

EMPATHIC UNDERSTANDING AND FEELINGS IN CLIENT-CENTERED THERAPY ¹

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Experienced client-centered therapists and other students of Carl Rogers's theory of therapy agree that the client-centered conception of empathic understanding gives emphasis to the client's feelings in the therapy process. In the process of empathic understanding response interactions the therapist is highly attuned and responsive to the client's feelings. In that process the therapist ". . . senses accurately the feelings and personal meanings that the client is experiencing . . ." (Rogers, 1980, p 116).

The precise meaning of "feelings" and the precise function of the language of feelings, however, are not fully articulated by Rogers or others when describing empathic understanding in client-centered therapy. The meaning and the function of "feelings" in empathic understanding are, consequently, somewhat confusing to students. The approach is particularly misunderstood when Rogers is interpreted to be advocating that the therapist respond to the "hot" emotions or feelings in the client's communication (Zimring, 1990, p. 436).

In fact, Rogers's conception of empathy is different and more complex than simply responding to feelings. Rogers stated:

. . . being empathic is to perceive the internal frame of reference of another with accuracy and with the emotional components and meanings which pertain thereto . . . it means to sense the hurt or the pleasure of another as he senses it and to perceive the causes thereof as he perceives them . . . (Rogers, 1980, p 140).

In other words, client-centered empathy refers to empathic understanding of the client's entire presented internal frame of reference which includes perceptions, ideas, meanings and the emotional-affective components connected with these things as well as the client's feelings and emotions per se.

Several studies (Brodley & Brody, 1990; Brody, 1991; Brodley, 1994; Merry, 1994; Nelson 1994; Bradburn, 1996; Diss, 1996) attempt to elucidate Rogers's conception of client-centered therapy by examining Rogers's empathic responses in samples of Rogers's own therapy inter-

views. The results of the Brodley and Brody (1990) and the Brody (1991) studies, along with a subsequent analysis by the writer of several additional interviews by Rogers, show that Rogers uses feeling words – words that explicitly designate feelings or emotions – in only twenty-four percent (24%) of his empathic responses. Obviously, more is involved in Rogers's empathic behavior than responses designating feelings.

In addition to words for the clients' feelings, Rogers uses words in his empathic responses that are not precisely feeling words, but are words that express dispositions (such as "prefer," "alienate," "seduce"), evaluations (such as "denigrate," "value," "assess") and volitions (such as "determine," "resist," "reject"). Words that express dispositions, evaluations, and volitions occur in approximately forty-eight percent (48%) of Rogers's empathic responses – twice as many such words than words for feelings.

On the basis of the research findings and careful reading of Rogers's writings, it appears to be more accurate, when discussing client-centered empathy, to not over-generalize the meaning of "feelings." It seems to be more faithful to Rogers's theory, as it is enlightened by his therapy behavior, to clarify that Rogers's conception of empathic responses emphasizes **the client's perceptions and the ways in which the client as a self is an agency or an active force and a source of meanings, reactions and other experiences**. The client represents self as a source, of course, in his or her expressions of feelings as well as other experiences.

The studies of Rogers's therapy behavior (e.g., Brody, 1991) reveal that approximately ninety percent (90%) of Rogers's empathic following responses either explicitly or implicitly communicate that Rogers is understanding the client as a source of reactions and meanings. Approximately seventy percent (70%) of Rogers's total empathic following responses are found to be explicit in expressing the client's reactions and meanings. Approximately twenty percent (20%) are implicit or indirect. Thus, ninety percent (90%) of Rogers's empathic following responses either use specific words that express the client's self as a source of reactions (words for feelings, dispositions, evaluations, volitions or other forms) or meanings, or they communicate self as a source of experiences implicitly or indirectly.

An example of interaction between Rogers and a client wherein Rogers's empathic response includes no words for feelings but nonetheless expresses the client as a source of experiences:

Mrs Roc: Inside my head I'm rushing around and saying "Oh, I want my mama. Oh, what's wrong? Oh, help me." And I guess I have the hook instead.

Rogers: But there is just that pleading feeling in you, "Mama, somebody, help me, do things for me, take care of me." And you feel the only substitute you have for that is, is the hook in your head (Rogers, 1955a).

An example from another client that includes no words for feelings:

Ms I: . . . feeling I have to entertain and then I get taken care of. Yeah, that's it, an "entertain" analogy. And not quite knowing what to do after the introductions. And feeling I just can't . . . just be.

Rogers: That's the essence of it, that you ought to be entertaining or you ought to have something well in mind. The notion of just **being** . . . that doesn't seem possible (Rogers, 1983).

The studies by the writer and Brody also show that Rogers's clients correct his empathic responses less than one percent (1%) of the time. From this observation, and from the observation

that Rogers's clients frequently acknowledge the accuracy of his empathic responses, and from observations that clients manifest productive narrative and expressive processes following Rogers's responses (Diss, 1996), we infer that Rogers's empathic responses are perceived as accurate by his clients most of the time. It seems justified to further infer that Rogers's clients feel understood largely because he is picking up on the way they are expressing their selves as sources of reactions and experiences.

Feelings are only a portion of the experiences clients express about themselves. In a recent analysis of twenty-five of Rogers therapy interviews, Bradburn (1995, personal communication) found that 27% of Rogers's clients' statements were **without** affective features. These clients' statements expressed personal meanings, perspectives and information. Thus, for the sake of accurate empathic understanding, it is appropriate that the therapist not read in feelings when empathically following the client.

In therapy interactions, as the client narrates and lays out his or her life situations, there are (interspersed before, within or after the information about situations, events, people and things) communications expressing the client's subjective reactions. Clients' descriptions of situations, events, people and things are important aspects of their phenomenal field. It is thus important that the descriptions be understood and respected in empathic interactions. It is, however, not until the client has in some way revealed his or her particular relation to the situations, etc. that the therapist has the basis for true empathic understanding.

It may clarify this point to give examples of different client communications which offer different kinds of information relevant to the question of what allows understanding to be truly empathic understanding. Rogers produces empathic responses that are purely information about situations, events, people or things in approximately five percent (5%) of his empathic following responses (Brody, 1991; Brodley, 1994). Pure information responses are, usually, responses to client statements which are, equally, purely informational. Such client statements do not reveal the client's reactions or the client's personal relation to what he or she is talking about. The following is an example of a purely informational statement:

Client: He called me up at work and wanted to see me again.

Obviously, this statement, by itself, does not communicate what the call means to the client. Nor does it communicate the client's feelings or other reactions to the call. It is possible, and sometimes is the case, that such a purely informational type statement by a client does suggest the client's reactions. This occurs when the client has previously informed the therapist about the meaning or impact this event has had in the past or about the meaning or impact the client has predicted it would have if it were to occur in the future. Standing alone, however, the statement does not tell the listener what it means to the client, nor does it reveal the client's reactions.

The client-centered therapist might offer a following type of response to the statement above that research (Brodley & Brody, 1990) has classified as a "pure information" empathic following response – such as "He called." As mentioned above, Rogers occasionally produces this type of response. It appears to serve almost the same role as "umhum," "OK," "yeah," and nonverbal nodding responses. Any of which simply signal to the client that the therapist is attentive, is attempting to follow, and is understanding in a general sense.

A slightly different client statement, giving information that could be the basis for true empathic understanding is as follows:

Client: He **finally** called me up and wanted to see me again.

The emphasized **finally** communicates something of the client's reaction to the event. It does not express enough information, however, for the therapist to know exactly what experiences (meanings, feelings, other reactions) are alluded to. The therapist, nevertheless, might make a true empathic response to this communication, although it would be limited in its differentiation of meaning. The therapist might respond by saying "**Finally!**" which could communicate to the client the therapist's sense that the client had some strong feelings and that the client had been waiting to hear from the man.

Alternatively, the therapist might simply absorb the "**finally**," maintain empathic attention to the client and wait for more material that might communicate the client's reactions, thoughts, feelings or whatever other expression of the client's self might be involved. The client's "**finally**" in any case would have increased the therapist's experience of empathic understanding.

The following example of a client statement expresses information that is differentiated in respect to the client's reactions and, consequently, makes it possible for the therapist to more fully empathically understand the client in the moment.

Client: He called me up at work and wanted to see me again. (Pause) **Finally!**
(Pause) I was so busy I couldn't talk, but I was emotionally all over the place
and couldn't concentrate for the rest of the afternoon. (Pause) **I'm such a sap!**
He's a complete asshole, but I'm still dying to see him.

Putting aside the organization of the client's meanings and the question of the main thrust of the client's agency in this example, the elements that could contribute to **true** empathic understanding of the client are: "**Finally!**" (because of the vocal emphasis); "emotionally all over the place"; "couldn't concentrate"; "I'm such a sap!"; "He's a complete asshole" (inferentially); "I'm dying to see him." Notably, none of these statements directly and explicitly state the client's **feelings**, although the entire statement is pregnant with feelingful expression and allusion to feelings.

There are a number of different possible empathic following responses which a therapist might make to check his or her understanding of what the client has been expressing in the above statement. One possible response is:

Therapist: You feel you're a fool to want a person who upsets you so badly,
but . . . you do want him!

An alternative response, that might express the therapist's inner empathic understanding in response to the client statement above is:

Therapist: You got what you were waiting for, but it brings with it a lot of
mixed feelings.

Only the client can tell us which, if either, of these responses is the more accurate. It is likely that either response would be accepted by the client as representing the therapist's sincere intentions of trying to understand. The client's statements revealed her various experiences in relation to the situation of the call. These expressions of her **self** permit the therapist to have an experience of, and to communicate, empathic understanding.

Most of Rogers's responses to his clients express his immediate grasp of the meanings the client is attributing to situations or the client's reactions to what he or she is talking about. Exceptions, as noted above, are a small percentage of Rogers's responses which are purely informational following responses, such as "He called you."

Purely informational responses are forms of empathic following that occasionally occur in a client-centered therapist's sequence of empathic understanding interactions with a client. Clients, however, would not be likely to experience the feeling of being empathically understood if this informational form were the only form of response the therapist expressed in the extended interaction.

According to client-centered theory (Rogers, 1957), the client's perception of the therapist's acceptant empathic understanding is necessary for therapeutic change. The therapist fosters this perception through many interactions by empathically following the client's narrative. The perception is fostered most particularly when the therapist is understanding the aspects of the client's communication in which the client is expressing his or her relation to the situation. This occurs when the client is expressing self-agency. Self as the source of meanings, or reactions, or experiences in relation to the situations being disclosed.

THE THERAPIST'S INTENTIONS AND EFFECTS OF EMPATHY

The client-centered therapist's immediate intention when making an empathic response is to check, test or verify the accuracy of his or her subjective empathic understanding (Brodley, 1985; Rogers, 1986). This is done by the therapist communicating his or her inner understanding to the client for the client's verification, correction or modification. The communication may be through words, gestures, body language or vocal intonations. The form of communication is only important in that it must be one the client is able to perceive in order to evaluate its accuracy. The client is viewed as the expert, the authority, about his own intentions, meanings and feelings.

There are two frequently observed effects of accurate and acceptant empathic understanding when they are perceived by clients. One is that the client elaborates, develops and reveals more of his or her phenomenal world to the therapist. The other is that clients tend to become more consistently and intently focused on, and express themselves from, the experiential source of what they are talking about. In other words, there is a frequent focusing effect of client-centered empathic work. Although this is not the intention of the therapist when making empathic responses (Brodley, 1991).

From the point of view of Rogers's process theory of change in client-centered therapy (Rogers, 1956; 1958; 1961; 1980; Gendlin, 1964), the focusing effect of empathic following is desirable and considered therapeutic. Although the focusing effect is notable and may be considered theoretically desirable – it is serendipitous in the existential interaction. The client-centered therapist does not deliberately intend to produce the focusing effect. It is not the motivating reason the therapist makes an empathic response.

The client-centered therapist's empathic intention is to acceptantly understand. Rogers himself is very clear in his writings that he has no goals for his clients (Baldwin, 1986, p 47). His therapy behavior is highly consistent with this nondirective principle although there are some infrequent exceptions (Brodley, 1996). Theoretically, and usually in practice, client-centered therapists' immediate interaction goals are strictly goals for themselves – to experience and offer the attitudinal conditions of congruence, unconditional positive regard and empathic understanding in the relationship with their clients. This is an implication of the nondirective attitude which is intrinsic to client-centered therapy. The focusing effect of empathic understanding is, consequently, serendipitous even though predictable.

THE CONNECTIONS BETWEEN TRUE EMPATHY, FEELINGS AND EXPERIENCING

The therapist's acts of true empathic understanding, in themselves, tend to stimulate clients to be in touch with the underlying experiential source of their self-disclosures and self-representations. The client hears the therapist's empathic response and checks with his or her inner

source. In this way the client is attuned to find out whether or not the therapist's communicated perceptions of the client's meanings and feelings are consistent with what the client was trying to express. Rogers asserts that this checking within phenomenon, observed in clients when they are empathically understood, is based on a natural and basic characteristic of human functioning. He states:

...at all times there is going on in the human organism a flow of experiencing to which the individual can turn again and again as a referent in order to discover the meaning of those experiences (Roger, 1980, p 141).

People are not aware that they are checking with their subjective flow of experiencing when they reflect upon their feelings, their reactions and upon what things mean to them. Such self reflection is spontaneous, not self-conscious, and is a natural process for most people. Regardless of whether or not clients are aware of the process of referring to their own experiencing in the particular instances, the client-centered therapeutic attitudes promote and enhance this natural process.

The fundamental empathic activity in client-centered therapy is the therapist's intention to subjectively experience the clients intentions in their communications. In order to be sure subjective understandings are accurate, the therapist attempts to find out from the client. This desire to verify inner experience of understanding brings about the therapist's communications of empathic understanding, often in the form of empathic understanding responses. The therapist's attempts to find out if his or her subjective understandings are accurate or not according to the client, stimulate the client toward an attunement to the qualities and contents of his or her own experiencing. The key element in the therapist's stimulation of the client towards attunement to his or her own experiencing is the therapist's attunement and responsiveness to the client's self-agency – to the client's perceptions, feelings and other elements of the client's self as a source of experiences.

It is generally the case, if we are trying to understand another person empathically, that we find ourselves making statements that include references to the other person as a self who is an active force, an actor or agency in the creation of meanings and reactions. We make statements that include elements such as "you want," "you feel," "you think," "you know," "you reject," "you wonder," "you were full of conflicting reactions," "you expect," "you believe," and so forth. Although not intended to have this effect, in making these references we stimulate the other person to attend to his or her self as a source – a source of wants, feelings, perceptions, and so forth. These references to the person's self as an actor or agency and as a source tend to attune the person to his or her phenomenologic source – what Rogers calls "experiencing" (Rogers, 1959).

One cannot authentically, with personal authority, agree or disagree with an empathic statement unless one attends to the experiential source of meanings and feelings. Without the authority of one's inner sense of meanings, agreement or disagreement is at most a purely logical conclusion, or it is based on conventional beliefs and is not a personal truth. In client-centered therapy empathic responses always implicitly contain the question to the client "Do you feel this is an accurate understanding of what you have been intending to express to me?" The combination of the fact that the therapist is seeking validation of his or her empathic understanding and also that it is in the nature of empathic responses to be communicating about activities of the client's self tends to stimulate the client to attend to inner experiencing.

The client's checking within process, that tends to be stimulated by the therapist's empathic responses, is a spontaneous focusing activity on the part of the client. Such focusing acts recur

over and over in the client-centered empathic following process. To the extent the therapist does **not** shift away from acceptant and empathic attitudes (and in that way distract the client with external foci such as the therapist's ideas about the client), the process of empathic following facilitates the client's focus on his or her phenomenologic experiencing.

ROGERS'S USE OF THE WORD "FEELING"

Another observation from research that contributes to clarifying the connection between empathy, experiencing and feelings in client-centered therapy is that Rogers uses the words "feel," "feels," "feeling," or "feelings" in more than half of his empathic following responses (Brodley & Brody, 1990). He does so in responses that **do not**, as well as in responses that do, include words or phrases that communicate specific feelings. Following are examples of Rogers's usage of "feel," etc. in some of his empathic understanding responses in therapy interviews:

You feel there's so little chance of anyone else really understanding you (Rogers, 1977).

You'd like to be aware of your feelings about these demands, right at the time they happen instead of having bright thoughts afterwards (Rogers, 1955b).

You feel at a stage. And when you work through some of the other things in the background, that may straighten out too (Rogers, 1947).

A really contradictory feeling that "I don't want to be a person who just gives in to all demands" and, yet, feeling "that's the only chance I have of being loved" (Rogers, 1955b).

These examples of Rogers's empathic responses illustrate that he uses the words "feel," etc., in several ways. One way he uses these words is as synonyms for "think," "believe," "imagine," "know" or "perceive," etc. This synonymous usage of the word "feel" carries the message that there are emotions or feelings or emotional components associated with the client's thoughts, beliefs, etc., although the emotions or feelings have not been explicitly stated.

A second way Rogers uses the words "feel," etc., in his empathic responses, is to refer to an inner experience – to something in the realm of subjective experiencing – of the client without naming it. For example:

Rogers: You'd like to be aware of your feelings . . .

A third way Rogers uses "feel," etc., in his empathic responses is to refer to an experience that Rogers does express in the particular empathic response, although the experience is not expressed with any word for feeling. For example:

Rogers: A . . . feeling that "I don't want to be a person who just gives in . . ."

In this usage of "feeling," what is referred to in the client's experience is not expressible (at least at that moment) with a word for feeling, possibly because the experience is too complex or because it may involve feelings for which, in English at any rate, there are no specific words.

Another way Rogers uses the words "feel," etc., is as introduction to an empathic following response. The empathic response itself may or may not include words for feelings, dispositions, evaluations, volitions or other kinds of agency words. Introductions with "feel," etc., are heuristic

or at least expressive of the way the remainder of the empathic response refers to experiencing. For example:

Rogers: You feel there is so little chance

Each of the usages of the words "feel," etc., which are so frequent in Rogers's empathic responses, express Rogers's attunement to the experiential source of feelings and meanings. The frequent expression of these words tends to attune the client to the client's own experiencing. The usages take advantage of the way in which "feel," etc. allude to the source of responses within a person's self in the English language. This is not to suggest that Rogers is deliberately trying to direct or instruct his clients to attend to experiencing. Rather, true empathic responses communicate the client's self agency and express the empathic attitude. This pattern of behavior in client-centered work has the effect of attuning clients to their feelings and to other facets of their own experiencing.

SUMMARY

Client-centered empathy is not intended to discriminate the client's feelings out of the matrix of the client's communication and self-expression. The therapist's experience of empathic understanding includes understanding of the client's feelings, dispositions, evaluations, volitions, personal meanings, perspectives, explanations and information. The therapist gives the client's narratives respectful attention and follows all elements in them. The therapist, however, does not achieve true empathic understanding until understanding the elements expressive of the client as a self and particularly as a self-agency. The client's perception that the therapist understands these elements is crucial to the client feeling empathically understood.

A focusing effect is a natural and ubiquitous effect upon clients when they perceive they are truly empathically understood. The empathic interaction stimulates the person who feels understood in this way to attend to their own experiencing and to represent himself or herself more acutely from their experiential source. The therapist's recognition of the client as agency – actor and reactor – in empathic responding, and the client's perception of this recognition by the therapist, are keys to the focusing effect.

In addition to the focusing effect of empathic recognition of the self-agency of clients, the ways in which Rogers uses the words "feel," "feels," "feeling," "feelings" in his empathic responses tend to allude to, and also attune the client to, his or her experiencing. Both of these features of Rogers's empathy – empathic recognition of self-agency and the usages of "feels," "feeling," etc. – help to clarify client-centered therapy and its concept of empathic understanding.

It is crucial for correct understanding of client-centered therapy, however, to realize that the focusing effects stimulated by empathic behavior are and should remain serendipitous. The therapist does not deliberately attempt to focus clients on their experiencing processes. If the therapist implements such a goal for the client, he or she is stepping outside of client-centered therapy.

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FOOTNOTES

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