

SPECIFIC DETERMINED GOALS AND OBJECTIVES
OF THE INDIVIDUAL COUNSELED CLIENTS

Specific Determined Goals and Objectives of
the Individual Clients

Client #1. Terminal Performance Objectives (T.P.O.)

T.O.P.1.1: Client will pursue the possibility of learning to play the piano at a beginning skill level.

T.O.P.1.2: Client will determine his painting ability.

T.O.P.1.3: Client would like to travel more often to Europe and the surrounding area.

Interim Performance Objectives (I.P.O.)

For T.P.O. 1.1

I.O.P.1.1.1: Client will identify several local resources that may offer beginning piano lessons.

I.O.P.1.1.2: Client will contact either by telephone or in person the agencies that may offer piano lessons, for details concerning time and cost factors.

I.O.P.1.1.3: Client will enroll in a beginning piano class.

For T.P.O.1.2

I.O.P.1.2.1: Client will identify several local resources that may offer beginning oil painting classes.

I.O.P.1.2.2: Client will contact either by telephone or in person the agencies that may offer oil painting classes for details concerning time and cost factors.

I.O.P.1.2.3: Client will enroll in a beginning oil painting class.

I.O.P.1.2.4: Client will determine his painting ability through class critique and teacher feedback.

I.O.P.1.2.5: Client will decide upon the basis of class critique and teacher feedback if he wishes to develop and continue his painting ability.

For T.P.O.1.3

I.O.P.1.3.1: Client will explore through travel agencies which European countries he would like to visit with his wife.

I.O.P.1.3.2: Client will assess his financial situation in relationship to the cost of the European travel.

I.O.P.1.3.4: Client and his wife will record a list of possible places that they would like to travel to in the general local area of Winston-Salem, North Carolina.

I.O.P.1.3.5: Client and his wife will plan to take a weekend trip.

Client #2. Terminal Performance Objective (T.P.O.)

- T.P.O.1.1: Client will identify what activities are satisfactory during his leisure.
- T.P.O.1.2: Client and his wife will identify leisure activities in which they have a mutual interest.
- T.P.O.1.3: Client and his wife will initiate at least one new activity of mutual liking.

Interim Performance Objectives (I.P.O.)

For T.P.O.1.1

- I.P.O.1.1.1: Client will complete SLIP
- I.P.O.1.1.2: Client will fill out the "Getting Started Sheet."
- I.P.O.1.1.3: Client will identify what needs are currently being met through his leisure activities.
- I.P.O.1.1.4: Client will fill out the "Alternative Sheet" utilizing his desired leisure activity profile from SLIP.

For T.P.O.1.2

- I.P.O.1.2.1: Client's wife will complete SLIP
- I.P.O.1.2.2: Client's wife will fill out the "Alternative Sheet" utilizing her desired leisure activity profile from SLIP.
- I.P.O.1.2.3: Client and his wife will compare the alternative lists of activities they would either consider or try for mutual interests.

For T.P.O.1.3

- I.P.O.1.3.1: Client and his wife will identify the community resources, cost and time available for engaging in mutual leisure interests.
- I.P.O.1.3.2: Client will engage in at least one newly identified mutual leisure interest per week with his wife.

Client #3. Terminal Performance Objectives (T.P.O.)

- T.P.O.1.1: Client will spend at least three nights a week away from his home with other divorced individuals.
- T.P.O.1.2: Client will re-establish a daily jogging pattern.

Interim Performance Objectives (I.P.O.)

For T.P.O.1.1

- I.P.O.1.1.1: Client will identify leisure interests utilizing SLIP.
- I.P.O.1.1.2: Client will identify various community organizations offering programs for divorced or divorcing individuals.
- I.P.O.1.1.3: Client will contact these organizations for a schedule of events.
- I.P.O.1.1.4: Client will select the organizations he wishes to visit and possibly join that would provide him with the opportunity of being away from home three nights a week.

For T.P.O.1.2

- I.P.O.1.2.1: Client will fill out the "Getting Started Sheet" as it pertains to jogging.
- I.P.O.1.2.2: Client will adhere to the starting date of a daily jogging program.
- I.P.O.1.2.3: Client will chart his daily jogging by checking off the days he jogged and the distance for a month.
- I.P.O.1.2.4: Client will bring in the chart on a weekly basis with reasons for not keeping to the daily schedule.

Client #4. Terminal Performance Objectives (T.P.O.)

- T.P.O.1.1: Client will begin to identify leisure interests that he would like to pursue in retirement.
- T.P.O.1.2: Client will increase the satisfaction he receives from golf.

Interim Performance Objectives (I.P.O.)

For T.P.O.1.1

- I.P.O.1.1.1: Client will complete SLIP.
- I.P.O.1.1.2: Client will complete "Getting Started Sheet."
- I.P.O.1.1.3: Client will complete "Alternative Sheet" utilizing his current and desired leisure interests profile.
- I.P.O.1.1.4: Client will identify potential barriers to participating in a leisure activities listed under the column of "considering" or "trying."
- I.P.O.1.1.5: Client will discuss his potential lifestyle after retirement and the possibility of integrating his identified desired leisure interests.
- I.P.O.1.1.6: Client will identify and attend any pre-retirement programs offered by his company or in the community to continue identification of his retirement lifestyle.

For T.P.O.1.2

- I.P.O.1.2.1: Client will identify what aspects about his golf game that would increase the satisfaction he derives from it.
- I.P.O.1.2.2: Client will practice his chip shots two days per week in order to improve his golf game.
- I.P.O.1.2.3: Client will practice his chip shots so that he comes within four feet of the cup two out of three times.
- I.P.O.1.2.4: Client will avoid playing golf with his co-workers whom laugh at him until he has established his chip shot skills well enough to be confident about his game. This will be assessed by the clients feelings confidence and being calm about his co-workers comments.

Client #5. Terminal Performance Objectives (T.P.O.)

T.P.O.1.1: Client will engage in a more physically active recreation on a regular basis.

Interim Performance Objectives (I.P.O.)

For T.P.O.1.1

I.P.O.1.1.1: Client will complete SLIP.

I.P.O.1.1.2: Client will fill out "Alternative Sheet" utilizing his current and desired interest profile.

I.P.O.1.1.3: Client will identify which activities would satisfy the need of being physically active.

I.P.O.1.1.4: The client will fill out the "Getting Started Sheet."

I.P.O.1.1.5: The client will identify what he means by a "regular basis."

I.P.O.1.1.6: The client establish a weekly active recreational schedule and record or a chart how many days a week he engages in a physically active recreational activity.

Client #6. Terminal Performance Objectives (T.P.O.)

T.P.O.1.1: Client will identify time to spend with his family.

T.P.O.1.2: Client will identify family interests.

T.P.O.1.3: Client and family will begin to plan to participate in activities that have been decided upon by the whole family.

Interim Performance Objectives (I.P.O.)

For T.P.O.1.1

I.P.O.1.1.1: Client will fill out "Pie of Life" time wheel and compile a list of his families typical weekly schedule.

For T.P.O.1.2

I.P.O.1.2.1: Client will institute a regular family meeting following the guidelines and procedures suggested by Dinkmeyer and McKay (1973) for a family meeting or council (See Appendix A, p. 123).

I.P.O.1.2.2: The client will emphasis a plan for family fun and recreation by asking for each family member's suggestions for leisure time activities.

For T.P.O.1.3

I.P.O.1.3.1: During a regular family meeting a specific family interest will be planned and carried out within the week.

I.P.O.1.3.2: A regular mutual family interest will be planned on a weekly basis by the whole family.

Client #7. Terminal Performance Objectives (T.P.O.)

T.P.O.1.1: The client will identify leisure time.

T.P.O.1.2: The client will identify interests that satisfy his needs for creativity.

Interim Performance Objectives (I.P.O.)

For T.P.O.1.1

I.P.O.1.1.1: The client will fill out the "Pie of Life" time wheel.

I.P.O.1.1.2: The client will identify barriers to having leisure time.

For T.P.O.1.2

I.P.O.1.2.1: The client will complete SLIP.

I.P.O.1.2.2: The client will complete "Alternative Sheet" listing only those activities that have the potential for satisfying his needs for creativity.

I.P.O.1.2.3: The client will select one of the listed activities and engage in it on a weekly basis.

I.P.O.1.2.4: The client will assess his derived satisfaction of the activity by determining if it has met his needs for creativity.

Client #8. Terminal Performance Objectives (T.P.O.)

T.P.O.1.1: The client will identify a method of relaxation.

T.P.O.1.2: The client will identify new leisure activities.

Interim Performance Objectives (I.P.O.)

For T.P.O.1.1

I.P.O.1.1.1: The client will read the "Relaxation Response."

I.P.O.1.1.2: The client will use the Wake Forest University Relaxation Therapy procedure (See Appendix A, p. 123). This was taped for the client in order that he could take it home and use it on a regular basis.

I.P.O.1.1.3: The client will identify situations in which he can utilize certain relaxation techniques to reduce his tension.

For T.P.O.1.2

I.P.O.1.2.1: The client will complete SLIP.

I.P.O.1.2.2: The client will complete "Alternative Sheet" using the desired leisure interest profile.

Client #9. Terminal Performance Objectives (T.P.O.)

T.P.O.1.1: The client will become less obligated to others in leisure.

T.P.O.1.2: The client will engage in activities that enhance weight loss.

Interim Performance Objectives (I.P.O.)

For T.P.O.1.1

I.P.O.1.1.1: The client will identify specific behaviors that oblige him to others in leisure.

I.P.O.1.1.2: The client will practice the technique of saying to a person "I'll call you back" instead of making a commitment in leisure to someone else.

I.P.O.1.1.3: The client will identify activities that he would like to engage in during leisure.

For T.P.O.1.2

I.P.O.1.2.1: The client will complete SLIP.

I.P.O.1.2.2: The client will complete the "Alternative Sheet" using his desired and current leisure interest profile.

I.P.O.1.2.3: The client will list his activities on the "Consequence Sheet" keeping in mind his goal of losing weight.

I.P.O.1.2.4: The client will select activities based on their calorie expenditures to enhance his weight loss.

I.P.O.1.2.5: The client will keep track of his weekly weight loss in addition to a diet tracker given to him by the staff dietitians.

Client #10. Terminal Performance Objectives (T.P.O.)

T.P.O.1.1: The client will increase active recreation and decrease T.V. watching.

T.P.O.1.2: The client will maintain jogging Monday, Wednesday and Friday and find some kind of active recreation for Tuesday or Thursday either early in the morning or after 5 p.m.

T.P.O.1.3: The client will explore local clubs and organizations offering karate in order to sharpen this skill.

T.P.O.1.4: The client will engage in a monthly active outdoor experience.

Interim Performance Objectives (I.P.O.)

For T.P.O.1.1

I.P.O.1.1.1: The client will complete SLIP.

I.P.O.1.1.2: The client will complete "Alternatives Sheet" using his desired and current leisure interest profile.

I.P.O.1.1.3: The client will complete "Consequences Sheet" keeping active and passive recreation in mind.

I.P.O.1.1.4: The client will complete the "Getting Started Sheet" with an increase in active recreation in mind.

I.P.O.1.1.5: The client will record on a weekly basis active recreational activities he engages in and the passive T.V. watching.

I.P.O.1.1.6: After a three week period these active vs. T.V. watching activities will be charted in order to assess the increase and decrease in activities.

For T.P.O.1.2

I.P.O.1.2.1: The client will select a specific activity from his "Consequences Sheet" for Tuesday and Thursday.

I.P.O.1.2.2: The client will record his Tuesday/Thursday active recreation along with information required in I.P.O.1.1.5.

For T.P.O.1.3

I.P.O.1.3.1: The client will contact the University, county and city recreation departments and the "Y" for information concerning Karate classes, times and cost.

For T.P.O.1.4

I.P.O.1.4.1: The client will contact local outing club organizations for their schedules of outdoor events identified as interest to the client.

I.P.O.1.4.2: The client will sign-up and participate in an outdoor experience on a monthly basis.

Client #11. Terminal Performance Objectives (T.P.O.)

T.P.O.1.1: The client will engage in less T.V. watching.

T.P.O.1.2: The client will identify family leisure interests.

Interim Performance Objectives (I.P.O.)

For T.P.O.1.1

I.P.O.1.1.1: The client will complete SLIP.

I.P.O.1.1.2: The client will list alternatives to watching T.V. from his current and desired leisure interest profile.

I.P.O.1.1.3: The client will select an alternative activity and record his participation in it as well as the amount of time spent in it for two weeks.

For T.P.O.1.2

I.P.O.1.2.1: The client will institute a regular family meeting following the guidelines and procedures suggested by Dinkmeyer and McKay (1973) for a family meeting or council (see Appendix A, p. 123).

I.P.O.1.2.2: The client will emphasis a plan for family fun and recreation by asking each family member for their leisure time ideas.

Client #12. Terminal Performance Objectives (T.P.O.)

T.P.O.1.1: The client will explore taking a fine arts course.

T.P.O.1.2: The client will investigate volunteering in some community agency.

Interim Performance Objectives (I.P.O.)

For T.P.O.1.1

I.P.O.1.1.1: The client will contact the local University, community colleges, and art guilds about fine arts courses and seminar offerings.

I.P.O.1.1.2: The client will select and enroll in the course of his choice.

For T.P.O.1.2

I.P.O.1.2.1: The client will contact local hospitals, children homes and social service agencies to inquire about their volunteer programs.

I.P.O.1.2.2: The client will select a particular agency and decide how many hours he wishes to volunteer.

APPENDIX H

EDITED TAPE TRANSCRIPT OF A SECOND
COUNSELING SESSION

CL-Client
CO-Counselor

- CO Now, I've got your profile and everything here; we'll look at that a little bit later.
- CL All right.
- CO What I'd like to do is the next hour is talk with you and see if there's any general problems that you associate with your leisure. Lets see if we can't identify some.
- CL Alright, are you going to ask questions, or how are you going to conduct it?
- CO No, just go ahead and think of your concerns and I'll . . .
- CL As I told you before I enjoy leisure, I enjoy hard work; to me its relaxing--I mean manual, physical work. And what the problem is, I think its my fault I don't have a schedule to go by and I don't know how to organize my time. I need a manager or something, I'm not enjoying life and I'm not enjoying myself, and I'm making other people miserable too.
- CO In leisure?
- CL Yea. What time I do have for leisure I can't enjoy because me and my wife don't communicate. We just don't have the same interest in life.
- CO What leisure you pursue you don't pursue in your family?
- CL No, No, No, No!
- CO Are there anythings you do mutually in leisure?
- CL Go to the movies or out to eat or something like that. We went on vacation last summer and she got sick, my daughter got sick and it turned into a nightmare. I said I will never again leave here, leave the U.S.A.
- (Client tells the counselor of his marital concerns)
- CO My role as a leisure counselor does not include marital counseling but I can refer you to a marital counselor if you wish.
- CL No, No, that's a psychiatrist thing, but I'm trying to get you to understand why I don't use my leisure time, that I'm unhappy, even if I had it, what would I do with it? When I go

to my cabin she doesn't want me to go by myself, so that's weird. We don't go dancing or night clubbing or anything like that. Yes, I've led a very unhappy life, a very unhappy life. Yes, I can go out with the boys and have a good time you know, but my wife she's the jealous type, she don't want me to go out and enjoy myself you know. Yes, If I was on my own, I could enjoy my leisure time, you know. I could have a real good time. I enjoy being with people, but I enjoy being by myself sometimes too. A couple of years ago I went up and she wouldn't go. And I said I was come hell or high water. It was 4th of July weekend and I stayed up there 3 days. There were some neighbors and I had a good time.

- CO Again, lets try to focus on your leisure concerns rather than your marital ones. So one of your concerns seems to be that you need some organizational skills, to organize what leisure time you have, right?
- CL Correct. And then maybe set a goal--say I'm gonna do this.
- CO And do you have any other concerns or problems with leisure?
- CL No, if I had the time for leisure and get organized, I would enjoy it. You know, I'm not one for being bored to death, unless someone make me go sit in an office. . .
- CO Some of the general goals would be to first of all find the leisure.
- CL Right, find something that I am, to really get interested in myself, something that I don't have to depend on someone else to do for me, just a hobby. I told you about my hobby, I love to tinker with things and to do manual things you know. But I've never had stamp collecting, record collecting, or anything like that and I read but not anymore than I have to. I like to read, not a novel, but like a do-it-yourself, something like that.
- CO So, a second goal would be to then organize what leisure time you have. Those are 2 general goals you can work on.
- CL You think first I should try to find something and then try to organize it? Do you think that's too far out?
- CO I think that's right on target. I mean it zeros in on your concerns and problems with leisure. Can you think of any others?

- CL No, I probably will, but not for the moment and that's all I can think of. You know, the summer is so much better because I can get outside, you know, but I tell you in the winter its bad. Of course, if I wasn't so lazy I guess I could study more on the things I'm teaching you know. But after, so many years, you get so sorry and damn lazy, you know, you just kind of do enough to get by and after you've been teaching that long you can almost slide. Maybe not do a very good job, but you can fool a lot of people. But anyway, summer I don't have a problem because there are so many things I can get outside and do. Such as take care of the lawn . . . I've got a large lawn and vegetable garden lawn, and the trees and the painting and everything, and you've got to ge here and there and . . . but in the winter I do get very depressed when I go home & watch television. Go out to eat or to a movie or something. But I have a rough time in the winter.
- CO Let's look at how much time you have for leisure.
- CL All right, that will be fine.
- CO A time schedule. Why don't you keep track of 24 hours and write down exactly what you do at a half an hour at a time, from the time you wake up in the morning.
- CL Now start when I wake up in the morning. Like I say, some mornings I can't sleep and I wake up at 4:00 or something but lets say 7:00.
- CO Yes, take an average time.
- CL Allright, but sometimes, if I'm excited about something, like a couple of those days running, you know I had to be down there at 6:00. I woke up at 4:00 and never could go back to sleep. But that's unusual. But lately, I've been sleeping pretty good, so let's say 7:00 that say, you know, shower, and shave and eat and then I leave and I'm at school around 8:00. 7:00 to 7:30 oh I've done lost a half an hour there already.
- CO See you've probably never thought of it before.
- CL Allright, I know what I do, I usually get the paper. Sometimes if I'm not too late. I just glance over when I have my cup of coffee. I've leave for school around ten minutes till 8:00. Leave for school, 7:30, then I get up to school about 8:00 and then I stay there till usually, let's say 3:00 And then during that time . . . what classes are at scheduled times I have ten minutes in between, I have the first period, second period, third period, fourth period, 5th period, then I have lunch, 6th and 7th period I am off. I have 10 minutes in between, no I have 8 minutes in between each class.

- CO And when is your first period?
- CL It starts at 8:30.
- CO You have a half an hour by the time you get to school?
- CL Well, yea I have half an hour. Now what I do in there, when I get up there at 8:00, I usually, try to straighten my desk up and get things organized and then I run over to the cafeteria and get a cup of coffee and then I'm gone for 30 minutes fooling around here. For one half hour, coffee, try to organized and then gossip I guess. O.K. is that all right up till . . .
- CO How much is lunch?
- CL About 20 minutes.
- CO And you eat your lunch at school?
- CL Yes, I always eat lunch at school.
- CO And than always on your 6th and 7th period are you free, is that every day? You mean 5 days a week?
- CL I very seldom work later than 3:30. You know I'm always back home by 3:30 unless I run downtown, then I stay till 4:00, and then on Mondays we usually have a teacher's meeting . . . and then on Mondays I usually leave around 4:00. I usually leave home at 7:30 and back home at 3:30.
- CO Now what happens after 3:30?
- CL Now on bad days like it is now, I change my clothes, usually pick up the paper again, glance over the paper, usually I, like couple of weeks ago, I change clothes and then work with my son . . . We always, we have a habit of eating an early dinner, it goes back to when I was on the farm, you know, in the afternoon we have an early dinner, . . . I do stuff around the house, I don't enjoy that; or look over books. From 5:30 to about 11:00, I usually watch some TV, maybe go out about twice a week to eat or see a movie once every two months. But thats it.
- CO So you eat out twice a week?
- CL Yea.
- CO And that's with your wife. And then a movie once or twice a month?

- CL No, we haven't been to a movie since maybe before Christmas. And, sometimes, if somethings good--we want to 3 in one month. But she likes to go out and eat, and I do to, I guess. . . We went out last night.
- CO You sound unsure?
- CL Well, I don't enjoy it too much, I don't enjoy it too much. I'm old fashioned I guess. My idea would be to eat a nice dinner at home by candle light and all, you know? but . . . that don't happen. She goes through the motions and all that but it isn't there. You know what I'm talking about?
- CO I understand.
- CL I tell ya, going out to eat gets tiresome. Same things over and over. And what I'm trying to say is most of its television in winter. See in summer it doesn't get dark till nine but starting in May I'll change clothes and jump outside.
- CO Have you been working on the apartments?
- CL No, only emergencies. A couple of days I go down there and I'm home by 5:30.
- CO So it seems, this would be your leisure time between 3:30 and 5:30. . . it takes you a half an hour to eat, so 6:00?
- CL Yes, because I usually watch the 6:00 news. Usually finished by then.
- CO You watch the news on a regular basis?
- CL Usually, yes mam. I always watch the local at 6:00 and then at 6:30 Walter Cronkite.
- CO So your leisure is usually 7:00 to 11:00?
- CL That's right, 7:00 to 11:00. But that's right I'm wasting, I'm watching television.
- CO Watching television is a waste of time to you?
- CL No, I enjoy, well I guess not, but I mean I don't feel like, maybe I feel like I could do something a little bit more constructive. You know what I mean . . .
- CO Do you like T.V.?

- CL I think there's good programs and bad programs, but I don't like to sit that long. Some nights I get a half an hours nap in there. I didn't tell you about that.
- CO You doze during the news?
- CL Sometimes when the news is off, sometimes during the news. See I eat supper, and sometimes I guess you get lazy and then the first thing I know I'm dozing. And sometimes I get 15 minutes sleep there. But right here, see I watch television and don't go out much, maybe this here is my problem . . . I just don't know, I just don't know.
- CO You'd like to use it more constructively?
- CL You say should I use it? Right, Well like I say I enjoy it, and on some nights like last night I kept switching channels, and I had a bunch of books there I would glance at the books a little bit and then glance there, there wasn't anything on last night of interest.
- CO uh um
- CL Well I don't know . . . There's not many hobbies that, you know, unless, physical things, there are not too many things you can do at home. And they maybe, my hobby, maybe I could divide it up. And then maybe one night you watch television, and then one night you go here, visit someone.
- CO What do your weekends look like?
- CL Well, I enjoy my weekends, I really do, I usually sleep, I try to not get up at 7:00 on Saturdays, in the summer and the spring I head up to my cabin.
- CO What about right now?
- CL Well, I haven't been up there since before Christmas. Till about November was the last time I was up there. Saturday, of course it bores me to death, of course my daughter was home this weekend, and I woke up Saturday morning, you know how the weather was, and you know I didn't go out or anything, I always do the cooking, I fix the breakfast, just about the only time we sit down to eat together is on the weekend so I usually fix the breakfast on Saturdays and Sundays. And my wife and I sat down and had breakfast, and then my daughter came down later and then I walked around from room to room, and then I went and got the newspaper. Sunday's newspaper didn't come I think. And I just walked from room to toom and didn't do anything. I watched television, and just about killed myself, bored to death. The weather was so bad, this was a bad weekend.

- CO But, what if it wasn't bad?
- CL I went to the basement, and straightened, up and looked around and straightened up here and there and that's about it. I've got some buildings in back I straighten up. Maybe I take my truck and fill up with gas or just go to . . . a country store in . . . as far as drinking beer, I never do. I enjoy drinking just as much as anybody but I rarely do that on a Saturday or Sunday.
- CO It sound like its really unscheduled.
- CL Really, I never get caught up, but in the Winter its just bad . . .
- CO What about Sunday?
- CL Get up sometimes, maybe have breakfast, got to church, or she goes, if she goes by herself, I stay home and read the paper. Or someday, my boy is off on Sunday, is a good day to work all day on the apartments. . . the weather, I haven't been doing anything or going anywhere just eating and loafing.
- CO That bothers you?
- CL No, its all right, its just it worries me sometimes. I look out the window . . . and all kinds of stuff need to be done. I see things that need to be done, I would rather be doing this. You know. But, I'm maybe I should go drinking or see people in the hospital. You got any suggestions since I don't read, I don't enjoy reading, I don't enjoy music.
- CO Let's look at the two goals, that we kind of talked about . . . And organizing them.
- CL Let me interrupt you, Thea you made me think now, you've helped me already. What I ought to do, the next time we have a meeting I'll draw up a better schedule. I'll let you know what happened next week.
- CO Well, lets set some goals.
- CL All right. Okay.
- CO I think if you want to . . . organize your time . . . your schedule is set until 3:30.
- CL Yea--3:30 in the afternoon.
- CO But from 3:30 to 5:30 you might want to schedule something different.

- CL All right.
- CO And then from 7:30 to 11:00 . . . things you want to do, find activities that meet a need in you.
- CL I don't know. Sometimes maybe if I accomplish something if I can go to the apt and hook up this light or fix this and then at night is bad and I'll just be thanking God for it.
- CO Because you've accomplished something?
- CL Yeah for myself
- CO So its the handyman activity you do in the apts. that satisfies your need to accomplish something, right?
- CL Yes.
- CO What else satisfies you.
- CL Well, my God, I don't think I have any! I really don't.
- CO What you need to look for is what needs are satisfied by leisure, and try to match an activity with those needs using your leisure profile.
- CL Well ya know some people--basketball, football, I'm just not too crazy . . . although I was an athelete in high school. Ya know some people wouldn't miss Superbowl for the world. I enjoyed it but I didn't go crazy over it. People put together at bars or at frineds--I'd rather build a fireplace to keep me busy.
- CO That would be more satisfying?
- CL Yep, just as much. A person would really be set if he enjoyed himself. I have a friend drive along way for a game. My god, I'd go crazy if I drove like that. I couldn't stand it.
- CO They must be really interested in it.
- CL They are--they love it.
- CO And you love other things.
- CL Yeah. I'd rather chop a tree down. I'm not crazy about sports.
- CO Uh-um. So here's what we have to do, is look at what you do and what your needs are. The one we've identified is the handyman hobby and your sense of accomplishment with that--and there are things you can do around the house instead of like Saturday,

wandering from room to room. So that's something to think about.

CL Yes, I'll write down everything I do between now and the next time we meet so I can tell where my time goes.

CO Also do you think you can concentrate on the underlying needs that are being met in your current leisure activities?

CL Yes.

CO So for next week we can pinpoint what leisure time you have.

CL And another goal is to identify my needs that my leisure activities meet, right?

CO Right.

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THE EFFECT OF LEISURE COUNSELING UPON
SELECTED ATTITUDES OF POTENTIAL CARDIAC CLIENTS

by

Thea Marie Hoeft

(ABSTRACT)

The purpose of this study was to verify the efficiency of McDowell's leisure counseling model for potential use with cardiac rehabilitation and intervention programs in effecting leisure attitudes, work attitudes, work self-concept, leisure self-concept and leisure satisfaction.

To test the effectiveness of McDowell's model, an experimental research design, utilizing a pretest-posttest control group design, was used. The independent variable was counseling and the dependent variables, stated as alternative research hypotheses, were a positive effect on leisure self-concept, work self-concept, leisure attitudes, work attitudes and leisure satisfaction. Over a three month period, 24 adult subjects from an Adult Fitness Intervention Program volunteered for leisure counseling and were randomly assigned to one of two groups after which treatment was also randomly assigned. A test for homogeneity of regression revealed the subjects to be representative of the population on all variables except Work Self-Concept. In the study, a client typically was married, middle-aged, white-collar male worker.

To measure the dependent variables, five instruments designed to be used with McDowell's model were used. The data obtained from the leisure counseling sample was first subject to a test for homogeneity of regression after which hypotheses one, two, three and five, were subjected to an analysis of covariance.

The findings of the analysis of data allowed for the rejection of the null hypotheses and the acceptance of the research hypotheses for hypotheses two and five. For hypotheses one and three, the researcher failed to reject the null hypothesis, and rejected the research hypothesis. An interpretation of these findings suggested that leisure counseling using McDowell's model can effect one's leisure self-concept and leisure satisfaction.

From the study it was concluded that for the sample studied McDowell's leisure counseling model can be said to have positively increased the clients' leisure self-concept and leisure satisfaction on a short term basis. It was also concluded that leisure counseling as a component of cardiac rehabilitation/intervention programs using McDowell's model was said to be neither effective or ineffective for the sample studies. These results must account for the fact that the research methodology was not able to identify the possible reactive effect of the pretest.