



Western Michigan University  
ScholarWorks at WMU

---

Dissertations

Graduate College

---

6-1992

## Career Dynamics of Counselor Trainee Stereotyping: Bias Toward Physical Ability, Social Class, Gender, and Race of Clients

J. Stephen Neynaber  
*Western Michigan University*

Follow this and additional works at: <https://scholarworks.wmich.edu/dissertations>



Part of the Counseling Commons

---

### Recommended Citation

Neynaber, J. Stephen, "Career Dynamics of Counselor Trainee Stereotyping: Bias Toward Physical Ability, Social Class, Gender, and Race of Clients" (1992). *Dissertations*. 1974.

<https://scholarworks.wmich.edu/dissertations/1974>

This Dissertation-Open Access is brought to you for free and open access by the Graduate College at ScholarWorks at WMU. It has been accepted for inclusion in Dissertations by an authorized administrator of ScholarWorks at WMU. For more information, please contact [wmu-scholarworks@wmich.edu](mailto:wmu-scholarworks@wmich.edu).



**CAREER DYNAMICS OF COUNSELOR TRAINEE STEREOTYPING:  
BIAS TOWARD PHYSICAL ABILITY, SOCIAL CLASS,  
GENDER, AND RACE OF CLIENTS**

by

**J. Stephen Neynaber**

**A Dissertation  
Submitted to the  
Faculty of The Graduate College  
in partial fulfillment  
of the requirements for the  
Degree of Doctor of Education  
Department of Counselor Education  
and Counseling Psychology**

**Western Michigan University  
Kalamazoo, Michigan  
June 1992**

**CAREER DYNAMICS OF COUNSELOR TRAINEE STEREOTYPING:  
BIAS TOWARD PHYSICAL ABILITY, SOCIAL CLASS,  
GENDER, AND RACE OF CLIENTS**

**J. Stephen Neynaber, Ed.D.**

**Western Michigan University, 1992**

**Three different attitude surveys, developed by the researcher, were administered to counselor trainees ( $N = 200$ ) at Western Michigan University: The Attitudes of Counselor Trainees (A.C.T.) Survey, Multicultural Beliefs Inhibiting Appropriate Support (M-B.I.A.S.) Survey, and Career Beliefs Inhibiting Appropriate Support (C-B.I.A.S.) Survey. A 24-item demographics questionnaire was administered to trainees ( $n = 124$ ) who completed the A.C.T. Survey. A six-items Likert scale produced significant effect ( $p < .05$ ) on counselor trainees' ratings of clients' potential for career success: (1) Awareness of Personal Strengths and Weaknesses, (2) Goal Orientation, (3) Self-esteem, (4) Energy Level, (5) Participation in Extracurricular Activities, and (6) Level of Honesty.**

**Five client demographic oppression variables, which the review of literature documented to evince negative bias from counselors, were included in 16 hypothetical client scenarios: physical handicaps (viz., hearing impairment and paraplegia), female sex, African-Americans, low social-class, and low career motivation. These five stigmatized client variables were incorporated into multi-dimensional hypothetical career counseling intake scenarios so as to reflect the realistic multiple-dimensions of clients and to reduce faking responses by the participants.**

**The surveys proved their ability to elicit negative bias by counselor trainees toward hypothetical clients with varying combinations of multiple oppressions. They**

revealed significant and predictable patterns of bias against populations who represent low social-class and physical disabilities. However, a trend toward patterns of over-compensation (i.e., reverse discrimination), favoring African-American and women clients over Caucasian and male clients indicates an ability to fake responses toward gender and race.

The demographic survey revealed the value of experiential contact and undergraduate "pseudo-experiential" learning about multicultural and physically disabled populations. A statement of high career motivation by clients with multiple oppressions reversed the primary negative bias ratings of the counselor trainees.

The results of all three surveys indicate that they are relatively non-transparent instruments which provide reasonably valid information on ability and social-class stereotyping patterns of counselor trainees. The M-B.I.A.S. and C-B.I.A.S. Surveys proved to be effective inservice training tools for initiating attitudes awareness among graduate students in the helping-professions.



## INFORMATION TO USERS

This manuscript has been reproduced from the microfilm master. UMI films the text directly from the original or copy submitted. Thus, some thesis and dissertation copies are in typewriter face, while others may be from any type of computer printer.

The quality of this reproduction is dependent upon the quality of the copy submitted. Broken or indistinct print, colored or poor quality illustrations and photographs, print bleedthrough, substandard margins, and improper alignment can adversely affect reproduction.

In the unlikely event that the author did not send UMI a complete manuscript and there are missing pages, these will be noted. Also, if unauthorized copyright material had to be removed, a note will indicate the deletion.

Oversize materials (e.g., maps, drawings, charts) are reproduced by sectioning the original, beginning at the upper left-hand corner and continuing from left to right in equal sections with small overlaps. Each original is also photographed in one exposure and is included in reduced form at the back of the book.

Photographs included in the original manuscript have been reproduced xerographically in this copy. Higher quality 6" x 9" black and white photographic prints are available for any photographs or illustrations appearing in this copy for an additional charge. Contact UMI directly to order.

# U·M·I

University Microfilms International  
A Bell & Howell Information Company  
300 North Zeeb Road, Ann Arbor, MI 48106-1346 USA  
313/761-4700 800/521-0600



**Order Number 9229588**

**Career dynamics of counselor trainee stereotyping: Bias toward physical ability, social class, gender, and race of clients**

**Neynaber, J. Stephen, Ed.D.**

**Western Michigan University, 1992**

**Copyright ©1992 by Neynaber, J. Stephen. All rights reserved.**

**U·M·I**

**300 N. Zeeb Rd.  
Ann Arbor, MI 48106**



**Copyright by  
J. Stephen Neynaber  
1992**

## **DEDICATIONS**

**This dissertation is posthumously dedicated to the enduring spirits of my grandparents, Ray and Beatrice Neynaber. They clearly foresaw my inner potentials and continuously offset stereotypical naysayers whose fear of difference resulted in well-intentioned derogations of, "don't, shouldn't, and can't." My grandparents taught me that a "Handicap" is the extra weight put on a thoroughbred, so that the others can keep up. May the readers of this dissertation, like my grandparents, become enlightened torchbearers and paradigm-busters on behalf of the next generation of overcomers.**

**My dissertation research is also lovingly dedicated to all the people affiliated with the Arthritis Foundation and the March of Dimes--past, present, and future. Also included, are the cadre of rheumatologists, orthopedic surgeons, social workers and counselors, medical researchers, physical and occupational therapists, computer hardware and software design engineers, teachers, parents, and all the financial supporters who make it possible for juveniles with physical disabilities to live productive and meaningful lives.**

## ACKNOWLEDGMENTS

Writing this dissertation has been metaphorically similar to my starring in a theater production (i.e., I get to be a star in the limelight, while a wonderfully talented support staff is under-recognized by a symbolic burial within the acknowledgement/ credits of a program which practically nobody will read!). So for my enlightened fans who deserve so much more, here is a four-page smorgasbord of gratitude!

With great pleasure and sincere gratitude I acknowledge the many roles that Dr. Thelma Urbick has played in my life as teacher, mentor, counselor, motivator, and most of all, friend. Thelma is a free-thinker, and she has a way of helping us other free-thinkers feel normal! She teaches by example and has been the living definitions of "caregiver" and "integrity." She is a magnet to the oppressed, minority, poor, disabled, and non-traditional students. Of all her attributes, I most admire her self-appointed role as an American ambassador to international students.

My dissertation committee also deserves many kudos for their continuous, positive support. My heartfelt thanks to Dr. Joseph Morris, who inspired this dissertation topic and steered me towards valuable research leads throughout the process. I also am especially grateful for the time and energies dedicated by Dr. Robert Brashear for his gifted ability to change the intimidation of computing statistics into a fun adventure. Thanks also to Stavros Pauloukas for his statistical analysis support.

I am greatly indebted to the special people who displayed belief in me long before they had sufficient rationale to do so. These are the people who said to me, "Just Do It!" A special thank you goes out to Dr. Arthur I. Melvin, founder of the

### Acknowledgements--Continued

Century III Foundation, in Illinois. Art taught me to appreciate the process of "valuing," and was the first to encourage me toward continuing my education.

My graduate department chairs at two universities deserve special mention for their personal interventions in my academic progress. They are Dr. Gary Johnson and Dr. James Beggs, from San Jose State University, and Dr. Alan Hovestadt, from Western Michigan University. Also important to my professional successes have been my career counseling mentors, Jerry Brody, Debra Sampson-Boogaard, Dr. Sally Brew, Dr. John Geisler, Richard Knowdell, and Dr. Thelma Urbick. Special thanks go to my counseling practicum supervisors, Cheryl Allmen, Dr. Robert Betz, and Dr. Jody Newman. My sincere gratitude is extended to Dr. Gilbert Mazer, who provided the framework for the design of my research instrument. Special acknowledgement goes to Dr. Merze Tate for providing a multi-million dollar research center, with state of the art computer equipment and study facilities through an endowment to Western Michigan University.

Providers of monetary support have played an important role in allowing me the luxury to quit my job in order to pursue a doctoral degree, full-time. Dr. Alan Hovestadt provided two graduate assistantships. Also, special appreciation is extended to my father, Joe Neynaber, who provided me with a rent-free apartment where I could "hide out" from bill collectors long enough to write this "masterpiece"!

My parents have been a continual resource of love and support throughout this "social experiment"; each has served as a role-model by continuing to advance their respective college educations. I am especially appreciative for the dedication of my mother, Marjorie Michael, toward preserving the institution of full-time motherhood during my formative years, especially during an era when society was bent on



### Acknowledgements--Continued

mocking the traditional values exemplified by television's June Cleaver and Donna Reed. My mother also became a living example for me of "resilience," when she returned to college to finish her degree and then taught at an urban elementary school.

One of the greatest serendipities of moving back to Michigan for this degree has been a reconnecting with my sister, Katy. I have learned to appreciate that she is much more than my baby sister; at thirty-something, she is a woman, a great friend, and a professional peer. My brother, Andy's, continued prayer support and telephone calls have made a significant contribution toward keeping me on-task.

My many friends, who have displayed extraordinary empathy and encouragement over my tenure as a professional student, deserve so much more than a simple acknowledgement. Though I cannot mention them all, I recognize and cherish the help and concern of all the "significant-others" in my life. My special thanks are extended to Larry Berman, Dr. Bill Brown, Jim and Gale Deuel, Ronald Harper Dowdell, Alan and Pat Erikson and their family, Steve and Cathy Haas and their family, Bob Hampton, Frank and Rita Kovacic and their family, Tim Martin, Fumie Murase, Tom Newton, Ed Renich, Charles and Elain Stefanac, Ric and Polly Victorsen, and Dr. Beverlee White. These are the people I know I can count on to telephone and write to me with encouragement on a regular basis, and these are the people who regularly invite me to their family dinner tables and who, when I am away from my home and family, insist that I stay in their homes in lieu of a hotel.

To Missy Kovacic, my dearest friend and companion, I extend my gratitude for the continuing support, kindness, love, attention, concern, responsibility, creativeness, faith, patience, and self-discipline that she has extended to me over the past years.

### **Acknowledgements--Continued**

**Now, as I reflect on all the inner strength and devotion these people have displayed through it all, I can only conclude that I am a very fortunate man to have had each and every one of them contribute to the metamorphosis of my life.**

**J. Stephen Neynaber**

## TABLE OF CONTENTS

ACKNOWLEDGMENTS . . . . .	ii
LIST OF TABLES . . . . .	x
LIST OF FIGURES. . . . .	xi
CHAPTER	
I. INTRODUCTION . . . . .	1
Background of the Problem . . . . .	2
International Perspective . . . . .	3
Bias in Counselor-Client Relationships. . . . .	4
Statement of the Problem . . . . .	5
Singular Versus Multiple Dimensions in Counseling. . . . .	5
Limitations of Attitude Assessment Instruments. . . . .	8
Research Question . . . . .	10
Definition and Discussion of Terms . . . . .	10
II. REVIEW OF RELATED LITERATURE. . . . .	16
History of Research in Counselor Stereotyping . . . . .	16
Research in Cause and Effect Relationships . . . . .	18
Early-Education Bias Prevention. . . . .	19
Reframing Teachers' and School Counselors' Racial Bias . . . . .	20
Reframing High School Teachers' Career Bias. . . . .	21
Academic Versus Vocational Education . . . . .	22
Review of Multicultural Education Models . . . . .	23
When Multicultural Education Is Not Effective . . . . .	23
Successful Stereotype Reversal . . . . .	24

## Table of Contents--Continued

### CHAPTER

	Review of Counselor Training Models Designed to Expose and Change Negative Bias . . . . .	26
	Use of Attitude Surveys . . . . .	32
	Negative Effects of Labeling . . . . .	34
	Stigmatization Perpetuated by Mislabeling . . . . .	35
	Prejudicial Labeling in Language . . . . .	36
	Intake Bias in Labeling. . . . .	37
	Ability Bias in Labeling . . . . .	38
	Gender Bias in Labeling . . . . .	44
	Racial Bias in Labeling. . . . .	45
	Social-Class Bias in Labeling. . . . .	50
	Career Dynamics of Counselor Bias . . . . .	51
	Ability Bias in Career Counseling . . . . .	52
	Gender Bias in Career Counseling . . . . .	53
	Racial Bias in Career Counseling. . . . .	55
	Social-Class Bias in Career Counseling . . . . .	57
	Summary of Literature Review. . . . .	60
	Focus of Study . . . . .	62
III.	DESIGN AND METHODOLOGY. . . . .	63
	Population and Selection of Sample . . . . .	63
	Attitudes of Counselor Trainees (A.C.T.) Survey . . . . .	64
	Design of Intake Scenarios . . . . .	64
	Rating Scale Design and Rating Scale Items. . . . .	66
	Survey Scoring Procedures . . . . .	67

## Table of Contents--Continued

<b>CHAPTER</b>		
	Multicultural - B.I.A.S. and Career - B.I.A.S. Surveys. . . . .	67
	Counselor Trainee Demographics Questionnaire. . . . .	68
	Null-Hypotheses . . . . .	69
<b>IV.</b>	<b>ANALYSIS AND INTERPRETATION OF DATA. . . . .</b>	<b>71</b>
	Normative Scores of Intake Scenarios . . . . .	102
	Client Characteristics Producing Favorable Effect on Counselor Trainees' Ratings of Clients. . . . .	102
	Findings of the A.C.T. Survey . . . . .	108
	A.C.T. Survey: Demographics Questionnaire . . . . .	109
	A.C.T. Survey: Rating Scale Items. . . . .	117
	Summary of Findings. . . . .	122
<b>V.</b>	<b>CONCLUSIONS AND RECOMMENDATIONS. . . . .</b>	<b>126</b>
	Summary . . . . .	126
	Implications for Continued Research. . . . .	127
	Continuing Beyond the Limitations of This Study. . . . .	126
	Survey Adaptations. . . . .	130
	Recommended Workshop Formats For M-B.I.A.S. and C-B.I.A.S. Surveys . . . . .	133
<b>APPENDICES</b>		<b>136</b>
<b>A.</b>	<b>Sample A.C.T. Survey: Instructions. . . . .</b>	<b>137</b>
<b>B.</b>	<b>Sample A.C.T. Survey: Counselor Trainee Demographics Survey . .</b>	<b>139</b>
<b>C.</b>	<b>Sample A.C.T. Survey: Rating Scale . . . . .</b>	<b>141</b>
<b>D.</b>	<b>Sample A.C.T. Survey: Intake Scenarios Forms A, B, C, D. . . . .</b>	<b>144</b>
<b>E.</b>	<b>Sample Multicultural B.I.A.S. Survey and Workshop. . . . .</b>	<b>149</b>

**Table of Contents--Continued**

<b>F. Sample Career B.I.A.S. Survey and Workshop. . . . .</b>	<b>159</b>
<b>BIBLIOGRAPHY. . . . .</b>	<b>169</b>

## LIST OF TABLES

1.	Demographic Variations of Client Intake Scenarios in the Attitudes of Counselor Trainees (A.C.T.) Survey . . . . .	7
2.	Attitude Semantics: Selected Related Cognitive Patterns of Bias. . . . .	11
3.	Normative Scores: Attitudes of Counselor Trainees (A.C.T.) Survey. . . . .	72
4.	A.C.T. Survey Client Demographics: Analysis of Variance in Client Demographic Characteristics Producing Effect on Counselors' Ratings of Clients. . . . .	74
5.	A.C.T. Survey Client Demographics: Means of Client Demographic Characteristics Producing Effect on Counselors' Ratings of Clients. . . . .	75
6.	Normative Scores: Multicultural Beliefs Inhibiting Appropriate Support (M-B.I.A.S.) Survey . . . . .	76
7.	Normative Scores: Career Beliefs Inhibiting Appropriate Support (C-B.I.A.S.) Survey. . . . .	78
8.	A.C.T. Survey - Counselor Trainee Demographics Questionnaire Analysis of Variance: Counselor Trainee Demographic Characteristics Producing Effect on Counselor Trainees' Ratings of Clients. . . . .	80
9.	A.C.T. Survey - Counselor Trainee Demographics: Means of Counselor Trainee Demographic Characteristics Producing Effect on Counselor Trainees' Ratings of Clients. . . . .	83
10.	A.C.T. Survey - Client Rating Form Analysis of Variance: Rating Form Items Producing Effect on Counselor Trainees' Ratings of Clients . . . . .	94
11.	A.C.T. Survey - Rating Form: Means of Rating Form Items Producing Effect on Counselor Trainees' Ratings of Clients. . . . .	96

## LIST OF FIGURES

1.	A.C.T. Survey - Interaction Plot: Effect of Class x Ability on Counselor Trainees' Ratings of Clients. . . . .	73
2.	M-B.I.A.S. Survey Interaction Plot: Effect of Class x Ability on Counselor Trainees' Ratings of Clients. . . . .	77
3.	C-B.I.A.S. Survey Interaction Plot: Effect of Career Motivation on Counselor Trainees' Ratings of Clients. . . . .	79



## CHAPTER I

### INTRODUCTION

Counseling practitioners who work within the context of a multicultural client-base must be especially sensitive to the cultural pluralism of their clients in order for effective counseling to occur. For example, Frank Garcia and Yberra-Garcia (1985), assert that the Chicano culture is too often viewed in a vacuum, without consideration of the multioppressive factors which affect them, such as socioeconomic status, low level of education, and poor identity development.

For more than three decades cross-cultural counselor education models have evolved from glorified history lessons which have spotlighted a few randomly selected racial minorities (D'Andrea & Daniels, 1991), toward a holistic, optimal approach which includes focus on common links in cultural beliefs, values, and world views (Adams, 1981; Ibrahim, 1991; Speight, Myers, Cox & Highlen, 1991). Today, counselor education models concur that in order to enable a counselor's understanding and appreciation of cultural pluralism, counselor training curriculum should include an opportunity for counselor trainees to assess their personal cultural attitudes, with particular attention paid to the negative attitudes which might create potential barriers in cross-cultural counseling. Yet, only a few assessment instruments have been developed for attitude measurement, and most of those have not proven to be effective for graduate level counselor training application. Furthermore, a major limitation to the majority of research which focuses on negative cultural attitudes, is that the research is race-specific and monotypical (e.g., comparing attitudes of Caucasian counselors toward Black clients, or attitudes of males toward females, etc.). While a monotypical focus offers obvious advantages for simplifying research

design, it lacks recognition of the multi-dimensional realities of human beings. Reynolds and Pope (1991) discuss the need to expand traditional concepts of multicultural counseling to include the multiple layers of identity and oppressions in human diversity (i.e., counseling a physically disabled, Afro-American female, with a hearing impairment). One example of a study which acknowledges the multi-pluralistic realities of clients focused on providing culturally-appropriate counseling services to American Indians with physical disabilities (Marshall, Martin, Thomason, & Johnson, 1991).

### Background of the Problem

Training counselors to be cross-culturally effective has evolved into a two-pronged discipline of cognitive restructuring for the counselor trainee by means of a static informational approach (e.g., reading a book, attending a lecture, or watching an educational movie), and experiential contact (e.g., participating in a cross-cultural workshop or a multicultural internship). While both approaches have been documented to be independently effective to varying degrees, the majority of counselor training literature emphasizes the need for both static informational and experiential contact because they reinforce each other (Ibrahim & Herr, 1982; Martin, Scalia, Gay, & Wolf, 1982). McRae and Johnson (1991) suggest a counselor training model which sensitizes counselors to cultural stereotypes by including four distinct dimensions including a self-dimension, an information and knowledge dimension, a relationship dimension, and performance. When D'Andrea and Daniels (1991) conducted an extensive review of multicultural counseling training programs at universities throughout the United States, they discovered that many counselor education programs are concentrated solely on "cross-cultural awakening," and are

omitting necessary "cultural integrity" and "infusion" stages of cross-cultural counseling. They conclude,

In light of the rapidly changing demographics of our modern society and the impact of multiculturalism as the fourth force in counseling, we predict that the profession will undergo a tremendous transformation during the next two decades. This metamorphosis is fundamentally rooted in the inability of the existing mental health care system to adequately or appropriately meet the needs of an increasingly diverse client base. (p. 84)

### International Perspective

While this research project is primarily directed toward American society, cultural stigmatization among helping-professionals is an international dilemma. International research in counselor stereotypes includes, to name only a few studies, combating negative societal attitudes toward disabled women in Japan (Kojima, 1988), attitudes of French social workers toward their migrant clients (Cohen-Emerique, 1988), school counselors in poor versus affluent neighborhoods in Israel (Yogev & Roditi, 1987), sociocultural stigma attached to blind students in Nigeria (Uba, 1982), and multicultural attitudes in Canada (Berry, 1991; Berry & others, 1976; Darou, 1987; Moghaddam-Fathili & Taylor, 1987; Wierzba, 1989).

Helping-professionals are likely to realize a major shift in multiculturalism as a new wave of globalization in business and government is realized (e.g., the advents of East Germany and West Germany merging, the breakup of the U.S.S.R., and the creation of the Euro-Dollar). Now that the aging American baby-boomers have graduated from college, American colleges have increased their foreign student populations in order to maintain their full-time enrollment, and subsequent tuition revenues. Many American hospitals and factories have realized a shortage of skilled laborers within the past decade, and have resorted to hiring foreign nationals to fill their work force vacancies. Figures from the 1990 U. S. Bureau of the Census

indicate that California's population will be 51% Mexican-American by the year 2000. As the Japanese and Europeans have purchased or built banks, motion picture studios, automobile assembly plants, and other business ventures throughout the United States, both foreign and American business managers are realizing new levels of cultural tension and ethnocentric bipolarization among workers at all levels of the corporate ladder. As foreign work values and communication styles continue to be woven into the American society, new multicultural counseling challenges will surely continue to surface for counselors who work in employment assistance programs (EAP's), schools, and other helping-professions. Therefore, counselors who work with international students on college campuses or with multinational personnel within American businesses should be encouraged to acquire an extra degree of sensitivity to the multicultural differences which are represented by these populations.

### Bias in Counselor-Client Relationships

A plethora of empirically-based literature focuses on bias in counselor-client relationships, with most of the emphasis on the attitudes of clients toward their culturally-different counselors. Much less research has focused on the attitudes of counselors toward their culturally-different clients. Although limited, the research concerning cause and effect counselor-client relationships has consistently revealed that countertransference behavior can be directly linked to the counselor's stereotypes of the client (Fuller & Kern, 1978; Kurpius & Morran, 1987; Nathanson, 1979; Peabody & Gelso, 1981; Sanua, 1977; Sibicky & Dovidio, 1984; Ursprung, 1987).

### Negative Bias of Counselors Toward Clients

Helping-professionals may unknowingly be perpetuating a sense of defeatism in their clients by emanating hidden negative stereotypes (Pedersen, 1991; Priest, 1991).

Research in multicultural stereotypes indicates that graduate students who are majoring in the "helping-professions" harbor negative bias toward persons who are different than themselves (D'Andrea, Daniels & Heck, 1991; Lazar, 1976; Pedersen, 1990; Sue, 1981). D. W. Sue (1981) states that many of the issues in counseling,

are related to cultural differences and the extent to which these differences affect the counseling interview. Cultural considerations have, in large measure, determined how counselors define a client's needs, how they function in the therapeutic situation, and how they determine treatment, cure, and even reality itself. Culture has been, then, the silent intruder in the counseling relationship, and, because of its very silence, it has often gone unrecognized. (p. 162)

### Statement of the Problem

#### Singular Versus Multiple Dimensions in Counseling

Counselor education research continually focuses on single dimensions, rather than multiple dimensions of counselor-client relationships. Most often, researchers focus solely on how males think alike and differently than females, or how Blacks think alike and differently than Caucasians. Thomas and Berven (Gysbers et al., 1984) note that counselors and laypeople alike tend to clump all mentally and physically disabled people together into one undifferentiated category called "disabled" or "handicapped."

#### Multiple Dimensions in Counseling

Reid (1984) questioned the wisdom of separating a Black woman's identity into two single-dimensional oppressions of racism and sexism:

Black women are in the position where, too often, they must decide between their dual identities as Blacks and as women. Sometimes, a decision representing loyalty to one identity results in rejection by the other group members, hence a double bind. (p. 247)

When Steele and Smithwick (1989) asked college students to rate first names , they found that when no photographs were paired with the first names, there was a significant and consistent ranking of the names from good to bad. However, the addition of photographs to the task of ranking names eliminated the difference between good and bad. They discuss the implications of their findings by introducing the concept of "fragility interpretation,"

Fragility interpretation suggests that subjects in many single-variable experiments are often suffering from 'deprivation' in that they are not permitted to use the information that is typically employed. For example here, those subjects who were not given photographs indicated that they would have relied more on that information if it had been present. This implies that a more fruitful approach to practical effects of stereotyping is to discover the set of factors [italics added] and their weightings, that are normally used in evaluation. (p. 523)

Furthermore, Lloyd (1987) asserts that,

An approach to multicultural training that points out differences between groups by offering simplistic views of cultural traits, characteristics, beliefs, and/or counseling intervention strategies does not seem to be the type of instruction that should be a part of counselor education. (p.167)

Research which has focused on multi-dimensional counselor stereotypes, indicates that stereotype variables which differ significantly when assessed separately, change their dynamic when they are combined (Landrine, 1985). Therefore, the focus of this study will be to research the stigmatizing effects of combining five client-variables which have traditionally been studied separately. These variables include, ability bias , gender bias, race bias, social-class bias, and career motivation bias (see Table 1).

### Career Counseling Dimension

The quality and quantity of our work often directly affects the quality and quantity of every other facet of our life. Consider a typical distribution of an American adult's life consisting of 164 hours per week (i.e., 24 hours per day, seven

**Table 1**  
**Demographic Variations of Client Intake Scenarios in the**  
**Attitudes of Counselor Trainees (A.C.T.) Survey**

<b>Client Scenarios</b>	<b>Lower S.E.S./ Middle S.E.S.</b>	<b>Ability / Disability</b>	<b>Black / Caucasian</b>	<b>Male / Female</b>
<b><u>Form A</u></b>				
1	Middle	Able	Black	Male
2	Low	Able	Black	Female
3	Middle	Disabled	Caucasian	Female
4*	Low	Disabled	Caucasian	Male
<b><u>Form B</u></b>				
5	Middle	Able	Black	Female
6	Low	Able	Black	Male
7	Middle	Disabled	Caucasian	Male
8*	Low	Disabled	Caucasian	Female
<b><u>Form C</u></b>				
9	Middle	Able	Caucasian	Male
10	Low	Able	Caucasian	Female
11	Middle	Disabled	Black	Female
12*	Low	Disabled	Black	Male
<b><u>Form D</u></b>				
13	Middle	Able	Caucasian	Female
14	Low	Able	White	Male
15	Middle	Disabled	Black	Male
16*	Low	Disabled	Black	Female

\* Client with a stated high career motivation

days per week). We sleep approximately one fourth to one third of our life (i.e., 6 to 8 hours per day), we work approximately 36 to 54 percent of our 112 weekly awake-hours (i.e., approximately 40 to 60 hours per week); which leaves a remainder of 64 to 46 percent of our awake hours for every other priority of our life (e.g., relationships

with a spouse, children, friends, church, evening graduate school, recreational activities, etc). Additionally, job stress can greatly reduce one's quality of sleep or quality of marriage and family relationships, job income directly affects one's lifestyle (e.g., the option of renting an apartment versus buying a home), job associates often become close friends, job moves often uproot families to new communities, job layoffs or firings can cause reactive emotional and behavioral psychosis, etcetera.

Because working Americans spend approximately one third to one half of awake-hours in career-related activities, discussion of career-related issues is often an integral part of a counselor-client agenda. Newman, Fuqua, and Seaworth (1989) note that clients will often present career issues as a primary concern because, "career indecision is relatively safe and lacks the social stigma that might be associated with other types of psychological problems" (p. 229). Therefore, because of the prevalence of career issues in counseling, this research project will pay special attention to the "career dynamics" of multicultural attitudes.

### Limitations of Attitude Assessment Instruments

While counselors are encouraged to self-evaluate their cultural stereotypes and attitudes, only a few assessment instruments have been designed to identify personal cultural bias. These research instruments have been administered primarily to undergraduate college students in order to identify their cultural attitudes towards minority and disabled students (Lazar et al., 1976; Sedlacek, Brooks, & Glenwood, 1967; Yuker & Block, 1986).

Comparison studies indicate that one must use caution in attempting to apply the general findings of undergraduate students' attitudes to master's and doctoral level students, as well as the attitudes of experienced practitioners (Neubauer & Rounds, 1987, Vogelson, 1975). These longitudinal studies indicate that once baccalaureate



and master's graduates have secured professional experience with culturally different populations, their attitudes change as a direct result of their professional experience (e.g., counselors may increase their cultural knowledge, while their cultural empathy decreases). Additionally, post-graduate students are much more test-wise than undergraduates. Thus, they have proved to be able to fake positive responses on attitude assessment instruments which have otherwise been effective for measuring attitudes of undergraduate students (Cannon & Szuhay, 1986; Hagler & others, 1987; Scott & Rohrbach, 1977; Vergo & Sample, 1984).

#### Attitude Assessment Requisites

The results of attitude assessment instruments should not be considered as value-judgments for or against the person who completes the assessment. The context in which the instrument is administered must be able to provide a non-threatening, individual exploration of negative multicultural bias so that an individual will not feel defensive about his or her assessment findings. Ideally, an attitude assessment instrument should enlighten an individual about personal development needs, as well as complement a group process where peer feedback can encourage a counselor trainee or practitioner to seek informational and experiential exposure to those multicultural client populations which were assessed as problematic.

The instrument used in this research project will reflect the premise that counselor attitude assessment instruments can be, and therefore should be, multi-dimensional rather than monotypical, so as to reflect the realistic multiple dimensions of counselor-client relationships. Furthermore, the complex design of a multi-dimensional approach increases the potential for masking the intention of the assessment instrument, and thus, reduces the potential for faked responses (Abrahams & others, 1971; Kroger, 1974 ).

### Research Question

If a counselor trainee or experienced practitioner is presented with the opportunity to predict the success of clients within a situational reference, as represented by career counseling, will the counselor trainee or practitioner rate some clients more optimistically than others, based solely on intake information; without ever having met with the client in person? Furthermore, if the counselor trainee or practitioner is given a cluster of multiple client-characteristics, as represented by different combinations of physical ability, gender, race, and social-class, will the counselor trainee or practitioner display negative cultural bias toward some of the combined client-characteristics, while displaying positive cultural bias toward other combined client-characteristics? Finally, can a client who displays a moderate or strong career focus equalize or reverse some or all of the negative biases of counselor trainees and practitioners?

### Definition and Discussion of Terms

1. Attitude. Counselor education literature indiscriminately exchanges a vast array of attitude synonyms as a means of describing the phenomenon which precedes or governs negative counselor behavior toward a client. Attitude semantics (see Table 2) can be confusing and have the effect of confounding empirical studies. Therefore, in this study, only the terms "attitude" and "bias" will be used synonymously. Shaw and Wright (1967) define "attitude" as an affective component of evaluative reactions based upon cognitive processes. More simply stated, Webster's New World Dictionary (1988) defines attitude as, "a manner of acting, feeling or thinking, that shows one's disposition; opinion; mental set, etc. (e.g., a friendly attitude)" (p.88). The dictionary definition for "bias" is, "a mental leaning or inclination; partiality;

Table 2

## Attitude Semantics: Selected Related Cognitive Patterns of Bias

Allusion	Idea	Presumption
Ambiguity	Idiosyncrasy	Principles
Anticipation	Inclination	Propensity
Appearance	Inflexible	Provincialism
Aptitude	Influence	Purport
Aspersions	Instinct	
Assumption	Intolerance	Racism
Attitude	Intransigent	Resolute
Attributes	Intuition	Rigid
	Ism	
Belief		Sexism
Bias	Judgement	Skew
Bigotry		Slant
	Misunderstanding	Stance
Catechism	Mien	Stereotype
Characteristics		Speculation
Chauvinism	Opinion	Subjective
Conception	Orientation	Surmise
Conformity	Orthodoxy	Systems
Connotation		
Cannon	Paradigm	Taint
Conventionality	Parameter	Tendencies
Conviction	Parochialism	Tenet
Creed	Partiality	Theory
	Patronage	Tradition
Discrimination	Penchant	Traits
Disposition	Perceptions	Transference
Distinctions	Perspective	Type Cast
Distortion	Persuasion	
Dogmatism	Perversion	Unpliable
Doctrine	Plausibility	Uncompromising
	Position	Unwielding
Expectation	Precept	Unyielding
Errancy	Preconception	
	Predilection	Values
Fear	Predisposition	Verisimilitude
Feeling	Preference	View
	Projection	
Hope	Prejudice	Warp

bent" (p.135). While an attitude can refer to either a positive or negative frame of mind, the focus of this study is negative attitudes held by counselors toward their clients. In this study a counselor's negative attitudes will be considered predecessors, and therefore, predictors of one's potential and even likelihood for negative counseling behavior. Furthermore, in this study, "B.I.A.S." will serve as an acronym for, Beliefs Inhibiting Appropriate Support.

2. Cognitive Reframing. Gysbers and Moore (1987) note that a change of frame is a primary event and a change of label is a secondary consequence. They explain,

Reframing is a change in the frame of reference we use to look at some particular behavior, such as a moral perspective versus a medical perspective or an individual-personal view versus a family systems view. Relabeling should be reserved for those instances in which there is a change in frame of reference, for example, neurotic versus psychotic. Both labels remain in the medical framework.

Labeling and relabeling skills are aimed at extracting your clients' experiences and bringing them to their attention with new verbal descriptions that punctuate their importance. ...Relabeling and reframing focus on the positive aspects of the individual. The emphasis is on what the client can do and the competencies they possess. ...Relabeling consists of a change of perception that implies a behavioral response that will be different or accented. This also may involve a change of values. (pp. 16-17)

Gysbers and Moore cite Richard Bolles' (1985) use of reframing when he helps people identify their functional job skills,

He asks individuals to describe something they do well. He then relabels these descriptions as functional job skills. For example, being a good mother and taking care of children is labeled as the functional skill of caring for people and helping others. ...When clients are considering career decisions, their experiences may need to be re-labeled in terms of functional job skills. (p. 16)

3. Culture. The terms "cross-cultural" and "multicultural" are often used synonymously in counseling psychology literature, usually implying differences in race between counselor and client; but in this study culture also refers to differences other than race. For the purposes of this study, reference to "culture" (e.g., cross-cultural, or multicultural counseling) will include any circumstance in which a

counselor and client are distinctly different, such as a non-disabled counselor working with a physically disabled client.

4. Disability. The Americans with Disabilities Act (ADA), which was signed into law on July 28, 1990, defines an "individual with a disability" as a person who has a physical or mental impairment that substantially limits one or more major life activities, has a record of such an impairment, or is regarded as having such an impairment. The terms "handicapped" and "disabled" are often used synonymously in counselor education literature, even though a handicap is the result of a disability. Also, both terms are regularly used in research without distinguishing between mental or physical conditions, nor degrees of severity of the disabilities or handicapping. This study will focus on the two physical disabilities: hearing impairment (i.e., references to various degrees of "deafness") and paraplegia (i.e., motor and sensory paralysis of the entire lower half of the body).

5. Myth. Keen and Campbell (1988) define myth as, "an unconscious, habitual way of seeing things, an invisible stew of unquestioned assumptions" (p.44). They continue, "Each culture unwittingly 'conspires' to consider its myths as the truth--the way things 'really' are" (p. 44). Finally, they assert that, "the myth offers security and identity, but it also creates selective blindness, narrowness and rigidity because it is intrinsically conservative" (p.45).

6. Oppression. This study will use the definition of Reynolds and Pope (1991): "Oppression is a system that allows access to the services, rewards, benefits, and privileges of society based on membership in a particular group" (p. 174). Multiple oppression refers to being a member of two or more oppressed groups (e.g., an Asian-American woman who is physically disabled represents three oppressed groups).

7. Social-class. Classism is perhaps the most covert, and thus, overlooked form of all stereotyping because it is camouflaged by socially accepted forms of overt

classifications, characterized by federal income tax "brackets" of annual income earnings and "socioeconomic status" (S.E.S.) in statistical research (i.e., upper-class, middle-class, and lower-class). Often in financial and statistical reports, reference is made to economic upper and lower sub-classifications such as upper middle-class versus lower middle-class, with lines of distinction being extremely nebulous and subjective. For example, a person who earns \$100,000 per year may be considered in the upper middle-class by a millionaire, or in the lower upper-class by a person living at or near the poverty level. Poverty level, a sub-classification of the economic lower-class is arbitrarily defined by the federal tax codes which are adjusted each year for inflation (viz., the buying power of the American dollar).

However, social-class is also covertly defined in terms of an implied stigmatized value-judgement of people from one class who negatively judge people from another. Thus, Classism essentially creates an implied power structure consisting of dominant and subordinate members. Classist attitudes are often distinguishable by pejorative statements of so-called "high-class" citizens reflecting strong negative stereotypes toward so-called "low-class" citizens (i.e., a person is judged as having a "high-class" or "low-class" personality, mindset, or style of dress, etc.). Additionally, these classist attitudes are so strong that they appear to transcend other traditionally stigmatized characteristics of ability, gender and race.

Ironically, as we approach the 21st century, American and world citizens are becoming less differentiated by these three traditional socioeconomic classifications and more differentiated by two new classifications: the "information rich" versus the "information poor." With the advent of computer and satellite communication technologies, information becomes the new world commodity, and therefore, those who have learned how to acquire and exchange information will fare far better than those who have not.

Because class structure is ethereal in nature, and because it is so greatly subjective to individual perception, for the purposes of this study, reference will be made to middle-class and lower-class clients, without specific definition of either class.

8. Stereotype. Webster's New World Dictionary (1988) defines stereotype as, "an unvarying form or pattern; specifically, a fixed or conventional notion or conception, as of a person, group, or idea, etc., held by a number of people, and allowing for no individuality, critical judgment, etc. " (p. 1314). According to this definition, a group's stereotypes precede an individual's attitudes. Therefore, stereotypes are more difficult to change than attitudes, because they represent a group's consensus and are continually reinforced by the group.

9. Stigma. Stigma is defined by Webster's New World Dictionary (1988) as, "something which detracts from the character or reputation of a person, group, etc.; a mark, sign, etc. indicating that something is not considered normal or standard" (p.1316). Coleman and DePaulo (Coupland, Wiemann, & Giles, in press) posit that stigmatization is, "a process whereby people are discredited or discounted because they are different in some way" (p. 69). In this study, a stigma will be considered to be an actual or perceived set of characteristics which a client brings into a counseling session (e.g., physical disability, gender, race, and social class). While the client's characteristics are neither positive nor negative, the reason that the characteristics are stigmas is because the counselor considers the characteristics to be negative attributes of the client. Magner (1992) cites an essay by Claud M. Steele, "The culprit I see is stigma, the endemic devaluation many blacks face in our society and schools. ...This status is its own condition of life, different from class, money, culture" (p. A5).

## CHAPTER II

### REVIEW OF RELATED LITERATURE

#### History of Research in Counselor Stereotyping

Tagiuri and Petrullo (1958) introduced a collection of writings by 26 psychologists, sociologists, and anthropologists who were engaged in experimental research, since the end of World War II, within an emerging division of psychology referenced as "person perception." The authors had collectively researched and documented the existence of interpersonal stereotyping behavior, social attitudes and attitude adjustment, and cognitive patterns of relational selection and preference. Two decades later, members of the American Psychological Association sparked expanded research in person perception psychology when they addressed ethical implications and challenges associated with cross-cultural counseling. Allen E. Ivey (Sue, 1981) referenced the guidelines established at the 1973 Vail Conference of the American Psychological Association,

That the provision of professional services to persons of culturally diverse backgrounds not competent in understanding and providing professional services to such groups shall be considered unethical. It shall be equally unethical to deny such persons professional services because the present staff is inadequately prepared. It shall therefore be the obligation of all service agencies to employ competent persons or to provide continuing education for the present staff to meet the service needs of the culturally diverse population it serves. (p. vii)

For two decades since the publishing of the Vail Conference guidelines, counselor education researchers have continued to refine counselor education models which correct cross-cultural bias. A special issue of the Journal of Counseling & Development, 1991, September-October, 70 (1), which focused on multiculturalism, featured 37 articles which were selected from more than 60 submitted proposals (p.



4). This journal issue affirms that contemporary counselor educators have continued to expand the theoretical frameworks of earlier researchers by focusing attention on the development of methodologies which will improve counselor competence in neutralizing the effects of cross-cultural bias. Following are a few examples of writings in this collection.

Dobbins and Skillings (1991) rate professional competence in terms of a counselor's world view, and they assimilate cultural groups in terms of power status as compared with a reference group of a dominant culture (e.g., White males). Midgette and Meggert (1991) espouse the abandonment of Anglo-conformity type of instruction which is traditionally taught in a separate course-only model. They propose a more programmatic model which includes, "a deliberate attempt to infuse multicultural research into all course work, counseling practica and internships" (p. 140). Paul Pedersen (1991) defines multiculturalism in terms of a generic, "4th force" in counseling, complementary to three other forces of human behavior which he identifies as psychodynamic, behavioral, and humanistic (p. 11).

These expanded definitions of multiculturalism have provided additional examples of cross-cultural counseling which include, but are not limited to, counselor-client differences in religion, gender, personality, physical ability, and social-class. They also open the door to more complex exploration of multi-dimensional identities and oppressions of clients. Reynolds and Pope (1991) note,

Nature does not create discrete categories of human traits or identities. People create these categories to simplify the complexity of multiple identities and multiple realities. There are many women who are also people of color; many people of color who are also lesbian, gay, or bisexual; many lesbian, gay, or bisexual people who may also have physical disabilities; and so on. (p. 175)

Worell (1986) warns that when therapeutic strategies for single-mother client populations, represented by never married, previously married, and Lesbians, are not expanded beyond the psychological processes of the single mother, the failure to

address the larger context of her social situations of the abject poverty, societal oppression, and victimization will further contribute to her despair. According to Stillson, O'Neil, and Owen,

Most research on gender-role conflict has been conducted on White, middle-class men who have a college education. Race and class rarely have been incorporated into research designs. Tolson (1977) proposed that one-dimensional masculinity (i.e., White middle class) is too simplistic. (p. 459)

Finally, Newman, Fuqua, and Seaworth (1989) note that, "when clinicians have more complex and varied frameworks for conceptualizing individual cases, clients are more likely to receive differentiated and more appropriate treatment (p. 228).

### Research in Cause and Effect Relationships

Researchers contend that both implicit and explicit stereotypes and attitudes of helping-professionals can be predictors for determining whether those professionals will be effective change agents in client performance (Coupland, Wiemann & Giles, in press, Mazer, 1971, Schofield & Kuncie, 1971). Many studies reveal that seemingly benign details can render harmful effects in counselor-client relationships. Stephens (1979) found that irrespective of training, client aphasic speech significantly affected counselor behavior and evaluation of the client. Cowan (1983) documented the negative effect of a patient's first name on the clinical judgement and diagnosis of psychopathology by mental health practitioners. Kurpius and Morran (1987) explored counselor training from a cognitive-behavioral relationship, and found that a counselor's negative self-talk directly influences subsequent negative behavior.

Additionally, people employed in the helper-professions who harbor inaccurate stereotypes and negative attitudes toward clients who are handicapped, or from a low socioeconomic status, or a minority group renders unproductive, and even harmful results, as a direct outcome of the self-fulfilling prophesy phenomenon. For example,

Harrington (1982) discusses the effects of prejudice of helping-professionals toward handicapped people. He reports, "the feelings and thoughts [of helping-professionals], while often subconscious and deeply rooted, impact their communication behaviors with handicapped people and can have a profound effect on the helping relationship" (p.222). He cautions,

Counselor attitudes and communication patterns often come across as patronizing, arbitrary, and ineffective. In addition to learning effective communication skills, helpers need to become fully aware of their own attitudes, thoughts, feelings, and beliefs about different types of clients and disabilities. This awareness can help them to avoid imposing their biases on their students and clients and to open themselves up to learning from them. (p.223)

### Early-Education Bias Prevention

Many studies concur that childhood stigmatization (e.g., children who exhibit negative stereotypes toward disabilities, different race, different gender, careers, obesity, etc.) is prevalent in American society (Hatch, 1986; Rosenthal & Chapman, 1982; Summerville, 1987). Bouchard (1969) observed 10-year-old and 11-year-old children rate personality, probable occupation, and race of three tape recorded dialects: middle-class White, lower-class White, and lower-class Black. The children judged middle-class White speakers significantly higher than lower-class White speakers, who in turn were rated significantly higher than lower-class Black speakers.

Magner (1992) cites Claud M. Steele's research in the relationship between educational performance and feelings of racial vulnerability. According to Steele, "a growing body of evidence shows that the academic performance of black students improves if the racial vulnerability they feel in schools is reduced" (p. A5).

Bauer (1985) recommends books for use from preschool to level three which expose children early and influence their attitudes about handicapped people. Cosby (1976) noted the failure of urban schools in meeting the educational needs of minority

children. Through the use of "Fat Albert and the Cosby Kids," as a curriculum supplement, he has proven that the use of television in the classroom can be an effective teaching and learning tool for educational change, as well as proving to be effective in combating institutional racism.

However, while schools might seem to be the logical arena for correcting stigmatization in children, Miles (Gysbers, et al., 1984) notes a major concern:

Schools tend to be microcosms of the larger society and inculcate its major values and views. School systems have been found not only to mirror the views of society but to inadvertently contribute to maintaining them. ...Through the use of traditional practices (ability grouping, teaching), the educational process assists in reinforcing the socioeconomic structure of the society.

For schools to assist the disadvantaged in breaking the cycle of poverty, they must withdraw from the use of some traditional practices and develop facilitative learning climates that respond to individual needs of students rather than dictates of society. (pp. 390-391)

#### Reframing Teachers' and School Counselors' Racial Bias

Today, many scholars have begun to concentrate on intercultural education and prejudice-prevention curriculum in elementary schools, which Ponterotto (1991) asserts, should be multifaceted and omnipresent (Bauer, 1985; Williamson-Ige, 1984). Docherty and Davis (1992) promote the establishment of collaborative partnerships among schools, homes and businesses so as to dramatically increase the effectiveness of schools in preparing disadvantaged students for a future as contributing citizens. They state, "disadvantaged children should not be penalized for their economic status, nor should they be stereotyped as unintelligent" (p. 59).

Multicultural sensitivity across-the-curriculum has been increasingly becoming a major priority in American elementary education since the middle 1960s. For example, Urbick (1969) compiled an annotated bibliography on the sociological and psychological characteristics of disadvantaged populations which was targeted for student personnel workers.

Docherty and Davis (1992) cite a report by Lincoln and Higgins (1991), who predict that by the year 2000, disadvantaged students will make up 39 percent of our school-age population. Many education experts argue that cross-cultural counselor training would be far more expedient and effective if prejudice-prevention models were initiated in pre-school and elementary education. Robert Clayton (1979) asserts that American schools today are more correctly described as interracial than as integrated. He further states that American school counselors need to chart new direction in cross-cultural counseling, to abolish "velvet racism," and do everything possible to make true integration a reality. Grub (1992) contends that most academic teachers are not effective in advising students as to how the content of their classes relates to what employers will expect of them, and that since career counseling in high schools has all but vanished, often no one advises students about the effects of their decisions.

#### Reframing High School Teachers' Career Bias

Students making career decisions may in actuality be reflecting more of their parents' attitudes than their own attitudes about continuing education and career choices. But since students spend as much or more time in school environments as they do with their families, the attitudes of their peers, school teachers, counselors, and school administrators are potentially as great or even greater an influence on student attitudes and student career decisions as parent attitudes. Therefore, the stigmatization patterns of educators, counselors, and administrators must be modified.

While many problems currently exist in overcoming inaccurate stereotypes and negative bias of teachers and counselors, new models are being developed which are aimed at cognitive reframing of these adults who so greatly influence the career

directions of students, especially in technical fields related to mathematics and science. Farrel (1991) documented one of America's 15 Urban Mathematics Collaboratives which places mathematics and science teachers into summer internships within local industries. The teachers' stereotypes are kept in check by being teamed with engineers, materials scientists, marketing analysts, environmental consultants, physicists, and other industry personnel.

### Academic Versus Vocational Education

Grub (1992) notes that when high school students choose their classes, their choices are focused either on plans to continue their schooling into college or to pursue a job after high school graduation. Based on this reality Grub concludes,

The high school is an inescapably vocational institution, and yet, the occupational focus is largely hidden. ...Most adolescents seem not to understand how their schooling decisions affect their future careers. (p. 36)

The March 1992 issue of Educational Leadership focuses on "Education for Employment," featuring numerous articles which compare and contrast the successes and failures of international academic and vocational education models. From this collection, Miles (Gysbers et al., 1984) observes,

The disadvantaged in some schools continue to battle against lower expectations and lack of encouragement and reinforcement, and they receive a large portion of the disciplinary decisions in schools (Morgan 1980). Moreover, they are disproportionately placed in general and vocational curricula, a fact that in itself limits their career options. (p. 390)

Douglas (1992) offers an example of what many education experts are advocating as a means of reducing the cultural biases within each camp, (i.e., mending the rift between academic and vocational education). She notes,

Both "academic" and "vocational" teachers play an important part in the education of today's youth. Unfortunately, they often see their roles not only as different but competitive as well. This attitude is frequently manifested in a rift between academic and vocational education, which serves only to harm the students.

Some academic educators contend that vocational education should assume its extraneous role as the stepchild of the curriculum, offering blue-collar occupational skills training for students who cannot or will not be successful in the "academic" program. ...Many teachers and counselors also steer "academically talented" students away from vocational courses, further contributing to negative attitudes about such courses. ...However, academic courses have not always found favor with vocational teachers either. Many, in fact, view the theoretical aspects of many academic courses as pompous and irrelevant. The prestige and attention bestowed upon them by school administrators and the public have widened the gap. (p. 42)

Finally, in her recommendation for an integration of academic and vocational education, Douglas asserts what many educators are advocating:

Achieving a relationship of cooperation would require not only attention to attitudes toward vocational and academic education by both groups but efforts toward collegiality of education in general. ...If students are to receive the quality education to which they are entitled, educators must stop seeing themselves as either competitive academic or vocational teachers, but rather, as coequal, collegial champions of all students! (p. 43)

### Review of Multicultural Education Models

#### When Multicultural Training Is Not Effective

A preponderance of counselor education literature indicates that counselor education has been remiss in preparing helping-professionals to work with culturally different clients (Hill & Reed, 1982). Ponterotto and Benesch (1988) state

In our opinion, the counseling profession's relative failure to train cross-cultural counselors successfully is the result of fragmented and conceptually inadequate training models. Moreover, such training emphases have done more to alienate trainees from cross-cultural issues than they have to impress upon them the value and strength of multicultural incorporation. We maintain that a balanced and integrated training and research focus on helping processes that transcend culture and helping ideologies that are bound to culture will improve the status of service delivery to minority clients and will result in a breakdown of the cultural defensiveness currently being observed among counselor trainees. (p. 66)

Birk and Brooks (1986) surveyed members of Division 17 of the American Psychological Association ( $N=217$ ) to determine whether counseling psychology practitioners who graduated between 1970 through 1979 felt that their college training

had adequately prepared them for their various job activities. While 77% of the respondents indicated that working with special populations is an important aspect of their job, only 53% felt that their training had been adequate for working with special populations. A national survey of counseling center directors ( $N = 213$ ) was conducted by Magoon and McDermott (1979) to determine the availability versus the desirability of skills among doctoral candidates. For 13 of the 26 skill items, there was a discrepancy of at least 40 percentage points between the desirability and availability of skills. The skill item, "social, ecological, cross-cultural experience," produced the second highest desirability/discrepancy of 60% overall (i.e., 68% for large institutions and 52% for small institutions).

### Successful Stereotype Reversal

Japanese manufacturers of automobiles and small appliances have proven that over time, negative stereotypes can be reversed! An example of a stigmatization reversal in American society is the way junior colleges of the 1960s, presumably attended by financially poor and less academically capable near-flunkouts, have established prominence in American communities of the 1990s as "community colleges," attended by financially-astute, career oriented, or university-bound students. Today, the University of California encourages students to enroll for their first two years at community colleges where the the state's university system has reciprocal agreements for guaranteed transfer to the University of California after completion of their sophomore year. The reciprocal agreement promises that if a student maintains a 3.0 grade point average, the student is guaranteed admission to one of the finest university systems in the world!

Vocational education programming is also beginning to realize a stigmatization reversal. Crosby (1982) notes that the stigma is diminishing and volunteer



enrollments are increasing, due in part to improvements in career guidance. Even so, the preponderance of literature indicates that referral to special programming is still considered a detrimental relegation rather than an honor and enhancement to success!

### Prerequisites of Successful Attitude Change

In each of the previous examples of stigmatization reversal, personal attitudes have changed, as societal stereotypes have changed. Four key prerequisites were common in these examples of societal reversals of stigmatization, which must also be present in any occurrence of cognitive reframing.

In order to induce stereotypical change, the first key prerequisite is that there must be the existence of a potential for gain (or savings) in one or more different realms, including money, time, convenience, comfort, or knowledge, to name only a few. Sometimes, the gain is not immediately evident, and so it is not solicited by the society. When people are not able to envision the potential for gain, they lack motivation to change, which is evidenced by avoidance and resistance behaviors.

Another key prerequisite for inducing change in societal stereotypes is the presence of a visionary, or group of visionaries, who bring a new idea to the community. Assuming the responsibility of reframing the cognitions of an entire society is often comparable to a salmon swimming upstream against the current to spawn a new idea. The annals of history account for the sufferings of "paradigm busters" who challenged the status quo, but ultimately changed their society by pioneering new ideas and ideologies.

A third element required for cognitive change is that a tremendous amount of energy must be expended to get the idea off the ground, with the majority of the energy expended on defending the vision and its worth against a societal mass that is comfortable with the status quo. New York's Madison Avenue advertising agencies

can easily attest to the manpower and money that are required in introducing a new product to consumers. Anyone who has served on a proposal committee or a board of directors that is considering asking tax payers for a new appropriation (e.g., a community college, a vocational technology education center, a community mental health facility, etc.) can attest to the seemingly endless amount of tedious energy required to sway the collective minds of a society.

Finally, time is a crucial element in creating change. Cognitive change within a society does not usually occur in an instant; sometimes it takes a decade and sometimes it takes many generations. The civil rights and feminist movements are excellent examples of how inexorable change has required a seemingly unbelievable amplitude of time, not only in America, but throughout the world. Many other social changes which hinge on cognitive paradigm changes are still pending, (i.e., Africa's apartheid movement, the elimination of world hunger, the preservation of the rain forests).

#### Review of Counselor Training Models Designed to Expose and Change Negative Bias

A review of counselor education research indicates that changing the negative attitudes of counselor trainees is difficult because belief systems are so deeply embedded and strongly reinforced by peers and majority cultures (Black, 1986). Brant (1979) found that negative attitudes contain cognitive and affective dimensions which each need attention by way of a combination of static informational (a cognitive dimension) approaches, and contact approaches (an affective dimension).

In attempts to prevent the adverse effects of negative bias among helping-professionals, static informational and experiential contact approaches to cognitive reframing have been exhaustively tested. Each approach has realized mixed results,

with a combination of the two proving to be the most effective at targeting both cognitive and affective dimensions of attitude (Ibrahim & Herr, 1982, Brant, 1979).

### Static Informational Methodologies

A static informational approach to cognitive reframing disseminates information by way of a static methodology which incorporates films, books, discussions, and visiting lecturers. Threlkeld & DeJong (1982) found that showing the film "First Encounters" was a partially effective means of reducing strain in interactions between disabled and nondisabled persons. They found that the film was effective in increasing willingness for relatively less intimate, one-time encounters, but not for more intimate and extended interaction.

Many studies have indicated that this approach to learning is too static (i.e., passive) and it ignores the affective dimension of attitudes, thus, it is not effective in changing attitudes (Donaldson, 1975; Fuqua, 1984; Sanders, 1978). Chubon and Keith (1989) found that computer simulation is an effective tool in training rehabilitation counselors who work with visually impaired clients; however, attitudinal measures reflected negative changes.

Often, when static methodologies have not proven to be effective in changing the attitudes of helping-professionals, they have proven to be effective with non-helping individuals from business and college undergraduates from non-helping majors (Aukayanagul, 1980). Mathews and Others (1990) have taken advantage of this phenomenon with a slide presentation which generates excellent results in promoting good will about an independent living center to civic, fraternal, and human service organizations. Essentially, the slide presentation is reframing the general public's minds from a general stigmatization of disabled populations to acceptance

within working and social communities. Thus, the roles of the helping-professionals who work with these disabled populations is made easier.

### Experiential Contact Methodologies

An experiential contact methodology attempts to correct negative bias by immersing an individual into a new and different cultural environment. This can be achieved by implementing a part-time or full-time internship, with a duration of a summer, a sixteen-week semester, or even a one year full-time internship (e.g., an APA approved setting for a psychologist's licensure).

Mungo (1980) found that placing teacher trainees from rural areas, (viz., where racial diversity is minimal or nonexistent) into correctional facilities, provides an effective means of cross-cultural training. Anderson and Cranston (1991) experienced tremendous success in matching 57 migrant high school students with 39 educators who had been previously indifferent to the needs of migrant students. They recommend the program as a means of sensitizing educators while reducing the high school drop-out rate among migrant students.

Two longitudinal studies have documented the success of changing counselor attitudes by exposing them to an outdoor residential camp counselor experience with handicapped individuals (Henderson, 1987; Ruzicka 1987). Henderson notes that exposure to 3,100 disabled campers significantly affects attitudes toward handicapped individuals in a positive direction, and that the changes last over time. Wysocki et al. (1987) conducted a longitudinal study which measured change in pediatric residents' perceptions of their abilities and knowledge in early intervention and management of handicapped children before and after training. The pilot training program, which consisted of four half-day sessions concerning the management of a developmentally

disabled child, was successful enough to make the program a permanent part of the pediatric residency at Texas Tech University.

Contact with culturally-different people does not always render positive change. Amir and Ben-Ari (1983, 1985) have repeatedly studied the effects of Israeli-Egyptian interactions when Jewish Israelis visited Egypt on organized tours. They found that the intergroup contact which is provided by tourism generally does not change either attitudinal or political mindsets.

### Pseudo-Experiential Methodologies

Whether it be a two-hour or one-day inservice training workshop, or a semester class at a university, the goal is to create a temporal opportunity to experience difference. While a full-time internship is the ideal methodology, a pseudo-experiential environment has proven to be successful in inducing moderate to major attitudinal change with a significant degree of salience (Stensrud, 1984, Ibrahim & Herr, 1982, Thomas & Melvin, 1981, Thams, 1975).

Classroom formats. D'Andrea, Daniels, & Heck (1991) documented the effectiveness of multicultural courses at two universities. Other counselor educators have found that multicultural curriculum has been effective for sensitizing and training school counselors who work with kindergarten through 12th graders (Lewis & Hayes, 1991). Lazar (1973) concluded that an instructor can effect a positive change in the attitudes of his or her students with a highly structured 16-session course which focuses on the handicapped individual.

Neubauer and Rounds (1987) conducted a longitudinal study of master's level counseling students and found that perceptions toward disabilities remained stable

while the students were enrolled in the program, but that attitudinal change occurred one year after graduating.

Workshop formats. Nwachuku and Ivey (1991) documented the success of a 3-hour culture specific workshop, including the viewing of four video vignettes and a culture-specific rating scale. Leong and Kim (1991) developed an Intercultural Sensitizer which is flexible for identifying cultural value and belief systems. Helping minorities with career guidance is the focus of a training module designed by McDavis and Parker (1985). The learning module, which is directed toward professional and paraprofessional guidance personnel, addresses the following topics: Determining one's own attitudes toward ethnic minorities and reasons for those reactions, explaining some of the career-related consequences of stereotyping ethnic minorities, improving interactions with ethnic minorities, planning for more culturally relevant career guidance materials for ethnic minorities, and communicating more effectively with ethnic minorities. Vaz (1987) profiles a model program for the retention of talented minority students attending predominantly White universities. The model focuses on prevention of financial, emotional, psychological, and adjustment problems by helping university faculty and staff members become culturally sensitive, have high expectations of the students, provide mentor-type relationships, and give special seminars. additionally, the model encourages talented Black students to interact with honors students and more advanced peers who can help them understand the student culture.

Melvin (1984) has experienced international success in facilitating community consensus in critical decision-making by means of implementing a "moral valuing paradigm" within a workshop process which involves both reflection and interaction among community leaders. The two-day workshop process draws input from

members of corporations, civic agencies , educational institutions, and general populations.

Fix & Rohrbacher (1977) developed a workshop which sensitizes business managers about their attitudes toward physically disabled individuals. They "disabled" the workshop participants and then had them go through every day activities, followed by a group workshop which helped the managers synthesize their experiences. Anne Dailey (1979) describes similar results with sensitizing college career counselors to the special needs of spinal cord injured college students. She explains,

Participants role play being spine-injured by riding in a wheel chair. They navigate around campus for a few hours, then return to discuss their experiences with other members of the workshop. Finally, the participants make suggestions for school policy based on their experiences. (p. 343)

#### Dogmatism and Reluctance to Attitudinal Change

According to Freud, Rokeach, and others, dogmatism is a form of resistance to difference or change, which in essence is a sign of a person not being convinced that a new idea or experience will necessarily be better than the status quo. Black (1986) cites McGuire's (1964) theory of "Immunization Against Persuasion" (i.e., inoculation against attitude change), which occurs when presenting weak forms of an argument tends to strengthen counter-perspectives (i.e., when a teacher is seen as weak and external to the group). Peabody and Gelso (1981) found that there is a limit as to how often countertransference feelings may be experienced in a given counseling session without spilling over into countertransference behavior. In her study of how dogmatism and orthodox Christian beliefs affect the relationship between a counselor's personal characteristics and his or her ethical orientation, Parker (1987) confirmed that individuals who are highly dogmatic may have lower levels of ethical

judgement than their less dogmatic peers. Furthermore, individuals who hold orthodox Christian religious beliefs tend to have lower levels of ethical judgement, as measured by the Ethical Judgement Scale, than individuals who do not hold such beliefs. Carter and Others (1969) discovered that while some teachers who attended a sensitivity training seminar become more liberal or understanding, while others did not change, and still others retreated into more rigid positions. Thus, those leaders of seminars who were strongest in effecting change, effected changes in both directions.

Cognitive Linkage. Any time a consensus is reached between two or more people, a cognitive linkage has occurred. But, are two minds always better than one? Hedda Black (1986) cites the research of Miller (1969) which indicates that prejudice is often reinforced by peer groups and cultural majorities. Ignorance is neither good nor bad, it is simply an absence of knowledge (Webster's New World Dictionary, 1988). Therefore, when uninformed people pool their ignorance, they most likely will produce a dogmatic reinforcement of their ignorance.

Often, when cognitive linkage occurs between counselor and client, affective linkage is decreased. Vogelson (1975) found that as counselors became more experienced, their understanding of problems typically experienced by clients with certain disabilities improved, but their ability to be sensitive to the problems reported by specific clients decreased. As counselors gained experience, they tended to increasingly perceive their clients as some stereotyped "typical" client.

### Use of Attitude Surveys

Theoretically, if counselor educators had an effective methodology for assessing negative attitudes among counselor trainees, they would be able to help their students enhance counseling effectiveness. Presumably, such knowledge would



enable graduate students to correct stereotyping and attitudinal problem areas by supplementing their cognitive and experiential learning opportunities with appropriate focus on those populations where negative stereotyping is predominant.

Over the past two decades, three different surveys have become popular for research in assessing attitudes toward handicapped and minority populations: the Attitude Toward Disabled Persons (ATDP), by Yuker, Block, and Youngg, 1966; the Situational Attitude Scale - Handicapped (SAS-H), by Sedlacek, Brooks, and Glenwood, 1967; and the Attitude Toward Handicapped Individuals Scale (ATHI Scale), by Alfred Lazar, 1973. The ATDP, SAS-H, and ATHI scales have all been used extensively in research which is focused on negative attitudes of undergraduate college and university students toward special populations, and much less frequently with graduate students.

While these surveys have made important inroads in surveying attitudes toward handicapped and minority populations, including the establishment of normative scales for each survey, all three surveys have been challenged by researchers as having two design limitations which would cause them to be prohibitive for use with college graduate level counseling trainees or practitioners. First, these surveys have shown questionable ability in masking their purpose, so as not to allow faked responses of the participants (Abrahams, 1971; Kroger, 1974). Research indicates that the vocabulary in these three surveys is too simplistic for application with the sophistication level of graduate students and experienced professionals in the helping-professions (Cannon & Szuhay, 1986; Hagler, 1987; Scott & Rohrbach, 1977; Stodden, 1973; Vargo & Semple, 1984).

Second, the monotypical design of these counselor attitude assessment instruments does not reflect the multi-dimensional identities and oppressions of

clients. Reynolds and Pope (1991) explain why current minority identity development models are not adequate,

little attention has been demonstrated toward within-group differences such as sex, age, race / ethnicity, affectional-sexual orientation, and religion and their effect on the developmental process. (p. 174)

They cite Highlen, Speight, Myers, and Cox (1989),

Within the United States, the generally accepted norm by which people are evaluated or against which they measure themselves is how close one comes to being anglo, middle class, male, Christian, heterosexual, English speaking, young, and mentally, physically, and emotionally unimpaired. (p.175)

Finally, they conclude,

Without exploration of multiple aspects of identity, psychotherapists increase the likelihood of misunderstanding or misinterpreting their clients' perspectives and actions. (p. 178)

A few examples of multi-dimensional studies include Posner's (1977) documentation of the dilemma of aging females, and Elder's (1983) discussion of prejudice toward blind women. Also, Fair and Sullivan (1980) delineate the career and vocational education enigma of helping the culturally diverse handicapped youth; all who occupy two stigmatized statuses simultaneously.

### Negative Effects of Labeling

Shertzer and Linden (1979) assert that as a counselor continues to compile more data about the client, the counselor's preliminary conceptualizations of the client tend to be confirmed or rejected or remain the same. Therefore, they conclude, "conceptualization of an individual must be continuous as each separately evaluated datum is added to the study of their client (p. 22).

Many studies have concurred that preliminary conceptualizations of clients by their counselors, teachers, and other helping-professionals, are the direct result of their negative bias toward non-traditional populations, and thus cause them to

misdiagnose and mislabel clients. Shertzer and Linden (1979) caution that, "conceptualization of the individual, or even a faltering attempt to understand the person, has little practical value unless it leads to assistance" (p. 23).

### Stigmatization Perpetuated by Mislabeling

Many of the research findings indicate that being labeled as handicapped or learning disabled, has a lifetime stigmatizing effect on a child. In their review of articles in the Education Index, Westbrook and Sedlacek (1991) found that despite increased concern for minorities in the literature, the labels used to describe them may have done much to exacerbate problems. Lillian Hinds (1978) cautioned that labels can adversely affect teachers' attitudes toward students. Garcia and Ortiz (1988) note that children suffer from the stigma of being labeled handicapped and may lose ground academically. Juliebo and Elliott (1984) document a case study of a child who was mislabeled by a substitute teacher in second grade. By the end of just one school year, he had adopted the label given to him, "remedial student," and behaved as a slow learner would. However, when he was transferred to a new school for his third year, he reversed the problem!

In his discussion of possible strategies for eliminating handicappism, Sellin (1981), who is himself severely sight-impaired and a professor emeritus in special education at Western Michigan University cautions,

Language has the power to influence behavior. ...language affects the handicapper's self-concept. Because handicappers live in the real world, they experience and absorb the subtle and not so covert implications of language. (p. 67)

### Prejudicial Labeling in Language

Bryson (1991) delineates international language patterns that exhibit blatant forms of racist stereotyping, yet are prevalent within many cultures:

We tend to regard other people's languages as we regard their cultures--with ill-hidden disdain. In Japanese, the word for foreigner means "stinking of foreign hair." To the Czechs a Hungarian is "a pimple." Germans call cockroaches "Frenchmen," while French call lice "Spaniards." We in the English-speaking world take French leave, but Italians and Norwegians talk about departing like an Englishman, and Germans talk of running like a Dutchman. Italians call syphilis "the French disease," while both French and Italians call con games "American swindle." Belgian taxi drivers call a poor tipper "un Anglais." ...In English we have "Dutch courage," "French letters," "Spanish fly," "Mexican car wash" (i.e., leaving your car out in the rain), and many others. (p.17)

Bryson also notes that in studying the history of American immigrants, people who did not blend in risked being made to feel like outsiders. Additional examples of American culture-based, ethnic-based, and gender-based stereotypes are evidenced in our society's proliferation of so-called denigrating "jokes," which including Irish "micks" or "paddies," Mexican "wetbacks", Polish "polocks," Italian "wops," German "krauts," Spanish "dagos," Jewish "kikes," and "Hebe's," people working or studying in agriculture careers (i.e., stupid farmers or agi's), gays, people who stutter, dumb blondes, women drivers, fat people, etc. Therefore, notes Bryson, the usual pattern for offspring of immigrants has been to become completely assimilated--to the point of being unable to speak their parent's language. He cites a 1985 study of the Rand Corporation which states that 95 percent of the children of immigrants can speak English, but by the second generation, more than half can speak only English (p. 241). The apparent effect of the American "melting pot" has been to dilute cultural diversity in order to avoid victimization from stereotyping defense mechanisms.

### Intake Bias in Labeling

Brown, Pryzwansky, and Schulte (1987) cite research which confirms that there often exists a difference between what clients expect versus what they prefer to occur in consultation with counselor. Hutchinson (1988) provides research which has demonstrated that incongruity exists between intake counselors' and clients' perceptions of clients' presenting issues. They contend that such incongruence will adversely affect the counseling process outcome. Tichenor et al. (1975) found considerable incongruence between rehabilitation counselors and their clients in perception of handicapping problems. Newman, Fuqua, and Seaworth (1989) discuss the dilemma of intake misdiagnosis based on poor differentiation between career counseling issues which are primary and those which are secondary (i.e., which needs the counselor's attending; the client's career indecision which is causing anxiety, or the client's anxiety which is causing career indecision?),

As a general therapeutic rule, ...counselors should consider the possibility that career indecision may not be the primary problem in a client's life. Some reasonable exploration for underlying issues should be routinely conducted. (p. 228)

Merluzzi and Merluzzi (1978) found that racial labels contribute to counselor assessments of clients, by causing the counselors to overcompensate in order to avoid negative professional bias. Furthermore, counselors were found to report significantly higher ratings on judged potential for change in Black as compared to White clients (Bishop & Richards, 1987).

Based on these findings and others, Arthur Lloyd (1987) protests the use of cultural information in intake reports because it detracts from counseling effectiveness, since the difference within subgroups may be as great as the difference between groups. For many professionals, however, an intake form is deemed necessary. Therefore, Brown, Pryzwansky, and Schulte (1987) recommend the

employment of a simple intake form which would include the consultee's organization, the problem, recommendations concerning the type of consultation indicated, and suggested disposition (p. 246).

### Ability Bias in Labeling

Thomas (1979) found that physically disabled adults connotatively structure their worlds along three major dimensions: attractiveness, dynamism, and morality. Counselors who harbor negative bias toward disabilities will likely find it difficult if not impossible to be sensitive to these cognitive frames of their disabled clients. Rule (1984) notes that, "negative attitudes toward [the nearly 25 million Americans who are disabled] often contribute to the difficulties faced by them" (p. 27). Richard Bolles (1978) states,

Behind labels are attitudes. And our perennial disposition to use labels which talk about the so-called handicapped, using ourselves as the starting point (we have high-verbal-skills, therefore, they have low-verbal skills), ... reveals a self-defeating attitude which is going to undermine every package that our culture ever invents to help the so-called handicapped job-hunter. (p. 2)

Yuker (1988) asserts,

People's interactions are influenced by their perceptions of the persons with whom they are interacting. ...Persons with disabilities tend to be perceived in terms of their disabilities rather than their other characteristics, at least until the perceiver gets to know them. (p. 5)

Sellin (1981) asserts that labels and societal mixed-messages greatly influence the self-identity of handicapped persons. He discusses the paradox of a counselor promoting a client's independence, "while society offers the client subsidies which foster economic dependence" (p. 7).

Harrington (1982) relates seven counseling "syndromes" by Nathanson (1979), which focus on some of the feelings, thoughts, and consequent verbal and nonverbal behaviors of counselors working with handicapped clients:

1. "Who's more anxious, you or I?" The client is the direct stimulus for the counselor's anxiety, which may be expressed by the counselor's tendency to speak more loudly, softly, slowly, quickly, or simply to clients with disabilities. This anxiety may come from inexperience, helplessness, inability to understand what the client is saying, lack of ability to assist the client, or depression at the severity of the client's disability.
2. "I'm amazed by your courage." The counselor overvalues actual achievements because such achievements are in marked contrast to the counselor's expectations of the client.
3. "I know what's best for you." The counselor typically reacts negatively to a client's aspirations and prejudices the client's potential for future success in a given endeavor accordingly. Actually, a counselor with this attitude probably does not listen at all to what the client is saying.
4. "All that matters is your label." Instead of perceiving the client as an individual with abilities, interests or potentials, the client is perceived as "a cripple," "an epileptic," "a blind person," "a deaf person," etc. The counselor makes assumptions about what the client can or cannot do and achieve. In other words, there is no regard for the individuality of the client.
5. "I feel sorry for you." The counselor's pity is shown through facial expression or vocal tones. The helper focuses on the negative aspects of the client's life and potential, rather than on the positive.
6. "Don't worry, I'll save you." In addition to pity, the counselor views the client as incapable, dependent, inadequate, defenseless, and needy. The counselor plays the role of rescuer in finding a niche for the client.
7. "If I'm lucky, you'll miss today's appointment." The counselor's revulsion and unconscious or conscious rejection of the client is expressed in avoidance and other distracting strategies (pp. 232-233).

Sellin (1981) references R. Brown (1975) and J. Mullins (1979), who

recommend differences in language related to handicappers,

A person is confined to a wheelchair. Also, a person suffers from epilepsy, as contrasted with a person who experiences seizures. Brown observed that the intent is not to soften descriptions; rather to promote accuracy in descriptions.

Mullins (1979) expanded upon Brown's (1975) example of language's impact. Consider the difference between "Alvin, a blind man, is a musician" and "The musician, Alvin, is blind." Also consider, "Joanne is deaf and has to use a hearing aid," which suggests a restriction and imposition. Consider, "Joanne can hear very well by using her hearing aid." The word using has a positive effect. (pp. 68-69)

Bolles (1978) explains that "packages" for helping the so-called handicapped job-hunter or career-changer often are not effective because they are put into the hands of a counselor who has the wrong attitude. He clarifies what he means by the term "wrong attitude," "either the wrong attitude toward the handicapped, or the wrong attitude toward him or her self, or the wrong attitude toward 'the package' "

(p. 1). In his newsletter communication to fellow career counselors, Bolles notes that historically,

We have had a tendency to describe other people, not (as one might hope) in terms of what-they-have-that-we-do-not, but rather (to our sorrow) in terms of what-we-have-that-they-do-not. ...with regard to the handicapped, this tendency manifests itself in all the vocabulary of the field. For example, we describe the so-called handicapped person in our society today as "low-verbal." Does that term tell us anything about what-he-or-she-has-that-we-do-not? Of course we do not. By way of compensation for his or her inability to to manipulate language as expertly as we can, he or she may have developed fantastic compensatory gifts on the other side of their brain: in the area of facial recognition, pictorial memory, music, art, dance, or whatever. Do we therefore label him or her as "high-picture-skilled"? Or the like? Of course we do..... not [sic]. That would be to emphasize what he or she has, which makes us -- in this skill area, at least -- the handicapped [italics added]. No, no, we cry; they are the handicapped. Let's find a label which emphasizes that. Oh, here it is: "low-verbal-skilled." Now, that's better. We pass; they flunk . (pp. 1-2)

Finally, Bolles recommends some "helpful attitudes" that counselors should consider for themselves as prerequisites for working with disabled clients:

A. In working with the so-called handicapped job-hunter, it is important to remember that he or she has gifts in certain areas which make us the handicapped, in those areas.

B. Thus, when we sit down to help the handicapped, it is a matter of the handicapped helping the handicapped. We who are handicapped in areas where they are not, are seeking to help those who are handicapped in areas where we are not....We are most helpful to our clients when we remember that it is not counselor helping poor-benighted client, but: ...a superior being, helping a superior being. In any event, equals.

C. It is crucial to begin with the so-called handicapped job-hunter in our heads at least by searching for his or her strengths instead of his or her handicaps....The nature of a handicap is that it keeps our attention riveted, so that sometimes we (and the so-called handicapped person) act as though "that" [italics added] is the most significant fact about him or her. It is not. (p. 2)

### Degenerative and Multiple Disabilities

When working with a physically disabled client who has a degenerative disease, helping-professionals often forget to remain flexible in helping their clients set goals that are realistic to their ongoing reduction in capacities (Crager & Rosen, 1988).

Yuker (1988) notes that some presumably, "single" disabilities,



may affect several functions so that they are actually multiple disabilities. Thus, persons with cerebral palsy may also have speech or hearing problems, be mentally retarded, or have seizure disorders, while a stroke may affect motor functions, speech, and/or hearing. (p.12)

Another common oversight by practitioners is to recognize the major differences in handicapping effect between clients who are born with a disability, and those who have a sudden or gradual onset of a disability (Hudson, 1988, Gysbers et al., 1984). A few examples of physical disabilities which can occur at birth, or gradually, or suddenly include, hearing loss, visual loss, rheumatoid arthritis, and multiple sclerosis. Because two clients may react very differently to a disability that is seemingly the same, and because many disabilities are a "hidden disability," caution should be taken by counselors to help their clients learn to effectively communicate to others the degree of handicapping which is realized by their disability.

Numerous surveys have documented that both physically and mentally disabled children are disproportionately referred to vocational education programs in lieu of mainstreaming (Levinson, E. M., 1986, Hill & Reed, 1982). This is indicative of a broader problem as discussed by Keniston, in the forward of The Unexpected Minority: Handicapped Children in America, by Gliedman and Roth (1980),

The reason current efforts to "help" the handicapped are so often ineffective or counterproductive is precisely because they rest on a flawed paradigm. ...The child is defined as having "something wrong," and the goal is to "get well," which of course the child can never do. Indeed, the medical model, upon which most current thinking and policy are based, sometimes suggests that all other activities, including planning for the future, are to be suspended until the child is "cured." (pp. xiii-xv)

They conclude that, "The able-bodied unwittingly create most of the problems of the handicapped" (p. xiii). Finally, based on their conclusion, they mandate that,

We [helping professionals] should not lump the health care problems of the nation's 2 million or so mildly retarded children in with the problems of the visually impaired or the victims of chronic disease. ...Yet the medical needs of those "groups" do get confused in surveys and policy studies. (p. 406)

### Hierarchy of Ability Bias

Helping-professionals are faced with a troubling paradox which finds that they are encouraged not to "lump" all disabilities together, yet they are chastised for segregating disability into hierarchical categories of general preference or non-preference of association. Researchers have determined that bias toward a disabled person is more or less negative depending on the type and perceived severity of the disability, and depending upon social distance (Rickelman & Blaylock, 1983; Siller, 1964; Stovall & Sedlacek, 1983; Warren & Gardner, 1981; Wicas & Carluccio, 1971; Yunker, 1988). Yunker (1988) correlated the findings of more than one hundred studies which have compared people's attitudes toward persons with different types of disabilities, resulting in a ranking of twenty four different kinds of disability from perceived most severe to perceived least severe.

Social Distance. Stovall and Sedlacek (1983) found that a general population of university students had negative attitudes toward people who were blind or in wheelchairs in situations where close, personal contact were required, yet students tended to have positive attitudes toward disabled people in situations where they were not forced into close contact. While many studies indicated that students who are majoring in fields related to helping-professions are more positive toward disabled populations, some studies have yielded foreboding results. Filer (1982) found that while graduate counseling students generally support the value of counseling handicapped children and mainstreaming, a sizable minority believed that they did not look forward to working with the handicapped.

Type and Severity of the Disability. Joseph Morris (1984) found that among university undergraduate students, more negative attitudes were projected toward

emotionally disturbed individuals than toward physically handicapped individuals in close personal situations. Additionally, more positive attitudes were expressed toward persons who had no handicap or were deaf. Flexer's study of university students taking course work related to disability and attitudes toward the disabled, found that the order of acceptance of handicaps from most to least was: physical, sensory, brain-related, and socio-cultural. Goodyear (1983) found that rehabilitation counselors manifest an attitudinal hierarchy in which they evaluate physically disabled people most positively, followed in order by the intellectually impaired, the emotionally disturbed, and people who are socially deviant (e.g., alcoholics). When Allen (1982) compared the attitudes of mental health and rehabilitation counselors toward alcoholics with their attitudes toward homosexuals, public offenders, the mentally retarded, the physically disabled, and the mentally ill, their attitudes toward alcoholics were significantly lower than each of the other groups.

Counselor Preference. Coleman and DePaulo (Coupland et al., in press)

conclude that numerous studies in counselor hierarchy of attitudes have revealed,

The degree to which the condition makes the person appear especially different in appearance or in patterns of movement is also important. People with skin disorders, body deformations, and cerebral palsy, for example, are less accepted by able-bodied people than are people who are deaf, blind, or paralyzed. Among all types of visible disabilities, facial disfigurements seem to be the least liked (p. 67).

Thomas (1987) found that depressed men expressing affect are less desirable.

Pinkerton and McAleer (1976) discovered that counselors are likely to provide less counseling and case services to cancer patients with other equally devastating disease-related disabilities. Darnell (1981) documented that attitudes of non-disabled counselors serving specific disability groups were more positive in comparison to counselors serving all disabilities; and when comparing attitudes between supervisors

and counselors, counselors appeared to be more homogeneous as a group than were supervisors.

### Gender Bias in Labeling

Stillson, O'Neil, and Owen (1991) define gender-role conflict as,

a psychological state in which socialized gender roles have negative consequences on a person or on others. The ultimate outcome of this kind of conflict is a restriction of the human potential of the person experiencing the conflict or a restriction of another's potential. Gender-role conflict occurs when rigid, sexist, or restrictive gender roles result in personal restriction, devaluation, or violation of others or self. (p. 458)

Sedlacek (1974) found that sexism appears to be more of a reluctance to view men and women outside traditional roles than it is a negative feeling, and that perceptions of sex-roles seem to be critical in understanding the relationships between black and white cultures. Kaplan (1983) observed that female rehabilitation counselor education trainees perceive female clients as more intelligent and attractive than males. Conversely, Kaplan (1984) found that when rehabilitation counseling students viewed pictures of obese clients and read additional information about them, they revealed negative attitudes toward massively obese people, particularly massive obese women, who were more likely to be perceived as needing psychotherapy! At a camp for the handicapped, Ruzicka (1987) found that first year female camp counselors have significantly more positive attitudes toward the handicapped and more internalized locus of control than male counselors.

Tobias (1982) confirmed that Black and White teachers recommend more males, while Hispanic teachers recommend more females for special education. In a review of data collected by the Office for Civil Rights, U. S. Department of Education (Fall of 1980), approximately two-thirds of the students identified as in need of

specialized educational services were boys, and only one-third were girls. The June 1983 issue of Concerns, cites findings in a study by Broverman et al. (1970),

Females' emotional and behavior problems, which are often characterized by passivity and withdrawal, are less likely to be identified by school personnel (who consider them consistent with acceptable female behavior) than are males' emotional and behavior problems, which are frequently aggressive and disruptive of classroom routine. For many teachers acceptable student behavior is passive behavior and a passive role is more in keeping with traditionally defined femininity. (p. 2)

### Homosexuality

Homophobic attitudes of psychotherapists impede effective outcomes in psychotherapeutic work (Garfinkle & Morin, 1978, Riddle & Sang, 1978). Raymond Berger (1983) recommends that helping-professionals need to discard their traditional binary model of heterosexual versus homosexual. Stewart Page (1985) documents studies in which clinicians judged females as maladjusted when exhibiting gender role incongruent behavior. A study of school counselors in South Carolina revealed that counselors often expressed ambivalent attitudes toward homosexuality, few harbored neutral feelings, and most felt ill-prepared to work with homosexual students (Sears, 1988).

### Racial Bias in Labeling

Brown, Pryzwansky, and Schulte (1987) cite a model by Gibbs (1880) which delineates a predictable sequence of five stages of counselor-client interactions during the entry phase of a consultation: an appraisal stage, investigation stage, involvement stage, commitment stage, and an engagement (p. 217). They relay Gibbs's model:

These stages exist for both white and black consultants. Similarly, comparisons were the same whether the consultees were black or white. She also hypothesizes that the concept of an interpersonal orientation in consultation can be generalized to other ethnic minority groups sharing similar societal experiences with blacks. (P. 217)

Furthermore, according to Brown et al., Gibbs's asserts that her model,

rests on the premise that black consultees focus on the interpersonal competence (process rather than content) of the consultant, while whites tend to focus on the instrumental competence (goal/task-related aspects) of the consultant. Interpersonal competence then, is defined as "a measure of the ability of the individual to evoke positive attitudes and to obtain favorable responses to his actions." On the other hand, instrumental competence is considered to be "a measure of the degree of effectiveness with which a goal or task is accomplished by the individual." (p. 216)

Darou's (1987) study of Canadian counselors working with Canadian-Native clients revealed that attitude and value differences exist between Natives and non-Natives. Counselors are encouraged to show flexibility and understanding of inter-ethnic issues in order to prevent existing recurrent labeling and attitude problems. When Atkinson (1986) examined Black clients' preferences for salient counselor characteristics, he found the top five preferred characteristics were ranked as follows: Values, older, similar personality, and same ethnicity. LaFromboise (1981) suggests that counselors are not enough aware of verbal cues which promote distrust and prevent effective counseling with American Indians. The American Indians in the study perceived that counselors were indicating insincerity by poor display of affinity, their use of stereotypes, and their denial of ethnic differences.

Garcia and Yberra-Garcia (1985) developed a training manual which acquaints non-Chicano school counselors and educators with the difficulty of counseling Mexican-American students due to the racist manifestations of cultural and racial stereotypes. They note that effective counseling of Chicano students is often curtailed because counselors are insensitive to cultural differences (e.g., the Chicano family, the colonization of the Mexican people, the role of machismo, the myth of Chicano passive acceptance, the Chicano orientation toward cooperation and obligation, time orientation) and they contend that counselors have accepted the North-American stereotypes about Mexican people. Peters and Slaughter (1973) found that in

counselor-client settings, it is the individuality of the counselor which has the greatest influence on the counseling relationship with Black students, rather than the race of the counselor, or sex of the student, or similarity of counselor-student personality.

Sedlacek (1974) cites research which documents that men generally view women more positively than Whites view Blacks. Ronnie Priest (1991) notes that racism negatively impacts African-Americans to an extent to which they may need to seek counseling. He notes four potential arenas of counselor vulnerability relating to the cultural distinctiveness of African-American clients which may impede counseling effectiveness: Racial stereotypes, notions of racial superiority, inability to communicate with clients, and lack of a proactive perspective. Casas (1981) found that university counselors tend to use organizational strategies to process information about students in such a way that they tend to form constellations of stereotypes corresponding to specific ethnic groups. Furthermore, university counselors have a tendency not to differentiate between Anglo and Asian-American stereotypes, while Chicano stereotypes are well differentiated from the other groups. Fuller and Kern (1978) found that a white counselor, when counseling a hostile black client, is significantly more anxious than when counseling hostile white clients. Derald W. Sue (1981) affirms that client trust and counselor credibility are crucial in counseling sessions comprised of Caucasian counselors and minority clients. He states,

Minorities in the United States have solid reasons for not trusting white Americans. Lack of trust often leads to guardedness, inability to establish rapport, and lack of self-disclosure on the part of culturally different clients. What a counselor says and does in the sessions can either enhance or diminish his/her credibility and attractiveness. A counselor who is perceived by clients as highly credible and attractive is more likely to elicit (a) trust, (b) motivation to work/change, and (c) self-disclosure. (p. 52)

While Sue makes reference to cross-cultural counseling in the United States during the twentieth century, the phenomenon of racial stereotypes inhibiting cross-cultural counselor-client relationships is a universal dilemma; meaning that within the

context of a historical time-line, the phenomenon of cultural stereotyping always has and always will exist in all cultures (Bryson, 1985). Skillings and Dobbins (1991) suggest that racism is a "disease" that is unwittingly hosted by members of the dominant culture, and damages both the host and target individuals, their families, and communities.

A disproportionate number of ethnic minority and bilingual children are referred for special education (Dobbins & Skillings, 1991; Garcia & Ortiz, 1988; Prasse & Reschly, 1986; Westbrook & Sedlacek, 1991). Even though special education often projects negative connotations, Collins and Camblin (1983) documented Black children in Ohio who were underrepresented in the less stigmatized and more prestigious special education classes for learning disabled students. Morris (1977) found that the directors of pupil personnel services in 16 American cities were evaluating the intellectual level, achievement, and personality of Spanish-speaking children by using standardized assessments given in English instead of Spanish.

One of the most blatant outcomes of racial bias is found in many studies which report that a disproportionate number of ethnic minority and bilingual children are labeled as mentally handicapped (Megliocca & Rinaldi, 1982; Prasse & Reschly, 1986). Even worse, a disproportionate number of minorities are referred to mental hospitals (Snowden & Cheung, 1990).

#### Reverse Discrimination Factor

Pedrini and Pedrini (1965) note that Sigmund Freud studied the phenomenon of over-compensation, as part of a theoretical framework of a defense mechanism called "reaction formation." Sedlacek (Christianson & Sedlacek, 1972) found that the attitudes of University of Maryland faculty toward Black and female undergraduates were more positive than toward undergraduates in general. Vantress (1973) found



counselors to be excessively sympathetic toward minority clients. While this phenomenon of over-compensating has repeatedly been noted, virtually no contemporary research could be located which explains the advantages or disadvantages of counselors giving the benefit of the doubt to minorities and females. In terms of career counseling, the business world would likely benefit if more minorities and women were encouraged by career guidance professionals to pursue higher career goals and less traditional job roles where minorities and women are under-represented. Often such goal-setting must be externally initiated, and who better for the minority or female client than a counselor who has been positively affected by the Martin Luther King and feminist movements, and who thus reverses their discrimination and "over-compensates" on the clients' behalf!

In an extreme case, the concept of over-compensation could be tantamount to a "Henry Higgins Syndrome" among counselors. One might posit that because counselors are trained to "help," the counselor's professional-rescuer personality peaks to a maximum intensity when the challenge is most severe (e.g., an unemployed disabled female head-of-household, from a low social-class). Obviously, if a client has experienced repeated societal rejection, and therefore the client's self-esteem is very poor, the counselor may be the only person who is willing to exhibit unconditional acceptance of the client! In the case of helping a client who perceives him or herself to be down-and-out, a counselor's purposeful inducement of the Pygmalion Effect may be a healthy exercise for both counselor and client. Of course, the inherent danger of encouraging a client to set goals that are "unrealistic" is that the client may become disillusioned and revert to a stronger self-stigmatization and identity with failure as a natural outcome of one's minority and low socioeconomic status.

In accordance with Freud's concept of a defense mechanism, a counselor's over-compensation in attitudes toward a client may be due to the counselor's "fear" of being viewed by the client as prejudiced against the client's physical disability, minority race, gender, or low social-class. This fear may be considered legitimate in light of the civil rights laws which protect a client from the potential outcomes of negative bias, including counselor malpractice and negligence. Another dimension of fear relates to the counselor's desire to appear professionally, socially, and politically correct in the eyes of the counselor's peers and supervisors.

Over compensation phenomenon is also prevalent in the business world. Farrow (1980) discovered that when advanced business students review resume folders of physically disabled job applicants, health is not a determining factor in projecting in hiring or entry salary of the applicants. However, health does become a factor in creating reverse bias which rates handicapped applicants higher in job-related experience, training, and knowledge of occupational area. They concluded that the female epileptic applicant had a significantly higher probability of being hired than three other, non-handicapped applicants, thus creating a case of reverse-discrimination in favor of the physically disabled.

### Social-Class Bias in Labeling

The few studies that have focused on social-class bias have found that a client's social-class impacts the attitudes of helping-professionals toward the client (Garfield, 1973; Jones, 1981; Jones & Jones, 1970; Mazer, 1971). Sanua (1977) cites Lerner and Fisk (1973) who believe that poor prognosis for lower-class clients has more to do with attitudes of the therapist than attributes of the client. For example, in studying societal stigmatizing behavior toward particular groups, Straker (1980)

found that Black English is cited as an example of a language that is accorded low prestige by the dominant culture.

### Career Dynamics of Counselor Bias

As mentioned in Chapter I, American adults spend approximately one third to one half of their awake-hours on the job. The suppression or acceleration of one's career potential hinges on the successful navigation through a delicate infrastructure of academic and vocational training which is based on either proactive or reactive decision-making, often requiring expert consultation. Arguably no other area of counseling so dramatically exemplifies the negative outcome of stigmatization as that of career counseling. When helping-professionals harbor negative bias toward people representing one or more factors of physical disabilities, racial minorities, gender minorities, or low social-class, they risk perpetuating irreversible limitations for the client.

Additionally, over-compensation for these factors also renders potential risk for equally ineffective career counseling. For example, it might be tempting for a business manager or career counselor to assume that a minority, a woman, or a disabled employee would cherish the opportunity to be promoted into a top management position, without considering the possibility that the person is happy in their current position which is less stressful and allows more time and energies for family life! In their text, Career Counseling: A Psychological Approach, Yost and Corbishley (1987) remind career counselor trainees,

Do not assume that a particular client either has or will have a problem simply because he or she is black, old, female, disabled, or the like. Many people in minority groups (who collectively outnumber the rest of the population) experience few or no difficulties in achieving their career goals, and unnecessary focus on minority status can be discouraging and a waste of time.

On the other hand, you must be realistic. ...Therefore, take time at each step in career counseling to establish whether or not problems exist and then

intervene appropriately. (pp. 31-32)

### Ability Bias in Career Counseling

Sampson (1982) asserts, "college graduates who are disabled have a history of difficulty in obtaining professional employment and all too often wind up unemployed or underemployed" (p. 26). Counselors indicate that mental health and employment problems are the two most primary concerns of persons with epilepsy (Biel, 1978). Anne Dailey (1979) recommends Adlerian techniques in preparing the spinal cord injured client for choosing a college major and preparing for job placement. She explains,

Adlerian psychology views people as "becoming" by moving toward fictional goals within their phenomenal field. The therapeutic task is to encourage activated social interest and the development of a new lifestyle by means of four phases of psychotherapy. These phases are establishing the relationship, uncovering the client's goals and dynamics, interpretation leading to insight, and reorientation through action methods. (p. 345)

### Economic Implications

Unemployment figures of disabled populations provide one of the most dramatic indicators of the direct result of negative teacher and counselor attitudes. According to the U. S. Census Bureau's Current Population Survey (Bennefield & McNeil, 1989), between 1980 and 1988 two times more disabled males were unemployed than males without disabilities (14 percent vs. 6 percent), and nearly three times more disabled females were unemployed than females without disabilities (14 percent vs. 5 percent). Levinson (1986) notes that, "despite the increased attention being paid to the vocational preparation of the handicapped, only thirty percent of secondary aged handicapped students leave high school with career or employment-related training" (p. 105).

### Gender Bias in Career Counseling

Sundal-Hansen (Gysbers et al., 1984) presents a vivid portrayal of the "female stereotype," which, as she explains,

begins in childhood, is reinforced by the socializing agents, becomes internalized, and continues into middle and older adulthood. The lack of work orientation, lack of planning orientation, lack of role models, lack of self-efficacy, lack of mathematics/science and athletic training, lack of economic independence, and lack of managerial skills, along with the Cinderella syndrome of "Be submissive, dependent, invisible, and passive," have combined into a deficit model that limits women's options, devalues their contributions, and keeps them from developing their human potential in getting the world's work done. (p. 225)

Counselor sex-role expectations are prevalent in career counseling, especially concerning nontraditional occupations for men and women (Haring et al., 1983; Knight & Sedlacek, 1983; Ratzlaff & Kahn, 1983; Virginia State Department of Education, 1986). Walker and Juhasz (1982) found the existence of sex-role stereotyping by high school counselors. In general, careers selected for males were perceived to be male-dominated and careers selected for females were perceived to be female-dominated across ability levels. When Slappo and Katz (1989) surveyed disabled women ( $N = 170$ ) who were employed in nontraditional careers, they found that the women, who were mostly White and high academic achievers, reported that the attitudes of people toward individuals with disabilities was a serious obstacle to their career development.

Counselors, faculty advisors, and students, at universities and community colleges are accused of reinforcing gender bias (Gittell, 1986; Minatoya & Sedlacek, 1983). Catherine Marshall (1985) indicates that students may be subconsciously affected by their observations of women administrators at their schools who, when confronted by male leadership norms, deviate from traditional female stereotypes, acquire stigma, and become marginal in the eyes of their observers.

However, even when government affirmative action laws encourage the placement of women into labor apprenticeships, less than 10% of the apprenticeship positions are filled by women (Murray, 1985). Lawlis and Crawford (1975) assert,

From experience and knowledge of vocations, it is possible to predict that women in pioneering fields have to develop strong self concepts to survive the pressures of being minority members in vocation, the possible alienation from members of their own sex, and the changing of family traditions. (p.266)

### Economic Implications

Sundal-Hansen (Gysbers et al., 1984) quotes statistics from the International Labour Office (1978) which reports that women make up more than a third of the world's economically active populations, and that 46 out of 100 women between 15 and 64 years of age are employed. She notes that in the United States in 1980, women formed 43 percent of the labor force; nearly 80 percent were in clerical, sales, service, factory, or plant jobs. She also notes that 66 percent of women who were heads of households with children under eighteen were in the labor force. Quoting from the 1980 National Commission on Working Women, she reports,

Although women, like men, report that they work because of economic need, they earn only 57 percent of what a full time male worker makes (the wage gap is getting larger not smaller). ...in 1979 women workers who were high school graduates earned less, on the average, than fully employed male workers who had not completed elementary school. Women workers who had graduated from college earned less than men workers with an eighth grade education. ...Women constitute 97 percent of all registered nurses, 71 percent of all elementary and secondary school teachers, less than 3 percent of all engineers, and less than 11 percent of all doctors. (p. 231)

Finally, she concludes by relaying an observation from Pearce (1978), "The feminization of poverty has meant that it is women who account for an increasingly large portion of the economically disadvantaged in the United States, especially displaced homemakers with children" (p. 231).

The Older Women's League (Leonard, F. & Others, 1990) reports that the long-term implications for gender-bias is most evident in the bleak retirement incomes of older women. The report notes that lower wages prompt single and divorced women to draw their social security benefits early, which actuarially reduces their benefits. Additionally, the report confirms that men generally receive 25% more in social security benefits than women, and that far fewer women receive pension benefits than men.

The President's Committee on the Employment of the Handicapped notes that in 1980, the "typical" working age disabled woman is described as : 51 years old; a high school graduate; married; not in the labor force; having under \$3,500 in income from all sources; and earning \$10,569 if employed full time (Bowe, 1983).

Zweig (1983) discusses Naisbitt's eleventh "megatrend" which will transform American society and reshape our institutions. This megatrend focuses on the predicted shift from sex roles to synergy; a reconciliation between the sexes at a deep level and a greater harmony between qualities which we have traditionally considered either masculine or feminine. Sundal-Hansen (Gysbers et al., 1984) states,

If career guidance and counseling specialists become conscious of the past sex-role system and its central impact on the career development of women and men and can envision male/female synergy or the sex-role transcendence of the future, then they will commit themselves to developing gender-free career counseling strategies and programs. such efforts will improve the quality of work life , learning life, and family life into an integrated whole and a better quality of life for all. (p. 242)

### Racial Bias in Career Counseling

Walker and Juhasz (1982) found that counselors demonstrate less bias toward male-dominated careers when advising average students. They affirm that their findings suggest that average ability Black males are more readily advised toward

allied health careers, which are traditionally dominated by women, than are high-ability Black males.

Clark and Franklin (1983) summarized a report by the Joint Center for Political Studies, which was formulated as a result of two conferences in New York and Wisconsin. The contributors of the report conclude that Blacks have always been structurally excluded from the American economy, but that they have suffered from problems that have very little to do with race. Such problems as deindustrialization, shifting employment patterns, and changing central-city demographics are cited as examples. Within the report are chronicles of Black Americans being represented disproportionately among the chronically poor, unemployed, and underemployed.

The suppression of equalized quality-educational opportunities is perhaps the leading detriment to African-Americans securing optimal career opportunities (Clark & Franklin, 1983). Scott (1985) believes that public education has been dominated by a White monopoly, and therefore has resulted in Black Americans being the most deliberately misinterpreted, the most poorly educated, and the most severely impaired of all the major ethnic groups served by the public schools. He notes that inner-city public schools, in particular, have become synonymous with the education of Blacks and other "disfranchised" minorities, which carry with them the stigma of failure. Finally, Scott advocates that African-American educators need to become more aggressive in providing a solid foundation of Black consciousness and high professional competence among their own members.

Johnson and Sedlacek (1979) assert that Whites have held, and continue to hold, basically negative societal attitudes toward Blacks in a number of hypothetical personal and social situations. For example, their research indicates that Whites reacted most negatively to Blacks as new neighbors or a friend being engaged to a Black, while reacting positively to Blacks in service occupations (e.g., selling



magazines, or being a policeman). Additionally, White and Sedlacek (1987) found similar results which equate the attitudes of Whites toward Blacks and Hispanics, therefore, indicating a generalization of these findings to other majority-minority relationships.

### Economic Implications

Sundal-Hansen (Gysbers et al., 1984) states

The problems of minority women are especially acute, with their unemployment rate at 12 percent in 1979 and 30 percent of black women living below the poverty level in 1978. The median annual income of husband/wife families in which both partners were employed in 1979 was \$25,290; for black married-couple families, \$15,913; and for black families headed by women, \$5,888. One has to consider these factors, and particularly the economic disadvantage of minority women in examining gender and work. It becomes apparent that factors of gender and race interact to keep minority women at the bottom of the socioeconomic ladder. (p. 231)

While these figures are admittedly a little over a decade old, they reflect centuries of worldwide stereotypical racial patterning which, unfortunately, are likely to require multiple generations to change.

### Social-Class Bias in Career Counseling

Miles (Gysbers et al., 1984) defines the economically disadvantaged as,

the "economically deprived" or the "poor," or simply those lacking the purchasing power to meet their basic needs. Included in large numbers are the chronically disadvantaged, who have existed under deprived conditions over a long period of time, and the new disadvantaged, recently thrown into the ranks by loss of job or some other catastrophe. (p. 386)

Miles attempts to explain why roughly 26 million economically disadvantaged Americans (i.e., approximately 12 percent of the U.S. population) remain poor. He notes that the social system under which Americans live guarantees poverty because the poor are in a negative cycle of unemployment, low educational attainment,

insufficient job skills, racism, discrimination, and lack of political support ; all of which, when combined are difficult to break out of. He quotes Gordon (1974),

It is difficult to embark upon a serious discussion of low-economic- and social-status persons without realizing that their position in our society's hierarchy is not accidental. These people are held back, in part, because of the nature of the economic and political structure of our society which has maintained segments of its population at differing levels of reward and participation, both as a function of the competitive traditions and as a device for controlling the demands of wage earners. (pp. 389-390)

Additionally, Miles notes that the implications for career counselors who embark in offering guidance to the economically disadvantaged are that their temporary or prolonged deprivations create economic, social, and psychological concerns or problems which are quantitatively and qualitatively more intense than the general population. He states,

In essence, the environment intensifies the needs of the disadvantaged. It is therefore crucial for counselors to learn as much as possible about how the lives of the disadvantaged are affected by those forces and to use that knowledge in program development and delivery of services . (p. 393)

Caldwell and Trainer (1989) provide some alarming indicators that reinforce class values in high school students' college enrollments. After interviewing elementary school students, recent high school students not attending college, school and community leaders, and college students from lower socioeconomic counties of South-central Pennsylvania, the authors concluded that lower-class parents took a laissez-faire attitude toward education and career choices, while middle-class parents insisted that their children plan for high educational and career objectives. Wenger (1971) noted that when counselors focus their attention on career counseling for middle-class clients, they primarily focus on white collar middle-class issues, thus neglecting the special needs of blue collar workers. Miles (Gysbers et al., 1984) asserts that the majority of the career guidance programs which have been aimed at assisting the economically disadvantaged have concentrated on changing the behavior

of the disadvantaged individual or group, giving little attention to the environment. He cites suggestions from Miller and Leonard (1974), who are concerned that the environment contains many barriers which prohibit positive development for the disadvantaged:

It may well be that traditional guidance goals and approaches will have little impact on the lives of disadvantaged clients unless the counselor is willing to exert a strong influence on the environment. The role of the guidance staff when working with the disadvantaged should include special activities designed to modify the environment to make it more supportive of the client. (p. 394)

Researchers' findings concur that a student's social-class strongly correlates with a student's selection of natural science, social science, and non-science majors (Clark & Pearson, 1983; Slaney & Brown, 1983). For example, Black students who chose a natural science major were from a higher social-class than were the black social science and non-science majors. Luzzo's (1991) analysis of social class and ethnic differences in college students' career maturity indicates that Caucasian-Americans exhibit significantly greater career maturity than did Filipino and Asian-American students. Luzzo asserts these findings indicate that current theories of career development and career counseling are lacking in their application to today's ethnically diverse college populations.

### Economic Implications

Miles attests to the realization that as the economy worsens, more individuals are drawn into poverty. He cites Jahoda (1982), "Unemployment, short- or long-term, is interpreted as restrictive poverty. It negatively affects physical and psychological health and has been positively related to increases in suicides, admissions to mental facilities, and homicides" (p. 388). He cites statistics from the 1981 U.S. Department of Labor which categorize "some 17 million whites, 8 million blacks, 13 million female-headed households as poor. Individuals sixty-five and over make up 15

percent of the poor" (p. 386). He cites statistics from the May, 1983 issue of the Bureau of Labor Statistics which indicated that,

10.1% of the population, or 11.2 million people, were unemployed. It was also estimated that another 1.5 million persons were unemployed but not counted in the statistics because they were discouraged and no longer actively looking for work; 2.1 million working part time who would like full-time work; and another 1 million in government make-work programs (Thurow, 1982). They are called the hidden unemployed. (p. 387)

Finally, Miles asserts that economic deprivation affects individuals in ways that extend beyond work and education including, "less access to medical care, legal counsel, recreation, leisure, travel, and cultural activities" (p. 389).

### Summary of Literature Review

Research which has investigated the prevalence of counselor bias toward clients concurs that counselor bias does indeed exist in many implicit and explicit forms. Furthermore, there is a universal mandate for more effective multicultural training which will help counselors identify and reduce the harmful effects of their negative bias toward clients. The review of literature reveals a dramatic expansion in the development of multicultural counseling theories and training methodologies which elevates the subject to a specialty subdivision of counseling psychology that is tantamount to being a "4th force in counseling." New multicultural theoretical frameworks include, an expanded "optimal" world view; a redefinition of power status; multi-dimensional identities and multi-dimensional oppressions; and exigency in advocating the infusion of multicultural education across-the-curriculum in elementary, secondary, and post secondary education.

Multicultural literature also indicates that measurement of a counselor's bias can be an accurate predictor of that counselor's behavior toward the client. A counselor's negative bias can deter effective counselor-client relationships. Likewise, a

counselor's bias that is irrationally positive, can cause a counselor's over-compensation. When multiple variables are measured separately, there is indication that the results are different than when multiple variables are measured corporately.

Researchers agree that a client's self-identity is often ingrained in his or her identification with a career, thus indicating the importance of investigating the career dynamics of counselors' multicultural bias impacting career guidance outcomes. Research indicates that a counselor's negative multicultural bias can significantly contribute to a client's limitation of career options or under-employment; conversely, a counselor's over-compensation toward the client may contribute to a client's inappropriate career choice or over-employment.

An intake report often results in eliciting bias from the counselor toward the client before the counselor has met with the client. This indicates that counselors feel they can intuitively make accurate and objective judgements about clients based on minimal intake information, and it also reveals a major vulnerability in the intake process.

Attitude assessment instruments which use a simplistic vocabulary that is often inherent in a semantic differential format (e.g., the ATHI by Lazar, or the ATDP, by Yucker, Block, & Youngg) are not as effective for assessing attitudes of college graduate students or practitioners as they are for undergraduate students and laypeople. Attitude assessment instruments which use a situational analysis approach (e.g., the SAS-H, by Sedlacek, Brooks, & Glenwood) have been proved to provide more accurate results than a semantic differential design, but their traditionally monotypical design limits their applicability in assessing the effects of multiple oppressions on a counselor's attitudes. While research concerning the effects of multiple oppressions on counselors' attitudes is limited, there is indication that various

combinations of client multiple dimensions produce different results than when considering single dimensions.

### **Focus of Study**

This study will combine five client oppressions which, when measured in single-dimensional studies, have indicated significant counselor stigmatization and counterproductive behavior. By combining these five client variables into 16 different combinations (see Table 2), it is hoped that patterns of negative counselor attitudes and over-compensations will emerge which will be different than the patterns which have been realized when measuring single oppression client variables.

## **CHAPTER III**

### **DESIGN AND METHODOLOGY**

#### **Population and Selection of Sample**

Graduate counselor trainees from Western Michigan University (WMU) were the focus of this study. WMU's Department of Counselor Education and Counseling Psychology (CECP) offers master's and doctoral degree programs, leading to limited and full licensure in psychology in the state of Michigan. The department enrolls 782 students; approximately 100 are doctoral level. The majority of the counselor trainees are Caucasian, American citizens, from a Judeo / Christian background, and are employed in a helping-profession such as education, the allied health fields, or social service agencies. All students enrolled in the CECP doctoral degree programs are required by Michigan state licensure laws and Counselor Accreditation for Counseling and Related Educational Programs (CACREP) guidelines to complete at least one multicultural counseling course and two career development courses. Master's degree students are required to complete at least one career development course and highly encouraged to complete at least one multicultural counseling course. Both doctoral and master's degree students are also encouraged to select multicultural field-practicum and internship sights which service a wide variety of client agendas.

The southwest Michigan communities that are served by Western Michigan University include a main campus and two satellite campuses, servicing approximately one and a half million population. WMU's main campus , in Kalamazoo, serves urban and rural communities which total approximately four

hundred thousand population. Two classes were also included from WMU's extension program in Grand Rapids, an urban community of approximately one quarter million, serving a four county area of urban and rural communities which total just under one million population. Additionally, graduate student populations include out-of-state and international students, including Asia and the Middle East.

Three different attitude surveys were designed by the researcher and administered to a total of 200 counselor trainees: The Attitudes of Counselor Trainees (A.C.T.) Survey, the Multicultural Beliefs Inhibiting Appropriate Support (M-B.I.A.S.) Survey, and the Career Beliefs Inhibiting Appropriate Support (C-B.I.A.S.) Survey. A 24-item demographics questionnaire was administered only to those students who completed the A.C.T. Survey.

#### Attitudes of Counselor Trainees (A.C.T.) Survey

The Attitudes of Counselor Trainees (A.C.T.) Survey has been designed as a tool for individual and group identification of multicultural biases, and is intended for administration to graduate-level counselor trainees in counseling psychology and other helping-professions. The instrument asks a counselor trainee to review the intake scenarios of four hypothetical clients who have recently graduated from the same high school. The counselor's assigned task is to estimate each client's potential for career success by means of employing a five-point Likert Scale, based solely on a scant review of the clients' academic and personal backgrounds (see Appendix A).

#### Design of Intake Scenarios

Four client demographic variables were selected which had been evidenced in the review of literature to elicit negative bias from counselors. Those four variables include: physical disabilities of hearing impairment and paraplegia, female gender,



African-American race, which in this study is identified as "Black," and Low social-class (viz., low socioeconomic status). The opposites of these four client variables (i.e., non-disabled, males, Caucasians, and middle social-class) were paired in different combinations with the stigmatized variables, thus creating 16 different groupings of demographic variables; with each of the scenarios including some of the stigmatized client variables and some of the non-stigmatized client variables. The 16 scenarios were then separated into four clusters of four scenarios (see Table 2). As a means of reducing the counselor trainees' ability to fake responses on the survey, the stigmatized client variables were incorporated into hypothetical career counseling intake scenarios, and a fifth commonly stigmatized variable of career motivation was added to the last of the four scenarios.

The scenarios were purposefully scant in their information about the clients so as to assure ample opportunity for the counselors to project their personal biases about the client's potential for career success, based solely upon the clusters of stigmatized and non-stigmatized client variables. Because first names have been proven to potentially affect a counselor's attitude toward or against a client (Cowan, 1983; Steele & Smithwick 1989), clients were identified only by number. Scenarios were purposefully "loaded" with words that were expected to elicit reinforcement of the depicted client demographics. For example, the terms Aid to Dependent Children (A.D.C.) and food stamps were used to reinforce a client's categorization of low social-class,. Also, reference to a paraplegic client's use of a wheel chair or hearing impaired client's need for translators using American Sign Language were infused into the scenarios so as to reinforce emphasis on a client's physical disability.

### Rating Scale Design and Rating Scale Items

A modified Likert scale was used to determine the degree of the counselor trainees' positive or negative bias toward each client. In the A.C.T. Survey instructions, counselor trainees were asked to rate each of four clients in twelve randomly arranged job-characteristics that are deemed important by employers. Counselor trainees were asked to rate the four clients' likelihood of occurrence for each of the 12 job-characteristics, using a five-point rating scale: 1 = excellent, 2 = good, 3 = average, 4 = fair, 5 = poor (see appendix A). The rationale for this rating-scale design is that the higher the number, the higher the indication of counselor trainee bias.

The College Placement Council regularly polls employer interviewers and outlines the worker traits that they deem as important (Rogers, 1982). Job interviewers traditionally rate job candidates on these job-characteristics because they are so significantly correlated to successful job hiring and subsequent patterns of career success within traditional corporate organizations. The 12 job-characteristics in the A.C.T. Survey were based on this list, with the presumption that many of the job-characteristics are very similar and thus, would provide a built-in means for validating the counselor trainees' answering consistencies. For example, item 8, "Goal Orientation," and item 12, "Orientation toward New, Better, More," are very similar; also, item 2, "awareness of personal strengths and weaknesses," and item 6, "clearly identified values," are very similar; as well as item 3, "experience self as significant," and item 4, "self-esteem." Theoretically, if some of these variables derive similar rating patterns, then some of the variables which consistently result in duplicate rating scores can be eliminated, thus creating a quicker turn-around time in administering the survey and scoring the results.

### Survey Scoring Procedures

By equating the values of the 5-point Likert Scale to degrees of positive or negative attitude toward the client, counselor trainees can quickly determine their degree of stigmatizing clients by adding the Likert Scale scores for each of the 12 career characteristics (i.e., the sum of the 12 scores will be between 12 and 60). Therefore, very low scores provide evidence of the counselor's belief that the client will be regarded as a very desirable job-candidate in the job-interviewer's mind, and the higher the total score for the 12 career characteristics, the more doubtful the counselor has been that the client will be regarded as a desirable job candidate. In this study, the higher scores are also evidence that there is a high degree of negative bias by the counselor trainee toward that client. Conversely, in this study low ratings in job-characteristics indicates a positive bias of the counselor trainee toward the client.

In this study computer-scannable forms were used to enable transfer of the data to magnetic tape for use on the university's VAX system. A t-test and general linear model (viz., analysis of variance) were used for comparison of the effects of 24 counselor demographic characteristics, 15 combinations of client oppression variables, and 12 rating-scale items. A normative table of rating means and grand means was developed, with a corresponding interaction plot which compares the grand means of the counselor trainees' ratings of clients profiled in the surveys.

### **Multicultural - B.I.A.S. and Career - B.I.A.S. Surveys**

The M-B.I.A.S. Survey and C-B.I.A.S. Survey were adapted from the A.C.T. Survey and administered one year later in order to supplement the findings of the A.C.T. Survey. The 12 rating items in the A.C.T. Survey were reduced to six items

and the career motivation variable, which was included in the A.C.T. and C-B.I.A.S. Surveys was not included in the M-B.I.A.S. Survey.

The multicultural scenarios in the C-B.I.A.S. Survey were modified to accentuate the differences between physically disabled middle social-class clients with a very poor career focus, and physically able low social-class clients with a very strong career focus.

### Counselor Trainee Demographics Questionnaire

Most of the literature which focuses on negative bias in counselor-client relationships indicates that very few counselor demographic variables are significantly associated with specific counselor attitude patterns. Rather than highlighting predictable stigmatization patterns which are proven to negatively affect psychotherapeutic outcome, the evidence points to one generalized fact, the more that counselor and client demographic characteristics are alike, the less likelihood that stigmatization will occur (e.g., Marshal et al., 1991). But this is only a general tendency with specific counselor-client populations and very little data to support broad generalization. Since most counselors have considerably more advanced education than their clients, are not physically disabled, are from middle and upper social-classes, and are represented by majority populations, they are automatically dissimilar to most of their clients; especially clients who represent a disability, a racial minority, or a lower social-class.

The A.C.T. Survey demographics questionnaire includes 24 items, some of which according to the review of literature, are associated with counselor stigmatization patterns (e.g., counselor's gender, race, bilingual ability, religious orientation, or personal and professional experiential contact with specialized populations). Some of the demographic questions relate to previously unresearched

or unsubstantiated areas of counselor trainees' stigmatization (e.g., counselor trainees' political orientation, previous foreign residency, marriage to a physically disabled or minority spouse, number of undergraduate and graduate level credit hours in multicultural courses). Some of the demographic questions were designed to poll the counselor trainees so as to determine their degree of learning about specific client populations by means of static informational, experiential contact, and pseudo-experiential learning structures, as discussed in Chapters I and II.

### Null-hypotheses

- Ho1 Ability bias:** Counselor Education and Counseling Psychology students (counselor trainees) will display the same attitudes toward physically disabled clients as toward non-disabled clients.
- Ho2 Ability bias:** Counselor trainees who have had informational exposure to physically disabled populations (i.e., multicultural course work) will display the same attitudes toward physically disabled clients as counselor trainees who have had no informational exposure.
- Ho3 Ability Bias:** Counselor trainees who have had experiential contact exposure to physically disabled populations (e.g., immediate family members who are physically disabled) will display the same attitudes toward physically disabled clients as counselor trainees who have had no experiential contact with physically disabled populations.
- Ho4 Gender bias:** Counselor trainees will display the same attitudes toward female clients as toward male clients.
- Ho5 Race bias:** Counselor trainees will display the same attitudes toward Black clients as toward Caucasian clients.

- Ho6 Social-class bias:** Counselor trainees will display the same attitudes toward clients from the low social-class as toward clients from the middle social-class.
- Ho7 Multiple oppressions:** Counselor trainees will display the same patterns of attitudes toward clients with various combinations of multiple oppressions (i.e., attitudes toward a Black, disabled, woman, from a lower social class) as they do toward clients with only one oppression.
- Ho8 Career motivation bias:** Counselor trainees will display the same attitudes toward non career-focussed clients as toward career-focussed clients.
- Ho9 No oppressions:** Counselor trainees will display the same attitudes toward clients with no oppressions as toward clients with one or more oppressions.

## CHAPTER IV

### ANALYSIS AND INTERPRETATION OF DATA

A general linear model (viz., an analysis of variance), with a probability level of less than .05 for making a type II error (when  $n$ -cells were the same ) and a type III error (when  $n$ -cells were not the same) was used to compare all of the 15 possible combinations of ability, class, gender, and race to each of the 24 counselor trainee demographic questions, each of the 12 rating-scale items in the A.C.T. Survey, and each of the 6 rating-scale items in the M-B.I.A.S. and C-B.I.A.S. Surveys.

Each counselor trainee rated only four of the 16 scenarios on one of the survey forms A, B, C, or D. Therefore, an analysis of variance, by survey form, was administered for the A.C.T. Survey in order to verify whether there was a Form-effect on the counselor trainees' ratings. Results indicated that the survey forms had no effect on the results of the ratings.

Three types of tables are provided in the analysis of the A.C.T., M-B.I.A.S., and C-B.I.A.S. surveys. The first type of table (viz., Tables 3, 6 , and 7) shows the mean and grand mean scores of the counselor trainees' ratings of the clients for each of 16 clients. Figures 1-3 graph the grand mean scores of the 16 clients, based upon the relationships between the clients' social-classes and physical abilities. The second type of table (viz., Tables 4, 8, and 10) delineates an analysis of variance for those counselor trainee demographic characteristics, client demographic characteristics, and rating-scale variables which produced significant effect on the counselor trainees' ratings of the clients in any of the 15 possible combinations of ability, gender, race, or social-class. The third type of table (viz., Tables 5, 9, and 11) ranks the means

Table 3

## Normative Scores: Attitudes of Counselor Trainees (A.C.T.) Survey

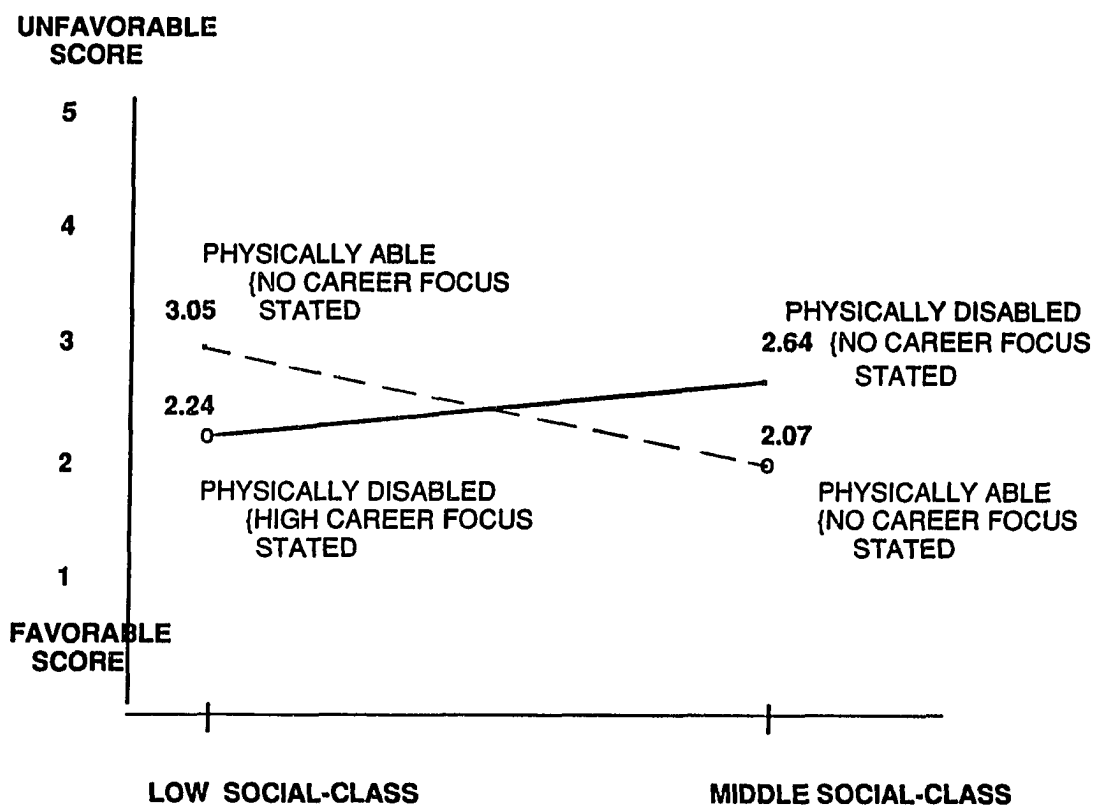
A.C.T. SURVEY®	CLIENT NAME	FORM 'A'	FORM 'B'	FORM 'C'	FORM 'D'	GRAND MEAN + 12 RATING ITEMS
CLIENT DEMOGRAPHICS		MEAN A.C.T. SCORE	MEAN A.C.T. SCORE	MEAN A.C.T. SCORE	MEAN A.C.T. SCORE	GRAND MEAN SCORES
Middle S.E.S. Physically Able	Client 1	Black Male	Black Female	Caucasian Male	Caucasian Female	2.07
		24.32	23.10	26.94	25.0	24.84
Low S.E.S. Physically Able	Client 2	Black Female	Black Male	Caucasian Female	Caucasian Male	3.05
		38.45	36.84	37.74	35.52	36.64
Middle S.E.S. Physically Disabled	Client 3	Caucasian Female	Caucasian Male	Black Female	Black Male	2.64
		30.94	32.26	32.84	30.68	31.68
Low S.E.S. Physically Disabled	Client 4	Caucasian Male	Caucasian Female	Black Male	Black Female	2.24
High Career Motivation		27.58	27.16	27.61	25.23	26.90

$N = 124$  Counselor Education Students  
Western Michigan University - Fall 1991

Even Distribution of  $n = 31$  in Forms A, B, C, D

$p < .05$





$N = 124$

Even distribution of  $n = 31$  in each category

$p < .05$

Figure 1. A.C.T. Survey - Interaction Plot: Effect of Class x Ability on Counselor Trainees' Ratings of Clients.

Table 4

**A.C.T. Survey Client Demographics: Analysis of Variance in Client Demographic  
Characteristics Producing Effect on Counselors' Ratings of Clients**

Client Demographic Characteristics	<i>Pr &gt; F</i>
Class	0.0001
Ability	0.0113
Class x Ability	0.0001
Class x Ability x Race	0.0429
Class x Ability x Gender	0.0483

*N* = 124

*p* < .05

Table 5

A.C.T. Survey Client Demographics: Means of Client Demographic Characteristics  
Producing Effect on Counselors' Ratings of Clients

Client Demographic Characteristics				Means
<b>Class</b>				
Middle				28.1411
Low				32.1250
<b>Ability</b>				
Disabled				29.3145
Able				30.9516
<b>Class</b>	<b>x</b>	<b>Ability</b>		
Middle	x	Able		24.7581
Low	x	Disabled		27.1048
Middle	x	Disabled		31.5242
Low	x	Able		37.1452
<b>Class</b>	<b>x</b>	<b>Ability</b>	<b>x</b>	<b>Race</b>
Middle	x	Able	x	Black
Middle	x	Able	x	Cau
Low	x	Disabled	x	Black
Low	x	Disabled	x	Cau
Middle	x	Disabled	x	Cau
Middle	x	Disabled	x	Black
Low	x	Able	x	Cau
Low	x	Able	x	Black
<b>Class</b>	<b>x</b>	<b>Ability</b>	<b>x</b>	<b>Gender</b>
Middle	x	Able	x	Female
Middle	x	Able	x	Male
Low	x	Disabled	x	Female
Low	x	Disabled	x	Male
Middle	x	Disabled	x	Female
Middle	x	Disabled	x	Male
Low	x	Able	x	Male
Low	x	Able	x	Female

$N = 124$

$p < .05$

Table 6

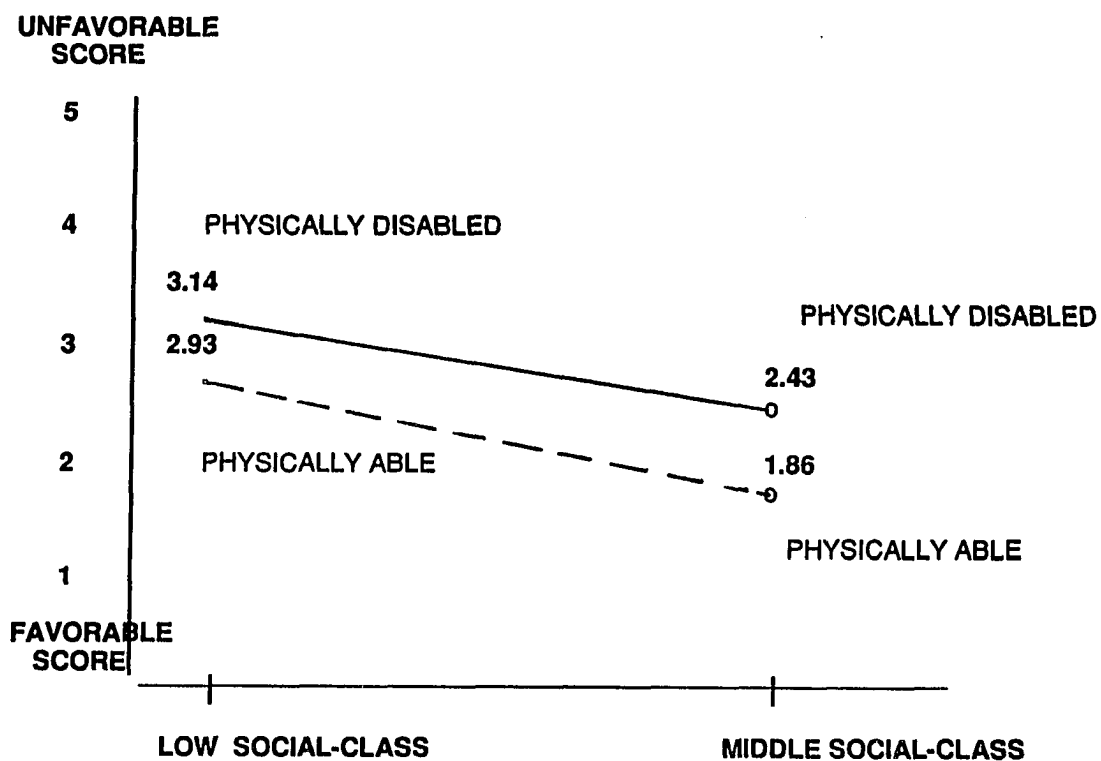
**Normative Scores: Multicultural Beliefs Inhibiting Appropriate Support  
(M - B.I.A.S.) Survey**

MULTICULTURAL B.I.A.S. SURVEY®	CLIENT NAME	FORM 'A'	FORM 'B'	FORM 'C'	FORM 'D'	GRAND MEAN + 6 RATING ITEMS
CLIENT DEMOGRAPHICS		MEAN M-B.I.A.S. SCORE	MEAN M-B.I.A.S. SCORE	MEAN M-B.I.A.S. SCORE	MEAN M-B.I.A.S. SCORE	GRAND MEAN SCORES
<b>Middle S.E.S. Physically Able</b>	<b>Client 1</b>	<b>Black Male</b>  10.1	<b>Black Female</b>  10.7	<b>Caucasian Male</b>  12.4	<b>Caucasian Female</b>  11.3	<b>1.86  11.13</b>
<b>Low S.E.S. Physically Able</b>	<b>Client 2</b>	<b>Black Female</b>  18.0	<b>Black Male</b>  16.1	<b>Caucasian Female</b>  18.5	<b>Caucasian Male</b>  17.7	<b>2.93  17.58</b>
<b>Middle S.E.S. Physically Disabled</b>	<b>Client 3</b>	<b>Caucasian Female</b>  15.5	<b>Caucasian Male</b>  14.7	<b>Black Female</b>  14.2	<b>Black Male</b>  13.8	<b>2.43  14.55</b>
<b>Low S.E.S. Physically Disabled</b>	<b>Client 4</b>	<b>Caucasian Male</b>  19.9	<b>Caucasian Female</b>  19.8	<b>Black Male</b>  16.8	<b>Black Female</b>  18.9	<b>3.14  18.85</b>

*N* = 48 Counselor Education Students  
Western Michigan University - Winter 1992

Even Distribution of *n* =12 in Forms A, B, C, D

*p* < .05



$N = 48$

$p < .05$

Figure 2. M-B.I.A.S. Survey Interaction Plot: Effect of Class x Ability on Counselor Trainees' Ratings of Clients.

Table 7

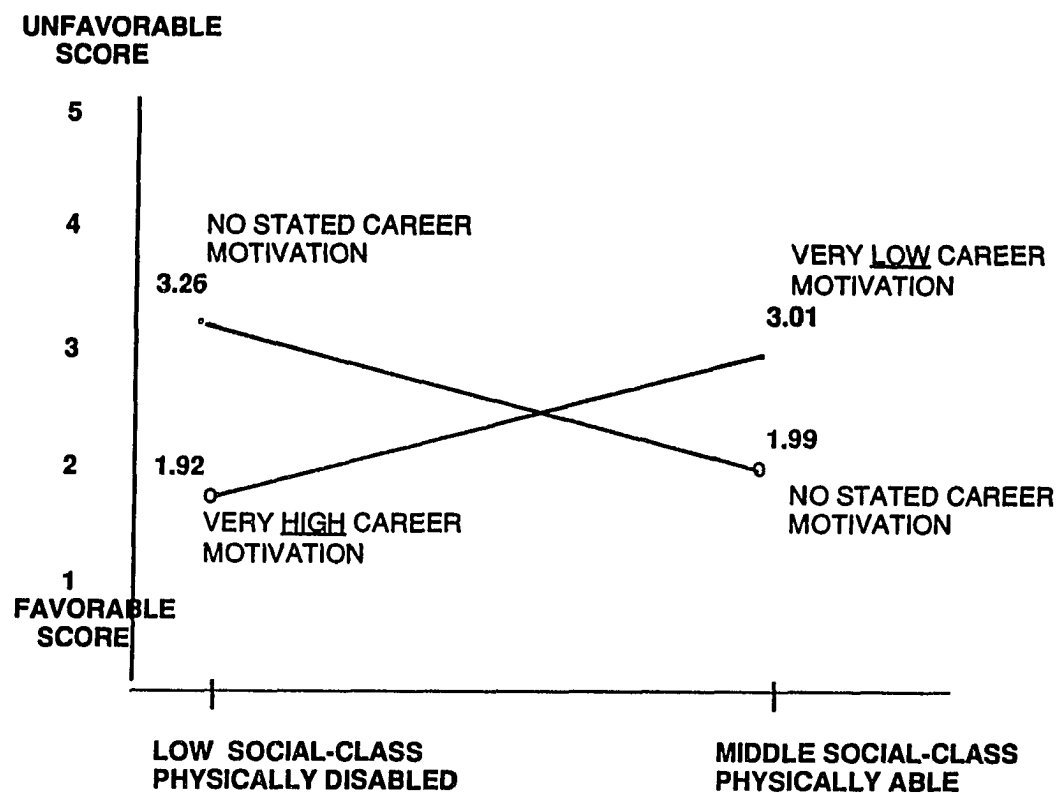
**Normative Scores: Career Beliefs Inhibiting Appropriate Support  
(C - B.I.A.S.) Survey**

CAREER B.I.A.S. SURVEY®	CLIENT NAME	FORM 'A'	FORM 'B'	FORM 'C'	FORM 'D'	GRAND MEAN + 6 RATING ITEMS
CLIENT DEMOGRAPHICS		MEAN C-B.I.A.S. SCORE	MEAN C-B.I.A.S. SCORE	MEAN C-B.I.A.S. SCORE	MEAN C-B.I.A.S. SCORE	GRAND MEAN SCORES
<b>Middle S.E.S. Physically Able</b>	<b>Client 1</b>	<b>Black Male</b>  10.3	<b>Black Female</b>  11.3	<b>Caucasian Male</b>  12.7	<b>Caucasian Female</b>  13.5	1.99  <b>11.95</b>
<b>Low S.E.S. Physically Disabled</b>	<b>Client 2</b>	<b>Black Female</b>  19.1	<b>Black Male</b>  19.2	<b>Caucasian Female</b>  21.3	<b>Caucasian Male</b>  18.7	3.26  <b>19.58</b>
<b>Middle S.E.S. Physically Able</b>  <b>Very Low Career Focus</b>	<b>Client 3</b>	<b>Caucasian Female</b>  17.4	<b>Caucasian Male</b>  18.0	<b>Black Female</b>  18.7	<b>Black Male</b>  18.0	3.01  <b>18.03</b>
<b>Low S.E.S. Physically Disabled</b>  <b>Very High Career Focus</b>	<b>Client 4</b>	<b>Caucasian Male</b>  10.7	<b>Caucasian Female</b>  9.3	<b>Black Male</b>  12.7	<b>Black Female</b>  13.3	1.92  <b>11.50</b>

*N* = 28 Counselor Education Students  
Western Michigan University - Winter 1992

Even Distribution of *n* = 7 in Forms A, B, C, D

*p* < .05



$N = 28$

$p < .05$

Figure 3. C-B.I.A.S. Survey Interaction Plot: Effect of Career Motivation on Counselor Trainees' Ratings of Clients.

Table 8

**A.C.T. Survey - Counselor Trainee Demographics Questionnaire Analysis of  
Variance: Counselor Trainee Demographic Characteristics Producing  
Effect on Counselor Trainees' Ratings of Clients**

<u>(Item #) / Demographic Characteristic</u>					<u>Pr &gt; F (p &lt; .05)</u>		
					<u>n = 95</u>	<u>n = 28</u>	
<u>(1) Age</u>					<u>(20-39 Years Old)</u>	<u>(40+ Years Old)</u>	
Class					0.0001	0.0001	
Class x Ability					0.0001	0.0001	
Class x Race x Gender					0.0199	-----	
Ability x Race x Gender					-----	0.0165	
					<u>n = 30</u>	<u>n = 94</u>	
<u>(2) Gender</u>					<u>( Males )</u>	<u>( Females )</u>	
Class					0.0009	0.0001	
Ability					-----	0.0306	
Class x Ability					0.0001	0.0001	
Class x Ability x Race					0.0192	-----	
Class x Ability x Gender					-----	0.0278	
Class x Ability x Race x Gender					0.0063	-----	
					<u>n = 55</u>	<u>n = 68</u>	
<u>(5) Annual Household Income</u>					<u>(Up To \$25,000)</u>	<u>(Over \$26,000)</u>	
Class					0.0001	0.0001	
Class x Ability					0.0001	0.0001	
Class x Race x Gender					-----	0.0175	
					<u>n = 29</u>	<u>n = 62</u>	<u>n = 30</u>
<u>(6) Religious Identity</u>					<u>(Liberal)</u>	<u>(Middle Range)</u>	<u>(Conservative)</u>
Class					0.0119	0.0001	0.0031
Ability					-----	-----	0.0349
Class x Ability					0.0001	0.0001	0.0001
Ability x Race					-----	-----	0.0282
Class x Race x Gender					0.0078	-----	-----
Ability x Race x Gender					0.0350	-----	-----



Table 8--Continued

<u>(Item #) / Demographic Characteristic</u>					<u>Pr &gt; F (p &lt; .05)</u>		
					<u>n = 28</u>	<u>n = 58</u>	<u>n = 37</u>
<u>(7) Years of Counseling Experience</u>					<u>(0 - 5 Years)</u>	<u>(6 - 15 Years )</u>	<u>(16+ Years )</u>
Class					0.0120	0.0002	0.0021
Ability					-----	-----	0.0309
Class	x	Ability			0.0001	0.0001	0.0001
Class	x	Ability	x	Race	-----	0.0244	-----
<u>(9) Community Size of Counseling Practice</u>						<u>n = 71</u>	<u>n = 49</u>
						<u>(Rural &amp; Suburban)</u>	<u>(Urban)</u>
Class						0.0001	0.0005
Ability						-----	0.0173
Gender						-----	0.0313
Class	x	Ability				0.0001	0.0001
Class	x	Ability	x	Race		-----	0.0219
Class	x	Race	x	Gender		-----	0.0364
<u>(13) Bilingual</u>						<u>n = 100</u>	<u>n = 24</u>
						<u>(No)</u>	<u>(Yes)</u>
Class						0.0001	0.0490
Ability						0.0247	-----
Class	x	Ability				0.0001	0.0001
Ability	x	Race				-----	0.0137
Class	x	Ability	x	Race		0.0251	-----
Class	x	Ability	x	Gender		-----	0.0485
Class	x	Race	x	Gender		0.0274	0.0006
<u>(17) Any Family Members Physically Disabled</u>						<u>n = 71</u>	<u>n = 49</u>
						<u>(No)</u>	<u>(Yes)</u>
Class						0.0001	-----
Ability						0.0009	-----
Class	x	Ability				0.0001	-----
Class	x	Ability	x	Race		0.0265	-----
Class	x	Ability	x	Gender		0.0265	-----
Class	x	Race	x	Gender		-----	0.0006

Table 8--Continued

(Item #) / Demographic Characteristic				<i>Pr</i> > F ( <i>p</i> < .05)		
				<i>n</i> = 29 (Liberal)	<i>n</i> = 69 (Middle Range)	<i>n</i> = 24 (Conservative)
<b>(18) Political Orientation</b>						
Class				-----	0.0001	0.0209
Ability				-----	0.0197	-----
Class	x	Ability		0.0001	0.0001	0.0001
Class	x	Gender		0.0385	-----	-----
Class	x	Ability	x Gender	0.0031	-----	-----
Class	x	Race	x Gender	-----	-----	0.0203
<b>(19) Undergraduate Credits In Multicultural Studies</b>					<i>n</i> = 37 (None)	<i>n</i> = 85 (1 Class or More)
Class					0.0103	0.0001
Ability					-----	0.0079
Class	x	Ability			0.0001	0.0001
Class	x	Race	x Gender		-----	0.0110
<b>(20) Graduate Credits In Multicultural Studies</b>					<i>n</i> = 103 (None)	<i>n</i> = 85 (1 Class or More)
Class					0.0001	0.0055
Ability					-----	0.0340
Class	x	Ability			0.0001	0.0001
Class	x	Ability	x Gender		-----	0.0309

Table 9

**A.C.T. Survey - Counselor Trainee Demographics: Means of Counselor Trainee  
Demographic Characteristics Producing Effect on Counselor Trainees'  
Ratings of Clients**

<u>(Item #) / Demographic Characteristic</u>				<u>Means (<math>p &lt; .05</math>)</u>	
<u>(1) Age</u>				<u><math>n = 95</math></u> <u>(20-39 Years Old)</u>	<u><math>n = 28</math></u> <u>(40+ Years Old)</u>
<b>Class</b>					
Middle				28.3000	27.4107
Low				31.6158	33.7321
<b>Class</b>	<b>x</b>	<b>Ability</b>			
Middle	x	Able		25.1158	23.2143
Low	x	Disabled		26.9158	27.7143
Middle	x	Disabled		31.4842	31.7071
Low	x	Able		36.3158	39.7500
<b>Class</b>	<b>x</b>	<b>Race</b>	<b>x Gender</b>		
Middle	x	Black	x Male	27.1632	-----
Middle	x	Cau	X Female	27.5918	-----
Middle	x	Black	x Female	28.4783	-----
Middle	x	Cau	x Male	30.0870	-----
Low	x	Black	x Female	30.7960	-----
Low	x	Cau	x Male	30.8571	-----
Low	x	Black	x Male	31.8261	-----
Low	x	Cau	x Female	33.0870	-----
<b>Ability</b>	<b>x</b>	<b>Race</b>	<b>x Gender</b>		
Disabled	x	Cau	x Female	-----	24.8667
Able	x	Black	x Female	-----	28.9333
Disabled	x	Black	x Male	-----	30.2308
Disabled	x	Cau	x Male	-----	30.2667
Able	x	Cau	x Male	-----	31.3077
Able	x	Cau	x Female	-----	31.7692
Disabled	x	Black	x Female	-----	33.9231
Able	x	Black	x Male	-----	33.9333

Table 9--Continued

(Item #) / Demographic Characteristic					Means ( $p < .05$ )	
(2) Gender					<i>n</i> = 30 ( Males )	<i>n</i> = 94 ( Females )
<b>Class</b>						
Middle					28.5667	28.0053
Low					32.7167	31.9362
<b>Ability</b>						
Disabled					-----	29.1489
Able					-----	30.7926
<b>Class</b>	<b>x</b>	<b>Ability</b>				
Middle	x	Able			25.4000	24.5532
Low	x	Disabled			27.9333	26.8404
Middle	x	Disabled			31.7333	31.4574
Low	x	Able			35.5000	37.0319
<b>Class</b>	<b>x</b>	<b>Ability</b>	<b>x</b>	<b>Race</b>		
Middle	x	Able	x	Black	23.6471	-----
Low	x	Disabled	x	Black	26.3846	-----
Middle	x	Able	x	Cau	27.6923	-----
Low	x	Disabled	x	Cau	29.1176	-----
Middle	x	Disabled	x	Cau	30.8235	-----
Middle	x	Disabled	x	Black	32.9231	-----
Low	x	Able	x	Cau	35.8462	-----
Low	x	Able	x	Black	38.7647	-----
<b>Class</b>	<b>x</b>	<b>Ability</b>	<b>x</b>	<b>Gender</b>		
Middle	x	Able	x	Female	-----	23.5102
Middle	x	Able	x	Male	-----	25.6889
Low	x	Disabled	x	Female	-----	25.7559
Low	x	Disabled	x	Male	-----	27.9778
Middle	x	Disabled	x	Female	-----	31.1778
Middle	x	Disabled	x	Male	-----	31.7143
Low	x	Able	x	Male	-----	35.5510
Low	x	Able	x	Female	-----	38.6444
<b>Class</b>	<b>x</b>	<b>Ability</b>	<b>x</b>	<b>Race</b>	<b>x</b>	<b>Gender</b>
Middle	x	Able	x	Black	x	Male
Middle	x	Able	x	Black	x	Female
Low	x	Disabled	x	Black	x	Female
Middle	x	Able	x	Cau	x	Male
Middle	x	Disabled	x	Black	x	Male
Low	x	Disabled	x	Black	x	Male
Middle	x	Disabled	x	Cau	x	Female
Low	x	Disabled	x	Cau	x	Male
Low	x	Disabled	x	Cau	x	Female
Middle	x	Able	x	Cau	x	Female
Low	x	Able	x	Cau	x	Female
Middle	x	Disabled	x	Black	x	Female
Low	x	Able	x	Cau	x	Male
Low	x	Able	x	Black	x	Female
Low	x	Able	x	Black	x	Male

Table 9--Continued

<u>(Item #) / Demographic Characteristic</u>				<u>Means (p &lt; .05)</u>	
				<i>n</i> = 55	<i>n</i> = 68
<u>(5) Annual Household Income</u>				<u>(Up To \$25,000)</u>	<u>(Over \$26,000)</u>
<b>Class</b>					
Middle				28.4273	27.9044
Low				32.5455	31.7279
<b>Class    x    Ability</b>					
Middle    x    Able				25.7091	23.9853
Low        x    Disabled				28.0364	26.2353
Middle    x    Disabled				31.1455	31.8235
Low        x    Able				37.0545	33.2206
<b>Class    x    Race        x    Gender</b>					
Middle    x    Black        x    Male				-----	26.5143
Middle    x    Cau         x    Female				-----	26.8286
Middle    x    Black        x    Female				-----	27.2727
Low        x    Black        x    Female				-----	30.6000
Low        x    Cau         x    Female				-----	30.6667
Middle    x    Cau         x    Male				-----	31.1515
Low        x    Cau         x    Male				-----	31.5143
Low        x    Black        x    Male				-----	34.2121

Table 9--Continued

(Item #) / Demographic Characteristic				Mean ( $p < .05$ )		
(6) Religious Identity				<i>n</i> = 30 (Liberal)	<i>n</i> = 62 (Middle Range)	<i>n</i> = 29 (Conservative)
<b>Class</b>						
Middle				29.1667	28.1371	26.9483
Low				32.3833	32.0161	31.9362
<b>Ability</b>						
Disabled				-----	-----	28.1724
Able				-----	-----	30.5345
<b>Class</b>	<b>x</b>	<b>Ability</b>				
Middle	x	Able		25.1000	24.9032	24.2759
Low	x	Disabled		27.3000	27.0968	26.7241
Middle	x	Disabled		33.2333	31.3710	29.6207
Low	x	Able		37.4667	36.9355	36.7931
<b>Ability</b>	<b>x</b>	<b>Race</b>				
Able	x	Black		-----	-----	29.2250
Disabled	x	Black		-----	-----	26.7241
Disabled	x	Cau		-----	-----	27.6750
Able	x	Cau		-----	-----	33.4444
<b>Class</b>	<b>x</b>	<b>Race</b>	<b>x Gender</b>			
Middle	x	Black	x Male	26.8667	-----	-----
Middle	x	Cau	X Female	26.6667	-----	-----
Low	x	Cau	x Male	30.3333	-----	-----
Middle	x	Black	x Female	30.5333	-----	-----
Middle	x	Cau	x Male	32.6000	-----	-----
Low	x	Black	x Female	32.2000	-----	-----
Low	x	Cau	x Female	32.5333	-----	-----
Low	x	Black	x Male	34.4667	-----	-----
<b>Ability</b>	<b>x</b>	<b>Race</b>	<b>x Gender</b>			
Disabled	x	Black	x Male	24.8667	-----	-----
Disabled	x	Cau	x Female	28.4000	-----	-----
Able	x	Cau	x Male	29.8000	-----	-----
Able	x	Cau	x Female	30.8000	-----	-----
Able	x	Black	x Female	31.2667	-----	-----
Disabled	x	Black	x Female	31.4667	-----	-----
Disabled	x	Cau	x Male	33.1333	-----	-----
Able	x	Black	x Male	33.2667	-----	-----

Table 9--Continued

<u>(Item #) / Demographic Characteristics</u>				<u>Means (p &lt; .05)</u>		
<b>(7) Years of Counseling Experience</b>				<b>n = 28 (0 - 5 Years)</b>	<b>n = 58 (6 - 15 Years)</b>	<b>n = 37 (16+ Years)</b>
<b>Class</b>						
Middle				28.3571	27.8017	28.4595
Low				32.0536	31.6551	32.7432
<b>Ability</b>						
Disabled				-----	-----	29.4865
Able				-----	-----	31.7162
<b>Class</b>	<b>x</b>	<b>Ability</b>				
Middle	x	Able		25.2143	23.8103	25.9730
Low	x	Disabled		26.8214	26.5172	28.0270
Middle	x	Disabled		31.5000	31.7931	30.9459
Low	x	Able		37.2857	36.7931	37.4595
<b>Class</b>	<b>x</b>	<b>Ability</b>	<b>x</b>	<b>Race</b>		
Middle	x	Able	x	Black	-----	21.1154
Middle	x	Able	x	Cau	-----	26.0000
Low	x	Disabled	x	Cau	-----	26.1538
Low	x	Disabled	x	Black	-----	26.8125
Middle	x	Disabled	x	Cau	-----	29.8077
Middle	x	Disabled	x	Black	-----	33.4063
Low	x	Able	x	Cau	-----	36.5313
Low	x	Able	x	Black	-----	37.1154

Table 9--Continued

<u>(Item #) / Demographic Characteristics</u>				<u>Means (<math>p &lt; .05</math>)</u>	
<u>(9) Community Size of Counseling Practice</u>				<u><math>n = 71</math></u> <u>(Rural &amp; Suburban)</u>	<u><math>n = 49</math></u> <u>(Urban)</u>
<b>Class</b>					
Middle				27.8451	28.3673
Low				32.0704	32.0000
<b>Ability</b>					
Disabled				-----	28.9286
Able				-----	31.4388
<b>Gender</b>					
Female				-----	29.2041
Male				-----	31.1633
<b>Class</b>	<b>x</b>	<b>Ability</b>			
Middle	x	Able		24.5775	24.5714
Low	x	Disabled		27.9859	25.6939
Middle	x	Disabled		31.1127	32.1633
Low	x	Able		36.1549	38.3061
<b>Class</b>	<b>x</b>	<b>Ability</b>	<b>x</b>	<b>Race</b>	
Middle	x	Able	x	Black	----- 23.7391
Low	x	Disabled	x	Black	----- 24.4615
Middle	x	Able	x	Cau	----- 25.3077
Low	x	Disabled	x	Cau	----- 27.0870
Middle	x	Disabled	x	Cau	----- 31.4783
Middle	x	Disabled	x	Black	----- 32.7692
Low	x	Able	x	Cau	----- 36.3077
Low	x	Able	x	Black	----- 40.5652
<b>Class</b>	<b>x</b>	<b>Race</b>	<b>x</b>	<b>Gender</b>	
Middle	x	Cau	X	Female	----- 25.5926
Middle	x	Black	x	Male	----- 28.0000
Middle	x	Black	x	Female	----- 29.1818
Low	x	Black	x	Female	----- 30.8889
Middle	x	Cau	x	Male	----- 31.4091
Low	x	Cau	x	Female	----- 31.5909
Low	x	Cau	x	Male	----- 32.2963
Low	x	Black	x	Male	----- 33.4091



Table 9--Continued

(Item #) / Demographic Characteristics				Means ( $p < .05$ )	
(13) Bilingual				$n = 100$ (No)	$n = 24$ (Yes)
<b>Class</b>					
Middle				28.1400	28.1458
Low				32.1850	31.8750
<b>Ability</b>					
Disabled				29.3900	-----
Able				30.9350	-----
<b>Class</b>	<b>x</b>	<b>Ability</b>			
Middle	x	Able		24.9400	24.0000
Low	x	Disabled		27.4400	25.7083
Middle	x	Disabled		31.3400	32.2917
Low	x	Able		36.9300	38.0417
<b>Ability</b>	<b>x</b>	<b>Race</b>			
Disabled	x	Cau		-----	27.4375
Able	x	Black		-----	30.1875
Disabled	x	Black		-----	32.1250
Able	x	Cau		-----	32.6875
<b>Class</b>	<b>x</b>	<b>Ability</b>	<b>x</b> <b>Race</b>		
Middle	x	Able	x Black	23.3913	-----
Middle	x	Able	x Cau	26.2593	-----
Low	x	Disabled	x Black	26.9259	-----
Low	x	Disabled	x Cau	28.0435	-----
Middle	x	Disabled	x Black	31.2963	-----
Middle	x	Disabled	x Cau	31.3913	-----
Low	x	Able	x Cau	35.9444	-----
Low	x	Able	x Black	38.0870	-----
<b>Class</b>	<b>x</b>	<b>Ability</b>	<b>x</b> <b>Gender</b>		
Middle	x	Able	x Female	-----	22.5000
Low	x	Disabled	x Female	-----	23.7857
Middle	x	Able	x Male	-----	26.1000
Low	x	Disabled	x Male	-----	28.4000
Middle	x	Disabled	x Female	-----	30.6000
Middle	x	Disabled	x Male	-----	33.5000
Low	x	Able	x Male	-----	36.8571
Low	x	Able	x Female	-----	39.7000
<b>Class</b>	<b>x</b>	<b>Race</b>	<b>x</b> <b>Gender</b>		
Middle	x	Black	x Male	-----	26.5000
Middle	x	Cau	x Female	-----	27.6667
Middle	x	Black	x Female	-----	28.7308
Middle	x	Cau	x Male	-----	29.5000
Low	x	Cau	x Male	-----	31.3542
Low	x	Black	x Female	-----	31.8958
Low	x	Black	x Male	-----	32.2115
Low	x	Cau	x Female	-----	33.1923

Table 9--Continued

<u>(Item #) / Demographic Characteristics</u>				<u>Means (<i>p</i> &lt; .05)</u>		
<b>(17) Family Members Physically Disabled</b>				<b><i>n</i> = 109 (No)</b>	<b><i>n</i> = 14 (Yes)</b>	
<b>Class</b>						
Middle				28.2431	-----	
Low				32.1743	-----	
<b>Ability</b>						
Disabled				29.0734	-----	
Able				31.3440	-----	
<b>Class</b>	<b>x</b>	<b>Ability</b>				
Middle	x	Able		25.0000	-----	
Low	x	Disabled		26.6606	-----	
Middle	x	Disabled		31.4862	-----	
Low	x	Able		37.4862	-----	
<b>Class</b>	<b>x</b>	<b>Ability</b>	<b>x</b>	<b>Race</b>		
Middle	x	Able	x	Black	23.8491	-----
Middle	x	Able	x	Cau	26.0893	-----
Low	x	Disabled	x	Black	26.3571	-----
Low	x	Disabled	x	Cau	26.9811	-----
Middle	x	Disabled	x	Cau	30.4906	-----
Middle	x	Disabled	x	Black	32.4286	-----
Low	x	Able	x	Cau	37.0179	-----
Low	x	Able	x	Black	38.3962	-----
<b>Class</b>	<b>x</b>	<b>Ability</b>	<b>x</b>	<b>Gender</b>		
Middle	x	Able	x	Female	24.3519	-----
Low	x	Disabled	x	Female	25.5741	-----
Middle	x	Able	x	Male	25.6364	-----
Low	x	Disabled	x	Male	27.7273	-----
Middle	x	Disabled	x	Male	31.2037	-----
Middle	x	Disabled	x	Female	31.7636	-----
Low	x	Able	x	Male	36.7407	-----
Low	x	Able	x	Female	38.6181	-----
<b>Class</b>	<b>x</b>	<b>Race</b>	<b>x</b>	<b>Gender</b>		
Middle	x	Black	x	Male	-----	18.0000
Middle	x	Cau	X	Female	-----	20.3333
Low	x	Cau	x	Male	-----	22.6667
Middle	x	Black	x	Female	-----	26.6364
Low	x	Black	x	Female	-----	28.0000
Middle	x	Cau	x	Male	-----	32.0909
Low	x	Cau	x	Female	-----	33.0909
Low	x	Black	x	Male	-----	33.4545

Table 9--Continued

<u>(Item #) / Demographic Characteristics</u>				<u>Means (<math>p &lt; .05</math>)</u>		
<b>(18) Political Orientation</b>				<b><math>n = 29</math> (Liberal)</b>	<b><math>n = 69</math> (Middle Range)</b>	<b><math>n = 24</math> (Conservative)</b>
<b>Class</b>						
Middle				-----	27.8116	27.5625
Low				-----	32.3623	32.2083
<b>Ability</b>						
Disabled				-----	29.0435	-----
Able				-----	31.1304	-----
<b>Class</b>	<b>x</b>	<b>Ability</b>				
Middle	x	Able		25.3103	24.9130	23.2500
Low	x	Disabled		26.7586	27.3768	26.4167
Middle	x	Disabled		33.4828	30.7101	31.8750
Low	x	Able		36.1034	37.3478	38.0000
<b>Class</b>	<b>x</b>	<b>Gender</b>				
Middle	x	Female		28.2414	-----	-----
Low	x	Male		30.48.28	-----	-----
Middle	x	Male		30.5517	-----	-----
Low	x	Female		32.3793	-----	-----
<b>Class</b>	<b>x</b>	<b>Ability</b>	<b>x</b>	<b>Gender</b>		
Middle	x	Able	x	Female	21.9286	-----
Low	x	Disabled	x	Female	25.0714	-----
Low	x	Disabled	x	Male	28.3333	-----
Middle	x	Able	x	Male	28.4667	-----
Middle	x	Disabled	x	Male	32.7857	-----
Low	x	Able	x	Male	32.7857	-----
Middle	x	Disabled	x	Female	34.1333	-----
Low	x	Able	x	Female	29.2000	-----
<b>Class</b>	<b>x</b>	<b>Race</b>	<b>x</b>	<b>Gender</b>		
Middle	x	Black	x	Male	-----	24.6667
Middle	x	Cau	X	Female	-----	27.0000
Low	x	Cau	x	Male	-----	27.6667
Middle	x	Black	x	Female	-----	28.0000
Middle	x	Cau	x	Male	-----	29.2000
Low	x	Cau	x	Female	-----	31.2667
Low	x	Black	x	Female	-----	34.1111
Low	x	Black	x	Male	-----	34.7333

Table 9--Continued

<u>(Item #) / Demographic Characteristics</u>				<u>Means (<math>p &lt; .05</math>)</u>	
<b>(19) Undergraduate Multicultural Credits</b>				<b><math>n = 37</math> (None)</b>	<b><math>n = 85</math> (1 + class)</b>
<b>Class</b>					
Middle				30.0811	27.2588
Low				33.4459	31.5176
<b>Ability</b>					
Disabled				-----	28.3941
Able				-----	30.3824
<b>Class</b>	<b>x</b>	<b>Ability</b>			
Middle	x	Able		25.7838	24.2000
Low	x	Disabled		28.5405	26.4706
Middle	x	Disabled		34.3784	30.3176
Low	x	Able		38.3514	36.5647
<b>Class</b>	<b>x</b>	<b>Race</b>	<b>x Gender</b>		
Middle	x	Cau	X Female	-----	25.1905
Middle	x	Black	x Male	-----	27.0714
Middle	x	Black	x Female	-----	27.4651
Middle	x	Cau	x Male	-----	29.2558
Low	x	Black	x Female	-----	30.5714
Low	x	Cau	x Male	-----	30.6667
Low	x	Cau	x Female	-----	31.7674
Low	x	Black	x Male	-----	33.0233

Table 9--Continued

<u>(Item #) / Demographic Characteristics</u>				<u>Means (p &lt; .05)</u>	
				<u>n = 103</u>	<u>n = 20</u>
<b>(20) Graduate Multicultural Credits</b>				<b>(None)</b>	<b>(1 + class)</b>
<b>Class</b>					
Middle				28.4417	26.7000
Low				32.3010	31.2500
<b>Ability</b>					
Disabled				-----	27.3750
Able				-----	30.5750
<b>Class</b>	<b>x</b>	<b>Ability</b>			
Middle	x	Able		24.8641	24.2000
Low	x	Disabled		27.4078	25.5500
Middle	x	Disabled		32.0194	29.2000
Low	x	Able		37.1942	36.9500
<b>Class</b>	<b>x</b>	<b>Ability</b>	<b>x</b>		
Middle	x	Able	x	Female	21.8333
Low	x	Disabled	x	Female	23.5833
Middle	x	Able	x	Male	27.7500
Middle	x	Disabled	x	Female	28.3750
Low	x	Disabled	x	Male	28.5000
Middle	x	Disabled	x	Male	29.7500
Low	x	Able	x	Male	35.8333
Low	x	Able	x	Female	38.6250

Table 10

**A.C.T Survey - Client Rating Form Analysis of Variance: Rating Form Items  
Producing Effect on Counselor Trainees' Ratings of Clients**

<u>(Item #) / Rating Item</u>	<u>Pr &gt; F</u>
<b>(1) Internal Motivation (Locus of Control)</b>	
Class	0.0062
Ability	0.0001
Class x Ability	0.0001
<b>(2) Awareness of Personal Strengths and Weaknesses</b>	
Class	0.0001
Ability	0.0001
Class x Ability	0.0001
Class x Ability x Gender	0.0009
<b>(3) Experience Self as Significant</b>	
Class	0.0001
Class x Ability	0.0001
Class x Ability x Gender	0.0011
<b>(4) Self-Esteem</b>	
Class	0.0001
Class x Ability	0.0001
<b>(5) Level of Honesty</b>	
Class	0.0001
Ability	0.0001
Class x Ability	0.0001
Race	0.0436
Ability x Race	0.0333
Class x Race x Gender	0.0333
<b>(6) Clearly Identified Values</b>	
Class	0.0001
Ability	0.0001
Class x Ability	0.0001
Class x Ability x Gender	0.0315

Table 10--Continued

<u>(Item #) / Rating Item</u>	<u>Pr &gt; F</u>
<b>(7) Energy Level</b>	
Class	0.0001
Ability	0.0001
Class x Ability	0.0001
<b>(8) Goal Orientation</b>	
Class	0.0001
Ability	0.0001
Class x Ability	0.0001
<b>(9) Communication Skills</b>	
Class	0.0001
Ability	0.0001
Class x Ability	0.0001
Class x Race x Gender	0.0364
<b>(10) Extracurricular Activities</b>	
Class	0.0072
Ability	0.0001
Class x Ability	0.0001
<b>(11) Personality</b>	
Class	0.0001
Class x Ability	0.0001
Class x Race x Gender	0.0011
<b>(12) Orientation Toward New, Better, More</b>	
Class	0.0004
Ability	0.0014
Class x Ability	0.0001

$N = 124$

$p < .05$

Table 11

**A.C.T Survey - Client Rating Form: Means of Rating Form Items Producing  
Effect on Counselors' Ratings of Clients**

<u>(Item #) / Rating Item</u>				<u>Mean Rating-Item Value (p &lt; .05)</u>
<b>(1) Internal Motivation (Locus of Control)</b>				
<b>Class</b>				
Middle				2.2258
Low				2.4637
<b>Ability</b>				
Disabled				2.1210
Able				2.5685
<b>Class</b>	<b>x</b>	<b>Ability</b>		
Low	x	Disabled		1.7984
Middle	x	Able		2.0081
Middle	x	Disabled		2.4435
Low	x	Able		3.1290
<b>(2) Awareness of Personal Strengths and Weaknesses</b>				
<b>Class</b>				
Middle				2.6250
Low				2.2258
<b>Ability</b>				
Disabled				2.1935
Able				2.6573
<b>Class</b>	<b>x</b>	<b>Ability</b>		
Low	x	Disabled		2.0887
Middle	x	Able		2.1532
Middle	x	Disabled		2.2984
Low	x	Able		3.1613
<b>Class</b>	<b>x</b>	<b>Ability</b>	<b>x</b>	<b>Gender</b>
Low	x	Disabled	x	Female
Middle	x	Able	x	Female
Middle	x	Disabled	x	Male
Low	x	Disabled	x	Male
Middle	x	Able	x	Male
Middle	x	Disabled	x	Female
Low	x	Able	x	Male
Low	x	Able	x	Female



Table 11--Continued

(Item #) / Rating Item		Mean Rating-Item Value ( $p < .05$ )
<b>(3) Experience Self as Significant</b>		
<b>Class</b>		
Middle		2.4597
Low		2.8589
<b>Class x Ability</b>		
Middle	x Able	2.0565
Low	x Disabled	2.3387
Middle	x Disabled	2.8629
Low	x Able	3.3790
<b>Class x Ability x Gender</b>		
Middle	x Able x Female	1.8871
Low	x Disabled x Female	2.2097
Middle	x Able x Male	2.2258
Low	x Disabled x Male	2.4677
Middle	x Disabled x Female	2.8548
Middle	x Disabled x Male	2.8710
Low	x Able x Male	3.1290
Low	x Able x Female	3.6290
<b>(4) Self-Esteem</b>		
<b>Class</b>		
Middle		2.5726
Low		3.0524
<b>Class x Ability</b>		
Middle	x Able	2.0484
Low	x Disabled	2.5403
Middle	x Disabled	3.0968
Low	x Able	3.5645

Table 11--Continued

<u>(Item #) / Rating Item</u>				<u>Mean Rating-Item Value</u> ( $p < .05$ )
<b>(5) Level of Honesty</b>				
<b>Class</b>				
Middle				2.2984
Low				2.7984
<b>Ability</b>				
Disabled				2.3831
Able				2.7137
<b>Class</b>	<b>x</b>	<b>Ability</b>		
Middle	x	Able		2.1290
Low	x	Disabled		2.2984
Middle	x	Disabled		2.4677
Low	x	Able		3.2984
<b>Race</b>				
Black				2.4758
Caucasian				2.6210
<b>Ability</b>	<b>x</b>	<b>Race</b>		
Disabled	x	Cau		2.3790
Disabled	x	Black		2.3871
Able	x	Black		2.5645
Able	x	Cau		2.8629
<b>Class</b>	<b>x</b>	<b>Race</b>	<b>x</b> <b>Gender</b>	
Middle	x	Black	x Male	2.0968
Middle	x	Cau	x Female	2.2742
Middle	x	Black	x Female	2.2903
Middle	x	Cau	x Male	2.5323
Low	x	Black	x Female	2.6774
Low	x	Black	x Male	2.8387
Low	x	Cau	x Female	2.8387
Low	x	Cau	x Male	2.8387

Table 11--Continued

<u>(Item #) / Rating Item</u>		<u>Mean Rating-Item Value (p &lt; .05)</u>			
<b>(6) Clearly Identified Values</b>					
<b>Class</b>					
Middle		2.2379			
Low		2.8871			
<b>Ability</b>					
Disabled		2.2621			
Able		2.8629			
<b>Class</b>	<b>x</b>	<b>Ability</b>			
Middle	x	Able			
Low	x	Disabled			
Middle	x	Disabled			
Low	x	Able			
		2.1452			
		2.1935			
		2.3306			
		3.5806			
<b>Class</b>	<b>x</b>	<b>Ability</b>	<b>x</b>	<b>Gender</b>	
Middle	x	Able	x	Female	2.0645
Low	x	Disabled	x	Female	2.1129
Middle	x	Able	x	Male	2.2258
Low	x	Disabled	x	Male	2.2742
Middle	x	Disabled	x	Male	2.2903
Middle	x	Disabled	x	Female	2.3710
Low	x	Able	x	Male	3.4516
Low	x	Able	x	Female	3.7097
<b>(7) Energy Level</b>					
<b>Class</b>					
Low					1.8871
Middle					2.2540
<b>Ability</b>					
Able					1.8105
Disabled					2.3306
<b>Class</b>	<b>x</b>	<b>Ability</b>			
Middle	x	Able			1.7661
Low	x	Able			1.8548
Low	x	Disabled			1.9194
Middle	x	Disabled			2.7419

Table 11--Continued

(Item #) / Rating Item		Mean Rating-Item Value (p < .05)		
(8) Goal Orientation				
Class				
Middle		2.1855		
Low		2.5524		
Ability				
Disabled		1.9677		
Able		2.7702		
Class	x	Ability		
Low	x	Disabled		
Middle	x	Able		
Middle	x	Disabled		
Low	x	Able		
		1.6532		
		2.0887		
		2.2823		
		3.4516		
(9) Communication Skills				
Class				
Middle		2.2258		
Low		3.0202		
Ability				
Disabled		2.4516		
Able		2.7944		
Class	x	Ability		
Middle	x	Able		
Middle	x	Disabled		
Low	x	Disabled		
Low	x	Able		
		2.1452		
		2.3065		
		2.5968		
		3.4435		
Class	x	Race	x	Gender
Middle	x	Cau	x	Female
Middle	x	Black	x	Male
Middle	x	Black	x	Female
Middle	x	Cau	x	Male
Low	x	Cau	x	Male
Low	x	Black	x	Female
Low	x	Black	x	Male
Low	x	Cau	x	Female
				2.0968
				2.1935
				2.2903
				2.3226
				2.9194
				2.9677
				3.0806
				3.1129

Table 11--Continued

<u>(Item #) / Rating Item</u>		<u>Mean Rating-Item Value (p &lt; .05)</u>			
<b>(10) Extracurricular Activities</b>					
<b>Class</b>					
Low		2.6008			
Middle		2.8266			
<b>Ability</b>					
Able		2.0605			
Disabled		3.3669			
<b>Class</b>	<b>x</b>	<b>Ability</b>			
Middle	x	Able	1.9919		
Low	x	Able	2.1290		
Low	x	Disabled	3.0726		
Middle	x	Disabled	3.6613		
<b>(11) Personality</b>					
<b>Class</b>					
Middle			2.3185		
Low			2.7419		
<b>Class</b>	<b>x</b>	<b>Ability</b>			
Middle	x	Able	2.1371		
Low	x	Disabled	2.4839		
Middle	x	Disabled	2.5000		
Low	x	Able	3.0000		
<b>Class</b>	<b>x</b>	<b>Race</b>	<b>x</b>	<b>Gender</b>	
Middle	x	Cau	x	Female	2.2258
Middle	x	Black	x	Male	2.2419
Middle	x	Black	x	Female	2.2419
Middle	x	Cau	x	Male	2.5645
Low	x	Black	x	Female	2.5645
Low	x	Cau	x	Male	2.6451
Low	x	Black	x	Male	2.8710
Low	x	Cau	x	Female	2.8871

Table 11--Continued

<u>(Item #) / Rating Item</u>			<u>Mean Rating-Item Value (p &lt; .05)</u>
<b>(12) Orientation Toward New, Better, More</b>			
<b>Class</b>			
		Middle	2.3105
		Low	2.6371
<b>Ability</b>			
		Disabled	2.3266
		Able	2.6210
<b>Class</b>	<b>x</b>	<b>Ability</b>	
Middle	x	Able	2.0887
Low	x	Disabled	2.1210
Middle	x	Disabled	2.5323
Low	x	Able	3.1532

of client scores within those categories which the preceding analysis of variance tables identified as significant to client ratings.

#### Normative Scores of Intake Scenarios

#### Client Characteristics Producing Favorable Effect on Counselor Trainees' Ratings of Clients

In comparing the grand mean scores of the intake scenarios, the effect of a clients' social-class and a clients' ability level on the counselor trainees' ratings were independently and often cooperatively significant (see Table 3 & Figure 1, Table 6 & Figure 2, and Table 7 & Figure 3). Note, that the higher the clients' mean and grand mean scores (i.e., less favorable ratings), the more there exists an indication that negative bias was exhibited by the counselor trainees.

### A.C.T. Survey

**Class.** An analysis of variance in the A.C.T. Survey's client demographic characteristics (see Table 4) indicates that the clients' social-class had a significant effect on the counselor trainees' ratings of the clients. Table 5 indicates that the middle class were favored over the low class. Figure 1 depicts how the grand mean score of physically able clients from the low social-class is approximately 32% higher than the grand mean score of physically able clients from the middle social-class (see Table 3, clients 1 and 2). This indicates 32% more stigmatization by counselor trainees against the clients from the low social-class.

Comparison of individual mean scores between clients 1 and 2 of Table 3 also indicates that while all clients in the middle social-class (client 1) received significantly more favorable ratings (i.e., 24% to 40% improvement in mean scores) than all clients from the low social-class (Client 2) the mean scores of Caucasian clients were less improved by client social class than Black clients, with physically able Caucasian males showing the least improvement in ratings between social-class. Physically disabled Caucasian males also showed the least improvement in ratings in a comparison of clients 3 and 4.

**Ability.** An analysis of variance (see Table 4) indicates that the clients' physical ability level had a significant effect on the counselor trainees' ratings of the clients. Table 5 indicates that when physical disability is considered as a single variable, the physically disabled clients were slightly favored over the physically able clients by approximately 5%. However, when the clients' physical ability is combined with social class, the physically able are more favorably rated than the physically disabled. When the mean and grand mean scores of physically disabled clients are compared to the scores of the clients who are physically able (See Table 3, clients 1 and 3), the

disabled clients received 16% to 30% higher (less favorable) mean scores and a 22% higher grand mean score.

Gender. There are only slight gender-bias trends evidenced in the A.C.T. Survey, with 2% - 9% variances in rating scores between males and females. However, Tables 4 and 5 indicate that when gender is combined with social-class and ability, female clients were consistently favored over male clients in all client scenarios except physically able clients from the low social-class (i.e., client 2 in Table 3).

Race. While race did not produce a significant effect on clients' mean scores, when race was combined with class and ability, counselor trainees' ratings were significantly effected (see Table 4). Table 5 delineates the rankings of clients' mean scores, indicating that physically able Black clients from the middle social-class received the most favorable mean scores, while physically able Black clients from the low social-class received the least favorable scores (viz., 37% difference in mean scores). The mean scores of Black clients were more favorable than the mean scores of Caucasian clients in all client scenarios except disabled clients from the middle class (i.e., client 3 in Table 3).

Career Motivation. When a client's statement of high career motivation is added to the scenarios depicting physically disabled clients from the low social-class (see Table 5, client 4), the clients' mean and grand mean scores are vastly improved over the mean and grand mean scores of clients without a stated career focus. In fact, the grand mean score of the clients in scenario 4 is the second most favorable rating in spite of those clients' multiple oppressions (see Figure 1). This is obviously the



reason why physically disabled males and females always received lower (i.e., more favorable) scores in the analysis of variance tables and the corresponding mean tables.

### M - B.I.A.S. Survey

The Multicultural Beliefs Inhibiting Appropriate Support (M-B.I.A.S.) Survey is a modification of the Attitudes of Counselor Trainees (A.C.T.) Survey, with the only exception being the removal of the high career motivation statement for the A.C.T. Survey's client 4. This allows for a comparison of clients 3 and 4 in the M-B.I.A.S. Survey, which is not possible in the A.C.T. Survey. An analysis of variance was not computed for the M-B.I.A.S. Survey. Thus only general trends can be observed for this study.

Class. Figure 2 depicts how the grand mean score of physically able clients from the low social-class is higher than the grand mean score of physically able clients from the middle social-class (see Table 6, clients 1 and 2); thus indicating more counselor trainee stigmatization against the low social-class. Also, Figure 2 depicts how the grand mean score of physically disabled clients from the low social-class (see Table 6, client 4) is higher than the grand mean score of physically disabled clients from the middle social-class (see Table 6, client 3).

In reviewing the individual mean scores, counselor trainees differentiated between social-class of Caucasian physically able females (see Table 6, clients 1 and 2) by 39% and Caucasian physically able males by 30%, Black physically able females by 41% and Black physically able males by 37%.

While significant, the differentiation in mean scores between physically disabled clients was not as pronounced as between physically able clients. Counselor trainees differentiated between social-class of Caucasian physically disabled females (see

Table 6, clients 3 and 4) by 22% and Caucasian physically disabled males by 26%., Black physically disabled females by 25% and Black physically disabled males by 18%.

**Race.** The over-compensation factor, mentioned in Chapter II, may explain why counselor ratings of Black male and female clients were slightly more favorable than Caucasian clients' ratings throughout the survey.

Comparison of individual mean scores between clients 1 and 2 of Table 6 also indicates that while all clients in the middle social-class receive significantly more favorable scores than all clients from the low social-class (30% to 41% improvement in means scores), the mean scores of Caucasian clients were slightly less improved by social class than Black clients, with Caucasian physically able males showing the least improvement in ratings between social-class.

**Ability.** In scenarios where there is no career motivation stated (see Table 6, client 4, and appendix F), when the clients' class and ability level are combined, disabled clients from the low social-class (see Table 6, client 4) consistently received higher mean and grand mean scores than disabled clients from the middle social-class (see Table 6, client 3), and physically able clients from the low social-class (see Table 6, client 2) received higher scores than physically able clients from the middle social-class (see Table 6, client 1).

Also, when the mean and grand mean scores of physically disabled clients are compared to the mean and grand mean scores of clients who are physically able (See Table 6, clients 1 and 3), the disabled clients consistently received higher mean and grand mean scores (see Figure 2) including 16% differentiation in mean scores for Caucasian males, 25% for Black females, 27% for Black males, and 27% for Caucasian females; in favor of the physically able clients. The overall result is a

grand mean differentiation of 26% in favor of the physically able clients.

### C - B.I.A.S. Survey

Career Motivation. Figure 3 depicts how the grand mean scores of physically able clients from the middle social-class, who have stated a very low career motivation are significantly higher (i.e., less favorable) than the grand mean scores of physically able clients from the middle social-class who have no stated career motivation (see Table 7, clients 1 and 2). The grand mean score of physically disabled clients from the low social-class, who have stated a very high career motivation (see Table 7, client 4) is significantly lower (i.e., more favorable) than the grand mean score of disabled clients from the low social-class who have no stated career motivation (see Table 7, client 3).

Class X Ability. The over-compensation factor, mentioned in Chapter II, is evidenced by counselor ratings for physically able Black clients from the middle social class being 11% - 24% more favorable than ratings for physically able Caucasian counterparts. The difference in grand mean scores between clients 3 and 4 was 36% , in favor of the physically disabled low social-class clients with a very high career motivation over the physically able middle social-class clients with a very low career motivation. Conversely, the grand mean scores of clients 1 and 2 indicate a significant differential of 39% in favor of the physically able middle social-class clients over the physically disabled low social-class clients. Counselor trainees differentiated between social-class of Caucasian physically able male clients by 32%, Caucasian physically able female clients by 37%, Black physically able female clients by 41%, Black physically able male clients by 43%.

Comparison of individual mean scores between clients 1 and 2 of Table 7 also indicates that while all clients in the middle social-class receive significantly more favorable scores than all clients from the low social-class (32% to 46% improvement in means scores), the mean scores of Caucasian clients were less improved by social class than Black clients, with Caucasian males showing the least improvement in ratings between social-classes.

In scenarios where there is no career motivation stated (see Table 7, clients 1 and 2, and appendix E), when clients' class and ability level are combined (see Figure 3), physically able clients from the middle social-class (see Table 7, client 1) consistently received higher grand mean scores than disabled clients from the low social-class (see Table 7, client 2).

### Findings of the A.C.T. Survey

A total of 124 counselor trainees completed the A.C.T. Survey, including 94 females (76%) and 30 males (24%); there were 105 master's level students (85%) and 19 doctoral level students (15%).

The findings of the demographics questionnaire indicated that the majority of the counselor trainees who completed the A.C.T. Survey have had very limited exposure to cultures other than their own. However, 24 counselor trainees (19%) identified themselves as bilingual, and 20 (16%) have lived in 1 or more countries other than the United States. While 85 of the counselor trainees (69%) indicated that they had completed at least one multicultural studies course, only 20 counselor trainees (16%) had completed a graduate level course in multicultural counseling. Additionally, 112 counselor trainees identified themselves as Caucasian (90%), 8 as Black (6%), and 4 as other (3%). Only 3 were not U.S. Citizens (2%). Because only a small percentage of the sample (less than 10% ) was not Caucasian and because

those 12 counselor trainees were not evenly distributed among the four survey forms, this study is generalized only to the Caucasian counselor trainees.

Only four counselor trainees were physically disabled (3%); however, 14 (11%) indicated that someone in their immediate or extended family is physically disabled.

The distributions of counselor trainees for religious identity and political orientation (i.e., liberal, middle-range, or conservative) were very similar; with bell-curve distributions that included a little over half of the sample indicating an identity in the "middle-range" of each category, and approximately 25% in each extreme category of "liberal" and "conservative." However, it is important to note that the counselor trainees who indicated an identity with "liberal" religious identity may not necessarily have also identified with "liberal" political views.

A few additional surveys were only partially completed and therefore not included in the data analysis. In every case when a survey was not completed (viz., 12 students from 8 classes), the students were given the opportunity to explain their reasons for not completing the survey. All of the 12 students indicated that they believed there was not enough information revealed in the intake scenarios to enable accurate rating of the clients.

#### A.C.T. Survey: Demographics Questionnaire

The sample size was not large enough to provide data analysis for 13 of the 24 demographic characteristics. Of the 24 demographic questions, the 11 demographic characteristics (D.Q.) which produced significant effect on the counselors' ratings of clients (see Table 8) include: age (D.Q. 1), gender (D.Q. 2), annual household income (D.Q. 5), religious identity (D.Q. 6), years of counseling experience (D.Q. 7), community size of counseling practice (D.Q. 9), whether or not bilingual (D.Q. 13), whether any immediate family members are physically disabled (D.Q. 17),

political orientation (D.Q. 18), undergraduate credits in multicultural studies (D.Q. 19), or graduate credits in multicultural studies (D.Q. 20). Each of these characteristics included two or three sub-categories. Thus, there are a total of 25 possible sub-categories of counselor trainee demographic characteristics which could produce significant effect on client ratings.

Table 8 delineates counselor trainee demographic characteristics which produced significant effect on client ratings. However, while Table 8 indicates that there was a significant effect taking place, it does not clarify what the effect was. For example, the demographic characteristic of "age" (see Table 8) indicates that when a client's combined variables of ability, race, and gender are rated by counselor trainees, the age of a counselor trainee who is "over age 40" effects that counselor trainee's rating of the client, while the age of a counselor trainee who is "under age 40" does not effect ratings of clients with combined variables of ability, race, and gender. Table 9 clarifies the effect that each demographic characteristic, which was proven as significant in Table 8, had on the client ratings. For example, a review of the mean scores in Table 8 indicates that the disabled Caucasian females (i.e., a clarification of ability, race, and gender from Table 9) are rated approximately 27% more favorably by counselor trainees over age 40 than disabled Black females.

#### Counselor Trainee Demographic Characteristics Producing Favorable Effects on Client Ratings

Class. The data indicate that of the 11 statistically significant (including, 23 of 25 subcategories) counselor-trainee demographic characteristics (CDC's), all 11 had a significant effect on the ratings of clients' career potential according to the clients' single variable of social-class, with the clients who were from the middle social-class consistently favored. The two of 25 CDC subcategories which produced no effect on

client ratings, in terms of social-class, were those subjects with an immediate family member who is physically disabled (see Table 9, DQ 17), and those who identified with a liberal political orientation (see Table 9, DQ 18). Neither of these two CDC's rendered any favorable ratings-effect for clients from either the low social-class or the middle social-class.

Ability. Of the 11 statistically significant CDC's, 9 (including 9 of 25 subcategories) had a significant effect on the ratings of clients' career potential according to the clients' single variable of physical ability or disability, with the clients who were physically disabled consistently favored (see Table 9)! Physically disabled clients receiving more favorable ratings than physically able clients occurred when counselor trainees were identified as female (see Table 9, DQ 2), conservative religious identity (see Table 9, DQ 6), 16+ years of counseling experience (see Table 9, DQ 7), urban work setting (see Table 9, D.Q. 9), not bilingual (see Table 9, DQ 13), no family members with a physical disability (see Table 9, DQ 17, middle-range political orientation (see Table 9, DQ 18), completion of one or more undergraduate classes in multicultural studies (see Table 9, DQ 19), or completion of one or more graduate-level classes in multicultural studies (see Table 9, DQ 20).

A comparison of the ratings of physically able and disabled clients in the C-B.I.A.S. and the M-B.I.A.S. Surveys confirms that the rationale for the physically disabled clients being rated more favorably in the A.C.T. Survey is due to the strength of the effect of a high career focus portrayed in the scenarios of client 4.

Class x Ability. Of the 11 statistically significant CDC's, all 11 (including 9 of 25 subcategories) had a significant effect on the ratings of clients' career potential according to the clients' combined variables of social-class and ability level, with the clients who were physically able and from the middle social-class consistently

favored. While some demographic characteristics of the counselor trainees had no apparent effect on counselor trainees' ratings of clients, Table 9 indicates that combining the variables of social-class and ability did produce significant effect on the ratings. For example, male counselor trainees favorably rated middle social-class clients but their gender did not have an effect on their rating of clients by physical ability (see Table 9, DQ 2). Yet, male counselor trainees more favorably rated clients who were physically able and from a middle social-class. The same was true of counselor trainees when they were identified by the demographic characteristic of age (see Table 9, DQ 1), liberal and middle-range religious identity (see Table 9, DQ 6), 0 - 15 years of counseling experience (see Table 9, DQ 7), rural and suburban work-settings (see Table 9, DQ 9), bilingual ability (see Table 9, DQ 13), conservative political orientations (see Table 9, DQ 18), having not completed any undergraduate classes in multicultural studies (see Table 9, DQ 19, or having not completed any graduate classes in multicultural studies (see Table 9, DQ 20).

Gender. Of the 11 CDC's, only one (including 1 of 25 subcategories) had a significant effect on the ratings of clients' career potential according to the clients' single variable of gender, with the female clients favored by counselor trainees working in urban settings (see Table 9, DQ 9). However, in 10 of the 11 CDC's a counselor trainee's gender proved to have a partial effect on client ratings when combined with the two or three of the other client variables of ability, race, or social-class.

Ability x Race. Of the 11 CDC's, only two (including 2 of 25 subcategories) had a significant effect on the ratings of clients' career potential according to the clients' variables of physical ability combined with race. This rating effect was evidenced by counselor trainees with conservative religious identity (see Table 9, DQ



6); with physically able Black clients most favorably rated, followed by physically disabled Black clients, then physically disabled Caucasian clients, and finally, physically able Caucasian clients were the least favorably rated!

Those counselor trainees who are bilingual (see Table 9, DQ 17) most favorably rated physically disabled Caucasian clients, followed by physically able Black clients, then physically disabled Black clients, and finally, the least favorably rated were physically able Caucasian clients.

A comparison of the ratings of physically able and disabled clients in the C-B.I.A.S. and the M-B.I.A.S. Surveys confirms that the rationale for the physically disabled clients being rated more favorably in the A.C.T. Survey is due to the strength of the effect of a high career focus portrayed in the scenarios of client 4. However, if the variables represented by the A.C.T. Survey's fourth scenario are removed from the ratings, the fact that the Black clients were rated more favorably than the Caucasian clients in three out of four subcategories, reveals a pattern of over-compensation, discussed in Chapter II.

Class x Ability x Race. Often while a client's degree of physical ability or race did not render an effect on the counselor trainees' ratings, in 6 of the 25 subcategories these CDC's did produce an effect on counselor trainees' ratings when they were combined with social-class; with physically able Black clients from the middle social-class most favorably rated, and physically able Black clients from the low social-class least favorably rated. Essentially, the strength of the social-class effect reversed the trend which emerged when only ability x race was considered. This phenomenon occurred with counselor trainees whose demographic characteristics were male (see Table 9, DQ 2), have had 6-15 years of counseling experience (see Table 9, DQ 7), work in urban settings (see Table 9, DQ 9), are not

bilingual (see Table 9, DQ 9), or have no family members who are physically disabled (see Table 9, DQ 17).

Ability x Race x Gender. Of the 11 CDC's, only two (including 2 of 25 subcategories) had a significant effect on the ratings of clients' career potential according to the clients' combined variables of physical ability, race, and gender.

For counselor trainees who were over age 40 (see Table 9, DQ 1), physically disabled Caucasian female clients were most favorably rated, while physically able Black male clients were least favorably rated. However, physically disabled Black male clients were most favorably rated, and physically able Black male clients were least favorably rated when CDC's were liberal religious identity (see Table 9, DQ 6).

Class x Ability x Gender. Of the 11 CDC's, five (including 5 of 25 subcategories) had a significant effect on the ratings of clients' career potential according to the clients' variables of social-class, physical ability, and gender; with physically able female clients from the middle social-class most favorably rated and physically able female clients from the low social-class least favorably rated! This rating effect was evidenced by counselor trainees who were female (see Table 9, DQ 2), bilingual (see Table 9, DQ 13), had physically disabled members in their immediate family (see Table 9, DQ 17), had a liberal political orientation (see Table 9, DQ 18), and had one or more graduate-level classes in multicultural studies (see Table 9, DQ 20).

The fourth scenario clients (i.e., clients with stated high career motivation) were consistently in the top half of the ratings, with the ratings of female clients always more favorable than the ratings of male clients; which is most likely due the over-compensation factor discussed in Chapter II.

Class x Race x Gender. Of the 11 CDC's, eight (including 8 of 25 subcategories) had a significant effect on the ratings of clients' career potential according to the clients' combined variables of social-class, race, and gender; with Black male clients and Caucasian female clients from the middle social-class most favorably rated, while Black male clients and Caucasian female clients from the low social-class were least favorably rated. This rating effect was evidenced by counselor trainees with age under 40 (see Table 9, DQ 1), an annual income over \$26,000.00 (see Table 9, DQ 5), liberal religious identity (see Table 9, DQ 6), work in urban settings (see Table 9, DQ 9), are not bilingual (see Table 9, DQ 13), have no physically disabled members in their immediate family (see Table 9, DQ 17), had a conservative political orientation (see Table 9, DQ 18), and had one or more undergraduate classes in multicultural studies (see Table 9, DQ 19).

Figure 1, Figure 2, and Figure 3 indicate that the clients from the middle social-class consistently receive more favorable ratings than clients from the low social-class.

Class x Ability x Gender x Race. Of the 11 CDC's, only one (including 1 of 25 subcategories) had a significant effect on the ratings of clients' career potential according to all four of the tested client variables; with physically able Black clients from the middle social-class most favored, and physically able Black clients from the low social-class least favorably rated by male counselor trainees (see Table 9, DQ 2).

### Discussion

By ranking the means of the counselor trainees' client ratings from most favorable to least favorable, one can observe those counselor trainee characteristics which may prove to render favorable results in the counselor-client relationship, and

those which may prove to render harmful results in the counselor-client relationship. For example, the improvement in the rankings of physically disabled Black male clients (i.e., ability x race x gender), from third most favorable in Table 9, DQ 1 (age) to first most favorable in Table 9, DQ 6 (religious identity), indicates that these clients may be more favorably counseled by younger counselors with a liberal religious identity. Also, the worsening of physically able Black female clients, from second most favorable ratings in Table 9, DQ 1 (age) to fifth most favorable ratings in Table 9, DQ 6 (religious identity), indicates that these clients may be more favorably counseled by counselors over age 40 with middle-range or conservative religious identity.

#### A.C.T. Survey: Rating Scale Items

The ranking of the mean scores for the 12 rating-scale items in the A.C.T. Survey indicates that all 12 of the rating-scale items produced significant effect ( $p < .05$ ) on the counselor trainees' ratings of the client intake scenarios (see Table 10).

Additionally, the fourth intake scenario further confirmed the neutralizing-effect of a statement of high career motivation. Furthermore, when the rating-scale means of the fourth scenario are deleted, the counselor trainees' ratings of the clients reveals a trend toward favorable ratings of physically able clients from the middle social-class.

#### Rating-Scale Items Producing Favorable Effects on Client Ratings

Class. The data indicate that all 12 of the rating-scale items had a significant effect on the ratings of clients' career potential according to the clients' single variable of social-class, with the clients who were from the middle social-class consistently favored.

**Ability.** Of the 12 rating-scale items, 9 had a significant effect on the ratings of clients' career potential according to the clients' single variable of physical ability, with the clients who were physically disabled favored in 7 of the 9 rating-scale items (See Table 10). The two rating-scale items (RSI) in which physically able clients received more favorable ratings than physically disabled clients were "energy level" (see Table 10, RSI 7) and "extra-curricular activities" (see Table 10, RSI 10). The three rating-scale items which produced no effect on counselor trainees' ratings of clients were, experience self as significant (RSI 3), self-esteem (RSI 4), and personality (RSI 11).

A comparison of the ratings of physically able and disabled clients in the C-B.I.A.S. and the M-B.I.A.S. Surveys confirms that the rationale for the physically disabled clients being rated more favorably in the A.C.T. Survey is due to the strength of the effect of a high career focus portrayed in the scenarios of client 4. However, when counselor trainees rated physically disabled clients, they assumed that those clients would have a low energy level and not be involved in extra-curricular activities. The counselor trainees skewed their ratings of clients so heavily on the two rating-scale items of energy level (see Table 11, RSI 7) and extra-curricular activities (see Table 11, RSI 10) that these two items proved to be rebellious to the general trends of the survey. When the physically disabled clients were favored, the differentials in mean scores between physically able and disabled was 11%-29%. When the physically able clients were favored, the differentials in mean scores were 22% and 39%. In other words, the counselor trainees' stigmatization toward physically disabled clients was so strong that it overcame the survey's strong neutralizing variable of high career motivation!

Class x Ability. All 12 of the rating-scale items had a significant effect on the ratings of clients' career potential according to the client's combined variables of social-class and ability level (see Table 10).

Clients who were physically disabled and from the low social-class (i.e., influenced by high career motivation in intake scenario 4) were favored with three of the 12 rating-scale items including, internal motivation (see Table 21, RSI 1), awareness of personal strengths and weaknesses (see Table 11, item 2) and goal orientation (see Table 11, RSI 8). In these three rating-scale items, the physically able, middle social-class clients were more favorably rated than the physically disabled, middle social-class clients, who were in turn more favorably rated than the physically disabled, low social-class clients.

In seven of the 9 rating-scale items which produced effect on the counselor trainees' ratings of clients, the physically able, middle social-class clients were most favorably rated, followed by physically disabled, low social-class, then the physically disabled, middle social-class, and finally the physically able, low social-class clients (see Tables 11).

In two of the 12 rating-scale items which produced effect on the counselor trainees' ratings of clients, the physically able, low social-class clients were the second most favorably rated in lieu of their most common position of least favorably rated. This phenomenon occurred in rating-scale items, energy level (see Table 11, RSI 7) and extracurricular activities (see Table 11, RSI 10). These are the two rating-scale items which were also rebellious in the single client variable of ability. Once again confirming counselor trainees' stigmatization that physically disabled clients have low energy levels and are not involved in extracurricular activities; so much so that this bias overcomes the general trend in the survey to favor the middle social-class over the low social-class.

**Race.** Only one of the 12 rating-scale items had a significant effect on counselor trainees' ratings of clients career potential according to the clients' single variable of race (see Table 10, RSI 5). The rating-scale item of honesty indicates that Black clients are 6% more favorably rated in terms of honesty than are Caucasian clients (see Table 11, RSI 5). Since 90% of the survey subjects were Caucasian, this phenomenon is quite likely due to the over-compensation factor discussed in Chapter II.

**Ability x Race.** Of the 12 rating-scale items, only one had a significant effect on the ratings of clients' career potential according to the clients' combined variables of physical ability and race (see Table 10, RSI 5); with physically disabled Caucasian clients most favorably rated and physically able Caucasian clients least favorably rated (see Table 11, RSI 5).

A comparison of the ratings of physically able and disabled clients in the C-B.I.A.S. and the M-B.I.A.S. Surveys confirms that the rationale for the physically disabled clients being rated more favorably in the A.C.T. Survey is most likely due to the strength of the effect of a high career focus portrayed in the scenarios of client 4. However, when the variables represented by the A.C.T. Survey's fourth scenarios are removed from the ratings, the fact that the physically able Black clients were rated more favorably than the physically able Caucasian clients reveals a pattern of over-compensation, discussed in Chapter II.

**Class x Ability x Gender.** While the client variable of gender had no effect on counselor trainees' rating of clients as a single variable, when combined with other variables, three of the 12 rating-scale items had a significant effect on the ratings of clients' career potential according to the clients' variables of social-class, physical ability, and gender (see Table 10). The high career motivation in the fourth scenario

caused the physically disabled female from the low social-class to be the first or second most favorably rated.

However, when the fourth scenario variables are removed, the physically able female clients from the middle social-class are consistently most favorably rated and the physically able females from the low social-class are least favorably rated (see Table 11, RSI 2, RSI 3, and RSI 6).

Class x Race x Gender. While only one rating-scale item, honesty, significantly effected counselor trainee ratings of clients according to the single client variable of race, of the 12 rating-scale items, three had a significant effect on the ratings of clients' career potential according to the clients' variables of social-class, race, and gender (see Table 10). Clients from the middle social-class were most favorably rated, while clients from the low social-class were least favorably rated (see Table 11, RSI 5, RSI 9, and RSI 11).

### Discussion

One of the main goals of this analysis of rating-scale items was to determine whether any of the 12 rating-scale items could be eliminated and still produce similar bias trends of the counselor trainees on the M-B.I.A.S. and C-B.I.A.S. Scales. Matching similar patterns of rating-scale items which produced an effect on counselor trainees' rating of clients provides an effective methodology for clustering similar rating-scale items. There were three secondary clusters of items which produced similar rating effects within each primary cluster:

Internal Motivation (RSI 1);  
Goal Orientation (RSI 8);  
Orientation Toward New, Better, More (RSI 12).



Awareness of Personal Strengths and Weaknesses (RSI 2);  
Clearly identified Values (RSI 6);  
Communication Skills (RSI 9).

Experience Self as Significant (RSI 3);  
Self-esteem (RSI 4);  
Personality (RSI 11).

The fact that two or more rating-scale items produced similar rating results, does not mean that one item is necessarily a substitute for another; it only means that those items received similar ratings. Therefore, choice of which rating-scale items to eliminate is entirely up to the discretion of the survey coordinator.

Conversely, those items which produced atypical results should remain on the rating-scales of the M-B.I.A.S. and C-B.I.A.S. Scales. There were three rating-scale items which produced significant effect on client ratings and were atypical to the other rating-scale items:

Level of Honesty (RSI 5);  
Energy Level (RSI 7);  
Participation in Extracurricular Activities (RSI 10).

The end result was that the original 12 rating-scale items were reduced to 6 items for the M-B.I.A.S. and C-B.I.A.S. Surveys; the one rating-scale item from each of the two clusters with the lowest probability scores, and each of the three atypical rating-scale items:

Awareness of Personal Strengths and Weaknesses;  
Goal Orientation;  
Self-esteem;  
Energy Level;  
Participation in Extracurricular Activities;  
Level of Honesty.

While an analysis of variance was not computed for the M-B.I.A.S. or C-B.I.A.S. Survey, a quick review of Tables 5, 6, and 7 indicates that similar mean and grand mean scores were produced for the intake scenarios of client 1 in all three tables of normative scores. The first of the four intake scenarios is the same in all three

surveys. Therefore, since the grand mean scores for client 1 of the M-B.I.A.S. and the C-B.I.A.S. Surveys are only 4% different from each other; and since both of those surveys are 7% (C-B.I.A.S. Survey) to 10% (M-B.I.A.S. Survey) different than the A.C.T. Survey's grand mean for client 1, the results of the M-B.I.A.S. and C-B.I.A.S. Surveys are considered dependable for the purpose of comparison in this study.

### Summary of Findings

The analysis of data indicates that all nine of the null-hypotheses were rejected. Following are corrected statements from the null-hypotheses in Chapter III, which are based on the findings of this study:

1. Ability bias: Counselor Education and Counseling Psychology students (counselor trainees) displayed different attitudes toward physically disabled clients as toward non-disabled clients, with physically able clients more favorably rated (see Figure 1 and Figure 2).
2. Ability bias: Counselor trainees who have had undergraduate-level informational exposure to physically disabled populations (i.e., multicultural course work) displayed more favorable attitudes toward physically disabled clients, compared to unfavorable attitudes toward physically disabled clients by counselor trainees who have had no undergraduate-level informational exposure. However, Counselor trainees who have completed one or more graduate-level courses in multicultural studies displayed a dogmatic tendency toward stigmatization of physically disabled clients, especially with combined client oppressions of class x ability x gender (see Table 9, DQ 19 and DQ 20).
3. Ability Bias: Counselor trainees who have had experiential contact exposure to physically disabled populations (e.g., immediate family members who are physically disabled) displayed more favorable attitudes toward disabled

clients, compared with counselor trainees who have had no experiential contact with physically disabled populations (see Table 9, DQ 17).

4. Gender bias: Counselor trainees displayed different attitudes toward female clients as toward male clients, with females sometimes favored over males and vice versa. The counselor trainees' preference for one gender over the other was dependant on the various combinations of client oppressions (see Table 9).

5. Race bias: Counselor trainees consistently displayed more favorable attitudes toward Black clients than toward Caucasian clients, indicating a tendency toward reverse-discrimination or over-compensation (see Table 9).

6. Social-class bias: Counselor trainees displayed significantly unfavorable attitudes toward lower social-class clients, and favorable attitudes toward middle social-class clients (see Table 9).

7. Multiple oppressions: Counselor trainees display different patterns of attitudes toward clients with various combinations of multiple oppressions (i.e., a Black, disabled, woman, from a lower social class) as they did toward clients with only one suppression (see Table 9).

8. Career motivation bias: Counselor trainees displayed less favorable attitudes toward non career-focussed clients as toward career-focussed clients (see Figure 1 and Figure 3).

9. No oppressions: Counselor trainees displayed more favorable attitudes toward clients with no oppressions than toward clients with one or more oppressions (cf., client 1 with clients 2 - 4 in Tables 3, 6, 7).

The results of this study are in general agreement with Mazer's (1971) findings, which documented the negative effects of social-class stereotyping on teacher expectation among graduate students in teacher-education. Additionally, the results are in general agreement with the the findings of Yuker et al. (1966), Sedlacek et al.

(1967), and Lazar (1973), all documenting negative stereotyping toward physically disabled populations.

The data indicates that single client variables of ability, gender, race, and social-class all elicit bias by counselor trainees, with some variables being more dominant effectors of bias than others. Also, the measurement of counselor trainee bias toward clients with various combinations of multiple oppressions indicates that ratings of clients on limited information offered in an intake scenario are predictable, according to counselor trainee demographics, client demographics, and rating-scale items. The biases toward clients from the low social-class and toward physically disabled clients were generally unfavorable, indicating that these client variables may be primary, independent determinants of counselor trainee bias.

In this study, counselor trainee biases toward Black and female clients was generally 5% to 10% more positive than toward Caucasian and male clients. This tendency is contradictory to most studies which consistently document significantly more negative biases toward Blacks and Women. Yet, counselor trainees shared similar negative biases against disabilities and low social-class as the general population. Therefore, in this study, counselor trainees were apparently able to fake their responses toward race and gender biases in all three surveys.

Finally, those client scenarios with a strong statement of career motivation (see Tables 3 and 7, client 4) were consistently rated favorably, in spite of their multiple oppressions (i.e., physically disabled, from the low social-class). Additionally, the clients in the C-B.I.A.S. Survey with a stated low career focus (see Table 7, client 3) were rated unfavorably, in spite of having only one or no oppressions (i.e., physically able, from the middle-social-class). This indicates that a client's statement of high career motivation may be able to reverse a counselor trainee's initial stigmatization of combined client oppressions of ability, gender, race, and social-class. However, a

question of propriety arises as to whether a counselor trainee should need to depend on the client to be career motivated in order to assure that the negative effects of stigmatization are kept in check!

## CHAPTER V

### CONCLUSIONS AND RECOMMENDATIONS

#### Summary

The A.C.T., M-B.I.A.S., and C-B.I.A.S. Surveys were developed as training tools for initiating enlightenment of helping-professionals about their personal multicultural biases. In this study, the surveys proved their ability to elicit counselor trainee bias toward hypothetical clients with varying combinations of multiple oppressions. They revealed significant and predictable patterns of bias against populations who represent low social-class and physical disabilities. The three surveys revealed the value of two kinds of multicultural learning experiences: experiential contact and undergraduate-level pseudo-experiential learning about multicultural and physically disabled populations. They also exposed a tendency toward a pattern of dogmatism among counselor trainees who have completed one or more graduate-level classes in multicultural studies. Perhaps the most important finding of these surveys is that a statement of high career motivation by the clients with multiple oppressions can neutralize or reverse the negative biases of counselor trainees.

The results of the A.C.T. Survey, M-B.I.A.S. Survey, and C-B.I.A.S. Survey indicate that for ability and social-class biases, they are relatively nontransparent devices which provide reasonably valid information on counselor trainee stereotyping toward ability and social-class, with a minimum of threat in a controversial domain. However, for gender and race biases, they may be transparent and therefore fakable. Furthermore, the indirect approach to measurement, exemplified by the design of the

survey rating-scales is supported; as it was in Mazer's (1971) Student Performance Estimates Scales.

### Implications for Continued Research

#### Continuing Beyond the Limitations of This Study

Unfortunately, not enough minority counselor trainees completed the A.C.T. Survey to allow analysis of the effect of this counselor trainee demographic characteristic on client ratings. Therefore, the findings of this study can only be generalized to Caucasian counselor trainees. More data will need to be collected from various minority helping-professional populations in order to determine to what degree the data in this study can be generalized for non-Caucasian counselor trainees.

Most of the doctoral-level students and many of the Master's-level students in this sample were practicing in counseling-related agencies while pursuing their graduate degrees. However, because the focus of this study was on graduate students' bias, the findings can only be generalized to counselor trainees. Additional surveys will need to be administered to licensed and certified practitioners in counseling and other helping-professions (e.g., social-work, career guidance, education, medicine, nursing, etc.), as well as other graduate student majors, in order to determine to what degree the data in this study can be generalized to helping-professionals other than counselor trainees.

Since the focus of this study was on assessment of clients in a career transition, assessment of corporate human resource professionals should also be encouraged, especially because they too may harbor hidden unfavorable bias as was displayed by the counselor trainees in this study, and because their standards were used in the survey rating-scale items.

Finally, further research in clinical environments may find that the surveys can also be effective tools in assignment of clients to selected practitioners, clinical supervision of practitioners, and / or client self-awareness of personal bias.

### Possible Correlation With Personality Typologies

In an attempt to compare the counseling majors to other majors at the university, 24 surveys were administered to a class of graduate-level mathematics majors. Interestingly, none of the mathematics majors was willing to complete the survey for the same reason given by the 12 counseling majors who would not complete the survey (i.e., not enough data were provided in the scenarios to rate the clients). Keirsey and Bates (1984 ) note that mathematicians who have completed the Myers-Briggs Type Indicator (MBTI) score heavily in the sensory and thinking typologies. Conversely, they note that counselors score heavily in the intuitive and feeling typologies. The intuitive dimension of the therapist's consciousness is discussed by Truax (1985):

Therapists do believe in, use, and value their varying kinds of intuitive experiences with clients. For some therapists, the intuitive experience is explainable, for others it is yet to be explained, and for still other it does not need to be explained. There is definitely a pattern to therapists' natural or developed abilities to be receptive and turn within in order to experience all that is possible with a client. There is also a great diversity in the way therapists experience intuition and in the way they have incorporated it into their lives that could be exemplary to other professions and people (p.84).

Vaughan (1979) provides a definition of intuition which may explain why some counselors did not feel comfortable completing the survey:

The wisdom of intuition does not follow the rules of logic. It will never make rational, discriminating choices for you. It is not a substitute for careful research or data gathering. It is a purveyor of possibilities, not an evaluating faculty (p. 177).

Therefore, if all counselor trainees had been asked to first complete the M.B.T.I., and then given the A.C.T. Survey, the results of the MBTI might have



indicated that those counselors who did not complete the A.C.T. Survey are more aligned with sensory and thinking typologies, as are mathematicians, than those who did complete the survey.

#### Other Possible Reasons for Non-Participation in the Study

Further qualitative analysis of trainees who do not participate in the survey may reveal that they are concerned with being "politically correct" (i.e., afraid of revealing prejudice) in their answers. This would indicate that they may be able to unmask the intent of the survey, and /or they are afraid that the survey will reveal that they are prejudiced.

#### Clinical Applications

In an effort to determine how accurately the M-B.I.A.S. and C-B.I.A.S. Surveys predict actual counselor behavior and effectiveness with clients (i.e., to what extent do counselor beliefs truly inhibit appropriate support?), follow-up observation of the psycho-therapeutic relationships between counselors and clients is recommended. Observation of counselors who cannot complete the M-B.I.A.S. or C-B.I.A.S. Surveys may reveal that those counselors are more objective and thus, project less bias, either positive or negative, into the counselor-client interactions. However, these counselors may also prove to be inflexible and dogmatic in their projections of their clients' potential. Thus, if they are slow to develop an opinion of their clients' potential, and then discover that their eventual projections of their clients' potentials were inaccurate, they may also be very slow or incapable of later changing their bias and projections of that bias.

Conversely, observation of counselors who complete the surveys may reveal that the same intuitive typology which allowed the quick assessment of clients on the

survey rating-scale, also is highly tentative and thus, allows a high degree of flexibility in their bias toward their clients' potentials. Therefore, if they are quick to develop an opinion of their clients' potential, and then discover that their projections of their clients' potential were inaccurate, they may also prove to be able to quickly change their bias and projections of that bias.

### Survey Adaptations

#### Instructions

One possible means of overcoming the evident ability to fake race and gender biases on these surveys is to revise the instructions to indicate that the subjects will be supervising a new counselor on their staff, and that they are being asked to complete the survey as a predictor of how they think the new counselor supervisee will respond to the client intake scenarios.

#### Intake Scenarios

Adaptations of the M-B.I.A.S. and C-B.I.A.S. Surveys are very easy and highly encouraged so as to focus on the training needs of helping-professionals serving various specialized oppressed populations (e.g., racial minorities, physically disabled, emotionally disabled, seniors, ex-offenders, etc.).

Disability. Suggested disabled populations that can be substituted for the hearing impaired and paraplegic clients in this study include, to name a few, visually-impaired, quadriplegic, Diabetic, Muscular Dystrophy, Muscular Sclerosis, spinal injured, stroke victims, substance abuse recovery, etc. Additional research may also reveal a difference in bias toward clients who possess self-inflicted disabilities versus those with "natural cause" disabilities or birth defects. For example, consider the

possible differences of bias toward two physically disabled clients. One, a former professional football player, can no longer perform his current job because of severe osteo arthritis which is directly related to his former football injuries and overuse of steroids. The other, a concert pianist, can no longer perform his job because of the onset of rheumatoid arthritis. Or, consider the possible difference of bias toward a smoker who is diagnosed with lung cancer, versus a non-smoker who is diagnosed with breast cancer.

Career Focus. Since the clients in this study were identified as recent graduates of a vocational-track curriculum, clients could also be identified as recent college-track graduates or mid-life career changers. Mid-life career changers would also allow assessment of attitudes toward a variety of younger and older age groups.

Gender. Homophobic bias can be assessed by modifying this study's male and female clients with gay and lesbian labels. Attitudes toward various family systems can also be assessed with these labels. Also, matriarchal and patriarchal labels can be added for assessment of attitudes toward traditional and nontraditional family-systems.

Race. Suggested racial minority populations that can be substituted for the Black clients in this study include, but are not limited to Appalachians, Hispanic-Americans, Asian-Americans, Chicanos, Jewish and other religious sects, Native-Americans, rural and inner-city poverty victims, etcetera. Additionally, foreign national populations can be assessed in American cultures as well as their own native cultures (i.e., assessment of Japanese helping-professionals in Japan, etc.).

Social-Class. In lieu of middle and low social-class labels, upper-middle or lower-upper social-class distinctions can also be assessed. These distinctions may be

particularly appropriate for assessment of helping-professionals working with clients in "elite" social-circles such as private schools for children of upper-income families, prestigious suburban neighborhoods, families of celebrities and high profile government officials, etcetera.

### Demographic Questionnaire

Of the original 24 demographic questions on the A.C.T. Survey, 11 significantly effected client ratings, and the other 13 were not assessable due to a population sample that was too small, as well as an uneven distribution among the four forms A, B, C, D. However, there were sufficient data to suggest that all of the 24 counselor trainee demographic characteristics would have significantly effected client ratings if the sample size were greater. Further research with these same demographic questions presented to other helper-professionals, especially those focused on clients with different demographic variables, may produce different results. Finally, the addition of a demographic qualifier (i.e., measurement of an insignificant and unrelated counselor variable) for testing validation of the demographic survey results should be considered in future studies. One such qualifier could be to ask the counselor trainees to note their favorite color, or their shoe size. If statistically significant results are manifested by these qualifier variables, then the dependability of the demographic survey's results must be reconsidered.

### Rating-Scale Items

The results of the rating-scale items from the A.C.T. Survey indicated a tendency of the counselor trainees to differentiate in their ratings of honesty level in Black versus Caucasian clients, with Black clients rated 6% more favorably than Caucasian clients see Table 10, RSI 5). However, Table 3 indicates that this pattern

of rating is reversed for clients 2 and 3, which indicates that the counselor trainees' ratings may be dependant on social class and ability level, or it may also indicate that over-compensation is more difficult with the addition of client variables. Further research is recommended regarding counselor trainees' honesty x race bias.

In this study, the term self-esteem was used, with the assumption that counselor trainees would understand the meaning of the term. However, Michael Brown, of Wayne State University in Detroit, as well as Harry Satterfield, of San Jose State University, in California have questioned whether there are distinctive differences between definitions of "self-esteem," "self-concept," and "self-image," and noted that the terms are often confused and assumed synonymous. By providing a definition for each term, each may have rendered different rating results, especially with the scenarios depicting physically disabled clients.

#### Recommended Workshop Formats for M-B.I.A.S. and C-B.I.A.S. Surveys

In Appendices E and F, suggested workshop formats have been added to the M-B.I.A.S. and C-B.I.A.S. Surveys. Early trial results from prototype workshops with graduate students in the Department of Counselor Education and Counseling Psychology at Western Michigan University and the University of San Diego have produced encouraging feedback from the counselor trainees and their faculty. The unanimous verbal consensus from the first 100 counselor trainees who have been directed through the pilot workshops as a part of their classroom learning experience, indicated that the M-B.I.A.S. and C-B.I.A.S. Surveys' results were directly responsible for initiating productive self-reflection. Additionally, workshop participants have confirmed that the workshop's discussion guides were effective in stimulating thought-provoking conversations among the students and faculty. The general concensus of the workshop participants was that the surveys were effective in

exposing hidden bias, and that the workshop process positively influenced a unanimous desire to correct previously hidden negative bias. Almost all of the participants agreed that their stigmatization could be counterproductive in psychotherapeutic relationships.

However, two major cautions are advised. First, workshops should be coordinated only by professionals who are trained in group dynamics so as not to produce the undesirable side-effect of dogmatism, discussed in Chapter II. All four of the prototype workshops produced some initial individual reaction of resistance to personalizing the negative results of high bias scores. Some understandable aggressive display of defense mechanisms included heavy critique of the survey's possible limitations, and challenges that the survey results may not necessarily translate into predictable counselor behavior. However, encouragement of peer-feedback on such resistance contributed to a non-threatening environment for productive peer confrontation, and proactive suggestions for overcoming potentially harmful bias. Most importantly, for all but one workshop participant, the peer-feedback format apparently prevented a dogmatic response to the challenged resistance. This can be further tested by administering the A.C.T. Survey as a pretest, conducting a pseudo-experiential workshop with an 8-16 week internship intervention, and then administering either the Multicultural B.I.A.S. Survey or the Career B.I.A.S. Survey as a post-test.

An important second caution is that facilitators of the group process should not allow high B.I.A.S. Survey scores to be associated with negative value-judgements against those participants who generated high scores. Instead, the participants who scored high should feel "convinced" (rather than judged) that a cognitive reframing would be prudent. Indeed, when helping-professional trainees have been willing to

explore their personal biases, they should be recognized for their professional integrity.

Ideally, 15 to 20 minutes time should be allotted at the end of the workshop, so as to allow each workshop participant an opportunity to reflect on his or her personal feelings and cognitions which were evoked by the workshop process. Progoff's (1980), At a Journal Workshop, is highly recommended as a guideline for infusion of the intensive journal process into the synthesis dimension of the workshop experience. Therefore, the entire workshop process should be conducted in a minimum of 90 minutes.

## **APPENDICES**



**Appendix A**  
**Sample A.C.T. Survey: Instructions**

### A.C.T.- SURVEY INSTRUCTIONS

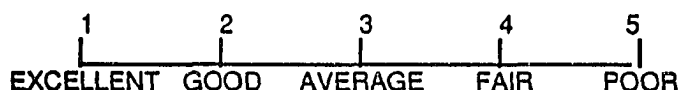
Dear Colleague:

Thank you for participating in this study. The following survey is designed to clarify the decision-making processes addressed by "helping-professionals" when assisting clients in their career planning. You will find two computer-scored answer sheets--one "**Demographics**" (21 Background information questions), and one "**Rating Scales**" (four sets of 12 questions).

**DIRECTIONS** ( Use ONLY a #2 Pencil):

In the following survey, you are given a brief description of four people who have recently graduated from the same public high school. They each graduated with the same grade point average, in the top half of their class, in the college-track curriculum.

They are each about to attempt entering the work force. **Your task is to use the information provided to rate each person in twelve job characteristics which are important to employers.** The twelve job characteristics are randomly arranged alongside a 5-point rating scale from 1 (excellent likelihood of occurrence) to 5 (poor likelihood of occurrence). Refer to the accompanying computer scored "Rating Scales" form.



Read case one, then immediately refer to the job characteristics computer-scored "Rating Scales" to rate the first set of twelve characteristics. Rate the person on each characteristic by marking the appropriate space on the computer-scored answer sheet.

Rate the second, third, and fourth persons in the same manner; first reading the description, then rating the next set of twelve characteristics.

**Do not hesitate; work quickly, indicating your first impressions.** If you have questions, please feel free to ask.

Thank you,

J. Stephen Neynaber  
Western Michigan University

## **Appendix B**

### **Sample A.C.T. Survey: Counselor Trainee Demographics Questionnaire**

## A.C.T. SURVEY: DEMOGRAPHICS QUESTIONNAIRE

[illegible]

**Appendix C**  
**Sample A.C.T. Survey: Rating Scale**

## A.C.T. SURVEY: RATING FORM

WESTERN MICHIGAN UNIVERSITY		FORM NUMBER 2	SIDE 1
<div style="display: flex; align-items: center;"> <div style="writing-mode: vertical-rl; transform: rotate(180deg); font-weight: bold; margin-right: 5px;">DEPARTMENT</div> <div style="border: 1px solid black; padding: 2px;">Form</div> </div> <div style="display: flex; align-items: center; margin-top: 5px;"> <div style="writing-mode: vertical-rl; transform: rotate(180deg); font-weight: bold; margin-right: 5px;">INITIALS</div> <div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> <div style="width: 100px; height: 100px; border: 1px solid black;"></div> <div style="width: 100px; height: 100px; border: 1px solid black;"></div> </div> </div> </div>	<div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> <p><b>CASE (1)</b></p> <p>1) Internal Motivation (Locus of Control)</p> <p>2) Awareness of Personal Strengths &amp; Weaknesses</p> <p>3) Experience Self as Significant</p> <p>4) Self-Esteem</p> <p>5) Level of Honesty</p> <p>6) Clearly Identified Values</p> <p>7) Energy Level</p> <p>8) Goal Orientation</p> <p>9) Communication skills</p> <p>10) Extracurricular Activities</p> <p>11) Personality</p> <p>12) Orientation toward "New", "Better", "More"</p> </div> <div style="width: 48%;"> <p><b>CASE (2)</b></p> <p>13) Internal Motivation (Locus of Control)</p> <p>14) Awareness of Personal Strengths &amp; Weaknesses</p> <p>15) Experience Self as Significant</p> <p>16) Self-Esteem</p> <p>17) Level of Honesty</p> <p>18) Clearly Identified Values</p> <p>19) Energy Level</p> <p>20) Goal Orientation</p> <p>21) Communication skills</p> <p>22) Extracurricular Activities</p> <p>23) Personality</p> <p>24) Orientation toward "New", "Better", "More"</p> </div> </div>	<div style="display: flex; flex-direction: column; align-items: center;"> <div style="writing-mode: vertical-rl; transform: rotate(180deg); font-weight: bold; margin-bottom: 10px;">USE SPACE</div> <div style="writing-mode: vertical-rl; transform: rotate(180deg); font-weight: bold;">SIX CODE</div> </div>	<div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> <p><b>CASE (1)</b></p> <p>1) Internal Motivation (Locus of Control)</p> <p>2) Awareness of Personal Strengths &amp; Weaknesses</p> <p>3) Experience Self as Significant</p> <p>4) Self-Esteem</p> <p>5) Level of Honesty</p> <p>6) Clearly Identified Values</p> <p>7) Energy Level</p> <p>8) Goal Orientation</p> <p>9) Communication skills</p> <p>10) Extracurricular Activities</p> <p>11) Personality</p> <p>12) Orientation toward "New", "Better", "More"</p> </div> <div style="width: 48%;"> <p><b>CASE (2)</b></p> <p>13) Internal Motivation (Locus of Control)</p> <p>14) Awareness of Personal Strengths &amp; Weaknesses</p> <p>15) Experience Self as Significant</p> <p>16) Self-Esteem</p> <p>17) Level of Honesty</p> <p>18) Clearly Identified Values</p> <p>19) Energy Level</p> <p>20) Goal Orientation</p> <p>21) Communication skills</p> <p>22) Extracurricular Activities</p> <p>23) Personality</p> <p>24) Orientation toward "New", "Better", "More"</p> </div> </div>
<p><b>INSTRUCTIONS:</b> Rate each characteristic on a 1-5 scale; 1 being <u>highest</u>, and 5 <u>lowest</u>.</p>		<div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> <p><b>CASE (1)</b></p> <p>1) Internal Motivation (Locus of Control)</p> <p>2) Awareness of Personal Strengths &amp; Weaknesses</p> <p>3) Experience Self as Significant</p> <p>4) Self-Esteem</p> <p>5) Level of Honesty</p> <p>6) Clearly Identified Values</p> <p>7) Energy Level</p> <p>8) Goal Orientation</p> <p>9) Communication skills</p> <p>10) Extracurricular Activities</p> <p>11) Personality</p> <p>12) Orientation toward "New", "Better", "More"</p> </div> <div style="width: 48%;"> <p><b>CASE (2)</b></p> <p>13) Internal Motivation (Locus of Control)</p> <p>14) Awareness of Personal Strengths &amp; Weaknesses</p> <p>15) Experience Self as Significant</p> <p>16) Self-Esteem</p> <p>17) Level of Honesty</p> <p>18) Clearly Identified Values</p> <p>19) Energy Level</p> <p>20) Goal Orientation</p> <p>21) Communication skills</p> <p>22) Extracurricular Activities</p> <p>23) Personality</p> <p>24) Orientation toward "New", "Better", "More"</p> </div> </div>	
<p><b>TODAY'S DATE</b></p>		<p><b>25-48 ON SIDE 2</b></p>	
<p><b>INSTRUCTOR</b></p>		<p><b>COURSE NO.</b></p>	
<p><b>SECTION</b></p>		<p><b>SECTION</b></p>	

## A.C.T. SURVEY: RATING FORM--Continued

SIDE 2

CASE (3)

25) Internal Motivation (Locus of Control)

HIGH LOW

25 1 2 3 4 5 6 7 8 9 10

26) Awareness of Personal Strengths &amp; Weaknesses

26 1 2 3 4 5 6 7 8 9 10

27) Experience Self as Significant

27 1 2 3 4 5 6 7 8 9 10

28) Self-Esteem

28 1 2 3 4 5 6 7 8 9 10

29) Level of Honesty

29 1 2 3 4 5 6 7 8 9 10

30) Clearly Identified Values

30 1 2 3 4 5 6 7 8 9 10

31) Energy Level

31 1 2 3 4 5 6 7 8 9 10

32) Goal Orientation

32 1 2 3 4 5 6 7 8 9 10

33) Communication skills

33 1 2 3 4 5 6 7 8 9 10

34) Extracurricular Activities

34 1 2 3 4 5 6 7 8 9 10

35) Personality

35 1 2 3 4 5 6 7 8 9 10

36) Orientation toward "Now", "Better", "Here"

36 1 2 3 4 5 6 7 8 9 10

CASE (4)

37) Internal Motivation (Locus of Control)

37 1 2 3 4 5 6 7 8 9 10

38) Awareness of Personal Strengths &amp; Weaknesses

38 1 2 3 4 5 6 7 8 9 10

39) Experience Self as Significant

39 1 2 3 4 5 6 7 8 9 10

40) Self-Esteem

40 1 2 3 4 5 6 7 8 9 10

41) Level of Honesty

41 1 2 3 4 5 6 7 8 9 10

42) Clearly Identified Values

42 1 2 3 4 5 6 7 8 9 10

43) Energy Level

43 1 2 3 4 5 6 7 8 9 10

44) Goal Orientation

44 1 2 3 4 5 6 7 8 9 10

45) Communication skills

45 1 2 3 4 5 6 7 8 9 10

46) Extracurricular Activities

46 1 2 3 4 5 6 7 8 9 10

47) Personality

47 1 2 3 4 5 6 7 8 9 10

48) Orientation toward "Now", "Better", "Here"

48 1 2 3 4 5 6 7 8 9 10

DO NOT WRITE  
IN THIS SPACE

**Appendix D**  
**Sample A.C.T. Survey: Intake Scenarios**  
**Forms A, B, C, D**



**A.C.T. SURVEY****FORM A**

(1) Client 1 is an 18 year old Black male, from a middle-socioeconomic background. He is in excellent physical condition, and his school records indicate no developmental problems. He has one younger brother and two younger sisters. His father is an electrical engineer and his mother is an elementary school teacher.

**STOP READING:** Answer questions 1-12 on the rating scales answer form.

(2) Client 2 is an 18 year old Black female, from a low-socioeconomic background. She excels in all physical activities. Having attended three different schools in the past eight years, her cumulative folder indicates only a little about her academic progress or her social adjustments. One of her grade school teachers expressed concern over her aggressiveness in the classroom and an attendance officer from her high school found it necessary to speak to her mother about her extended absences, just prior to her family's most recent relocation six months ago.

**STOP READING:** Answer questions 1-12 on the rating scales answer form.

(3) Client 3 is an 18 year old Caucasian female, from a middle-socioeconomic background. As the result of an automobile accident during her sophomore year in high school, she is confined to a motorized wheel chair. She is paralyzed from the waist down, has full use of one arm, and limited use of the other arm. Her academic records indicate that she has graduated with a 3.0 grade-point average. Since her accident, she has been on academic probation one semester and made the Dean's Honor Roll the following semester.

**STOP READING:** Answer questions 1-12 on the rating scales answer form.

(4) Client 4 is an 18 year old Caucasian male, from a low-socioeconomic background. He was described by his grade school teachers as "excessively shy" until a hearing loss was discovered and he was enrolled in a sign-language training special-education program. Throughout his primary and secondary education, his schools have arranged to have a hand-signing interpreter in each of his classes. According to his mother, his father deserted the family when he was ten, and the family's financial resources have been primarily general assistance and A.D.C. (child support) for him, one younger brother, and two younger sisters. His family currently lives in government subsidized housing. He would someday like to have a Master's degree in business administration (MBA), but his family's finances dictate that he must now secure a job. He plans to begin his college education in an evening extension program at the local university.

**A.C.T. SURVEY****FORM B**

(1) Client 1 is an 18 year old Black female, from a middle-socioeconomic background. She is in excellent physical condition, and her school records indicate no developmental problems. She has one younger brother and two younger sisters. Her father is an electrical engineer and her mother is an elementary school teacher.

**STOP READING:** Answer questions 1-12 on the rating scales answer form.

(2) Client 2 is an 18 year old Black male, from a low-socioeconomic background. He excels in all physical activities. Having attended three different schools in the past eight years, his cumulative folder indicates only a little about his academic progress or his social adjustments. One of his grade school teachers expressed concern over his aggressiveness in the classroom and an attendance officer from his high school found it necessary to speak to his mother about his extended absences, just prior to his family's most recent relocation six months ago.

**STOP READING:** Answer questions 1-12 on the rating scales answer form.

(3) Client 3 is an 18 year old Caucasian male, from a middle-socioeconomic background. As the result of an automobile accident during his sophomore year in high school, he is confined to a motorized wheel chair. He is paralyzed from the waist down, has full use of one arm, and limited use of the other arm. His academic records indicate that he has graduated with a 3.0 grade-point average. Since his accident, he has been on academic probation one semester and made the Dean's Honor Roll the following semester.

**STOP READING:** Answer questions 1-12 on the rating scales answer form.

(4) Client 4 is an 18 year old Caucasian female, from a low-socioeconomic background. She was described by her grade school teachers as "excessively shy" until a hearing loss was discovered and she was enrolled in a sign-language training special-education program. Throughout her primary and secondary education, her schools have arranged to have a hand-signing interpreter in each of her classes. According to her mother, her father deserted the family when she was ten, and the family's financial resources have been primarily general assistance and A.D.C. (child support) for her, one younger brother, and two younger sisters. Her family currently lives in government subsidized housing. She would someday like to have a Master's degree in business administration (MBA), but her family's finances dictate that she must now secure a job. She plans to begin her college education in an evening extension program at the local university.

## A.C.T. SURVEY

## FORM C

(1) Client 1 is an 18 year old Caucasian male, from a middle-socioeconomic background. He is in excellent physical condition, and his school records indicate no developmental problems. He has one younger brother and two younger sisters. His father is an electrical engineer and his mother is an elementary school teacher.

**STOP READING:** Answer questions 1-12 on the rating scales answer form.

(2) Client 2 is an 18 year old Caucasian female, from a low-socioeconomic background. She excels in all physical activities. Having attended three different schools in the past eight years, her cumulative folder indicates only a little about her academic progress or her social adjustments. One of her grade school teachers expressed concern over her aggressiveness in the classroom and an attendance officer from her high school found it necessary to speak to her mother about her extended absences, just prior to her family's most recent relocation six months ago.

**STOP READING:** Answer questions 1-12 on the rating scales answer form.

(3) Client 3 is an 18 year old Black female, from a middle-socioeconomic background. As the result of an automobile accident during her sophomore year in high school, she is confined to a motorized wheel chair. She is paralyzed from the waist down, has full use of one arm, and limited use of the other arm. Her academic records indicate that she has graduated with a 3.0 grade-point average. Since her accident, she has been on academic probation one semester and made the Dean's Honor Roll the following semester.

**STOP READING:** Answer questions 1-12 on the rating scales answer form.

(4) Client 4 is an 18 year old Black male, from a low-socioeconomic background. He was described by his grade school teachers as "excessively shy" until a hearing loss was discovered and he was enrolled in a sign-language training special-education program. Throughout his primary and secondary education, his schools have arranged to have a hand-signing interpreter in each of his classes. According to his mother, his father deserted the family when he was ten, and the family's financial resources have been primarily general assistance and A.D.C. (child support) for him, one younger brother, and two younger sisters. His family currently lives in government subsidized housing. He would someday like to have a Master's degree in business administration (MBA), but his family's finances dictate that he must now secure a job. He plans to begin his college education in an evening extension program at the local university.

**A.C.T. SURVEY****FORM D**

(1) Client 1 is an 18 year old Caucasian female, from a middle-socioeconomic background. She is in excellent physical condition, and her school records indicate no developmental problems. She has one younger brother and two younger sisters. Her father is an electrical engineer and her mother is an elementary school teacher.

**STOP READING:** Answer questions 1-12 on the rating scales answer form.

(2) Client 2 is an 18 year old Caucasian male, from a low-socioeconomic background. He excels in all physical activities. Having attended three different schools in the past eight years, his cumulative folder indicates only a little about his academic progress or his social adjustments. One of his grade school teachers expressed concern over his aggressiveness in the classroom and an attendance officer from his high school found it necessary to speak to his mother about his extended absences, just prior to his family's most recent relocation six months ago.

**STOP READING:** Answer questions 1-12 on the rating scales answer form.

(3) Client 3 is an 18 year old Black male, from a middle-socioeconomic background. As the result of an automobile accident during his sophomore year in high school, he is confined to a motorized wheel chair. He is paralyzed from the waist down, has full use of one arm, and limited use of the other arm. His academic records indicate that he has graduated with a 3.0 grade-point average. Since his accident, he has been on academic probation one semester and made the Dean's Honor Roll the following semester.

**STOP READING:** Answer questions 1-12 on the rating scales answer form.

(4) Client 4 is an 18 year old black female, from a low-socioeconomic background. She was described by her grade school teachers as "excessively shy" until a hearing loss was discovered and she was enrolled in a sign-language training special-education program. Throughout her primary and secondary education, her schools have arranged to have a hand-signing interpreter in each of her classes. According to her mother, her father deserted the family when she was ten, and the family's financial resources have been primarily general assistance and A.D.C. (child support) for her, one younger brother, and two younger sisters. Her family currently lives in government subsidized housing. She would someday like to have a Master's degree in business administration (MBA), but her family's finances dictate that she must now secure a job. She plans to begin her college education in an evening extension program at the local university.

**Appendix E**  
**Sample Multicultural B.I.A.S. Survey and Workshop**

**M-B.I.A.S. SURVEY®**  
**GROUP WORKSHOP FORMAT**

## WORKSHOP COORDINATOR'S INSTRUCTIONS

**This survey is recommended:**

- As a tool for personal bias awareness and stimulation of group discussions
- For people training or working in multicultural settings in the helper-professions

**You will need:**

- Survey Forms A, B, C, D (As even a distribution of each Form as possible)
- Instructions & Rating Scales for each member of the group
- Four Copies of the Survey-Results Table
- One Master Survey-Results Table Transparency & a colored marker
- An overhead projector
- 1-4 Calculators

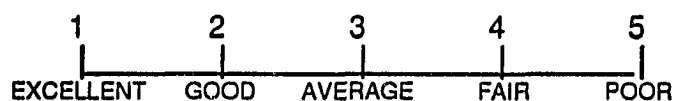
**SCORING INSTRUCTIONS:**

- 1** Randomly hand each person one of the forms (either 'A', 'B', 'C', or 'D'). After all participants have finished rating their four scenarios, split the group into sub-groups corresponding to their M-B.I.A.S. SURVEY form 'A', 'B', 'C', or 'D'. Hand out the M-B.I.A.S. SURVEY - Results Table to one member of the group who will record the individual scores for the group.
- 2** Have each member of the group tally his or her individual scores on the M- B.I.A.S. SURVEY - Rating Form for each of the four clients. Scores are tallied by adding the numbers of the six characteristics (Example: The total of the six characteristics for Client 1, is Client 1's M-B.I.A.S. score--Scores will be between 6 and 30)
- 3** The group leader should record each individual's score into the appropriate boxes of the M-B.I.A.S. SURVEY - Results Table (Example: The group leader in the group that filled out Form 'A' will record the individual scores for Client 1 into the box marked with an asterisk\*--The group leader will then move down, directly under Client 1 to record the scores in the box for Client 2's M-B.I.A.S. score, then Client 3's, then Client 4's)
- 4** Now find the average score for each box of individual scores (Example: If there were five members of the group who filled out form 'A', five individual scores should have been written into the box marked with an asterisk\*--The group leader should add the five individual scores and divide the total by five--The group leader will then place the average group scores into the corresponding boxes of a master results table).
- 5** When all group leaders have filled in their portion of a master M-B.I.A.S. SURVEY-Results Table, figure the group means of each client. Fill in the mean scores for each client on the far right-hand column of the master table.

**M.B. SURVEY®  
INSTRUCTIONS**

In the following survey, you are given a brief description of four people who have recently graduated from the same public high school, in the college-track curriculum. They each recently graduated with the same 3.0 grade point average, in the top half of their class.

They are each about to attempt entering the work force. **Your task is to use the information provided to rate each person in six job characteristics which are important to employers.** The six job characteristics are randomly arranged alongside a 5-point rating scale from 1 (excellent likelihood of occurrence) to 5 (poor likelihood of occurrence) on the accompanying "Rating Scales" form.



Read case one, then immediately refer to the job characteristics "Rating Scales" to rate the first set of six characteristics. Rate the person on each characteristic by marking the appropriate space on the answer sheet.

Rate the second, third, and fourth persons in the same manner; first reading the description, then rating the next set of six characteristics.

**\* Do not hesitate; work quickly, indicating your first impressions.**

**M.B. SURVEY® - RATING FORM**

		EXCELLENT	AVERAGE		POOR	
			GOOD		FAIR	
<b>CLIENT 1</b>						
1) Awareness of Personal Strengths and Weaknesses	1	①	②	③	④	⑤
2) Goal Orientation	2	①	②	③	④	⑤
3) Self-Esteem	3	①	②	③	④	⑤
4) Energy Level	4	①	②	③	④	⑤
5) Participation in Extracurricular Activities	5	①	②	③	④	⑤
6) Level of Honesty	6	①	②	③	④	⑤
<b>CLIENT 2</b>						
1) Awareness of Personal Strengths and Weaknesses	1	①	②	③	④	⑤
2) Goal Orientation	2	①	②	③	④	⑤
3) Self-Esteem	3	①	②	③	④	⑤
4) Energy Level	4	①	②	③	④	⑤
5) Participation in Extracurricular Activities	5	①	②	③	④	⑤
6) Level of Honesty	6	①	②	③	④	⑤
<b>CLIENT 3</b>						
1) Awareness of Personal Strengths and Weaknesses	1	①	②	③	④	⑤
2) Goal Orientation	2	①	②	③	④	⑤
3) Self-Esteem	3	①	②	③	④	⑤
4) Energy Level	4	①	②	③	④	⑤
5) Participation in Extracurricular Activities	5	①	②	③	④	⑤
6) Level of Honesty	6	①	②	③	④	⑤
<b>CLIENT 4</b>						
1) Awareness of Personal Strengths and Weaknesses	1	①	②	③	④	⑤
2) Goal Orientation	2	①	②	③	④	⑤
3) Self-Esteem	3	①	②	③	④	⑤
4) Energy Level	4	①	②	③	④	⑤
5) Participation in Extracurricular Activities	5	①	②	③	④	⑤
6) Level of Honesty	6	①	②	③	④	⑤



**M.B. SURVEY©****FORM A**

(1) Client 1 is an 18 year old Black male, from a middle-socioeconomic background. He is in excellent physical condition, and his school records indicate no developmental problems. He has one younger brother and two younger sisters. His father is an electrical engineer and his mother is an elementary school teacher.

**STOP READING:** Answer questions 1-6 on the rating scales answer form.

(2) Client 2 is an 18 year old Black female, from a low-socioeconomic background. She excels in all physical activities. Having attended three different schools in the past eight years, her cumulative folder indicates only a little about her academic progress or her social adjustments. An attendance officer from her high school found it necessary to speak to her mother about her extended absences, just prior to her family's most recent relocation six months ago. The family's financial resources have been primarily general assistance and A.D.C. (child support).

**STOP READING:** Answer questions 1-6 on the rating scales answer form.

(3) Client 3 is an 18 year old Caucasian female, from a middle-socioeconomic background. As the result of an automobile accident during her sophomore year in high school, she is confined to a motorized wheel chair. She is paralyzed from the waist down, has full use of one arm, and limited use of the other arm. Since her accident, she has been on academic probation one semester and made the Dean's Honor Roll the following semester. Her academic records indicate that she has graduated with a 3.0 grade-point average.

**STOP READING:** Answer questions 1-6 on the rating scales answer form.

(4) Client 4 is an 18 year old Caucasian male, from a low-socioeconomic background. He was described by his grade school teachers as "excessively shy" until a hearing loss was discovered and he was enrolled in a sign-language training special-education program. Throughout his primary and secondary education, his schools have arranged to have a hand-signing interpreter in each of his classes. According to his mother, his father deserted the family when he was ten, and the family's financial resources have been primarily general assistance and A.D.C. (child support) for him, one younger brother, and two younger sisters. His family currently lives in government subsidized housing.

**M.B. SURVEY®****FORM B**

(1) Client 1 is an 18 year old Black female, from a middle-socioeconomic background. She is in excellent physical condition, and her school records indicate no developmental problems. She has one younger brother and two younger sisters. Her father is an electrical engineer and her mother is an elementary school teacher.

**STOP READING:** Answer questions 1-6 on the rating scales answer form.

(2) Terry is an 18 year old Black male, from a low-socioeconomic background. He excels in all physical activities. Having attended three different schools in the past eight years, his cumulative folder indicates only a little about his academic progress or his social adjustments. An attendance officer from his high school found it necessary to speak to his mother about his extended absences, just prior to his family's most recent relocation six months ago. The family's financial resources have been primarily general assistance and A.D.C. (child support).

**STOP READING:** Answer questions 1-6 on the rating scales answer form.

(3) Client 3 is an 18 year old Caucasian male, from a middle-socioeconomic background. As the result of an automobile accident during his sophomore year in high school, he is confined to a motorized wheel chair. He is paralyzed from the waist down, has full use of one arm, and limited use of the other arm. Since his accident, he has been on academic probation one semester and made the Dean's Honor Roll the following semester. His academic records indicate that he has graduated with a 3.0 grade-point average.

**STOP READING:** Answer questions 1-6 on the rating scales answer form.

(4) Client 4 is an 18 year old Caucasian female, from a low-socioeconomic background. She was described by her grade school teachers as "excessively shy" until a hearing loss was discovered and she was enrolled in a sign-language training special-education program. Throughout her primary and secondary education, her schools have arranged to have a hand-signing interpreter in each of her classes. According to her mother, her father deserted the family when she was ten, and the family's financial resources have been primarily general assistance and A.D.C. (child support) for her, one younger brother, and two younger sisters. Her family currently lives in government subsidized housing.

**M.B. SURVEY®****FORM C**

(1) Client 1 is an 18 year old Caucasian male, from a middle-socioeconomic background. He is in excellent physical condition, and his school records indicate no developmental problems. He has one younger brother and two younger sisters. His father is an electrical engineer and his mother is an elementary school teacher.

**STOP READING:** Answer questions 1-6 on the rating scales answer form.

(2) Client 2 is an 18 year old Caucasian female, from a low-socioeconomic background. She excels in all physical activities. Having attended three different schools in the past eight years, Her cumulative folder indicates only a little about her academic progress or her social adjustments. An attendance officer from her high school found it necessary to speak to her mother about her extended absences, just prior to her family's most recent relocation six months ago. The family's financial resources have been primarily general assistance and A.D.C. (child support).

**STOP READING:** Answer questions 1-6 on the rating scales answer form.

(3) Client 3 is an 18 year old Black female, from a middle-socioeconomic background. As the result of an automobile accident during her sophomore year in high school, she is confined to a motorized wheel chair. She is paralyzed from the waist down, has full use of one arm, and limited use of the other arm. Since her accident, she has been on academic probation one semester and made the Dean's Honor Roll the following semester. Her academic records indicate that she has graduated with a 3.0 grade-point average.

**STOP READING:** Answer questions 1-6 on the rating scales answer form.

(4) Client 4 is an 18 year old Black male, from a low-socioeconomic background. He was described by his grade school teachers as "excessively shy" until a hearing loss was discovered and he was enrolled in a sign-language training special-education program. Throughout his primary and secondary education, his schools have arranged to have a hand-signing interpreter in each of his classes. According to his mother, his father deserted the family when he was ten, and the family's financial resources have been primarily general assistance and A.D.C. (child support) for him, one younger brother, and two younger sisters. His family currently lives in government subsidized housing.

**M.B. SURVEY®****FORM D**

(1) Client 1 is an 18 year old Caucasian female, from a middle-socioeconomic background. She is in excellent physical condition, and her school records indicate no developmental problems. She has one younger brother and two younger sisters. Her father is an electrical engineer and her mother is an elementary school teacher.

**STOP READING:** Answer questions 1-6 on the rating scales answer form.

(2) Client 2 is an 18 year old Caucasian male, from a low-socioeconomic background. He excels in all physical activities. Having attended three different schools in the past eight years, His cumulative folder indicates only a little about his academic progress or his social adjustments. An attendance officer from his high school found it necessary to speak to his mother about his extended absences, just prior to his family's most recent relocation six months ago. The family's financial resources have been primarily general assistance and A.D.C. (child support).

**STOP READING:** Answer questions 1-6 on the rating scales answer form.

(3) Client 3 is an 18 year old Black male, from a middle-socioeconomic background. As the result of an automobile accident during his sophomore year in high school, he is confined to a motorized wheel chair. He is paralyzed from the waist down, has full use of one arm, and limited use of the other arm. Since his accident, he has been on academic probation one semester and made the Dean's Honor Roll the following semester. His academic records indicate that he has graduated with a 3.0 grade-point average.

**STOP READING:** Answer questions 1-6 on the rating scales answer form.

(4) Client 4 is an 18 year old black female, from a low-socioeconomic background. She was described by her grade school teachers as "excessively shy" until a hearing loss was discovered and she was enrolled in a sign-language training special-education program. Throughout her primary and secondary education, her schools have arranged to have a hand-signing interpreter in each of her classes. According to her mother, her father deserted the family when she was ten, and the family's financial resources have been primarily general assistance and A.D.C. (child support) for her, one younger brother, and two younger sisters. Her family currently lives in government subsidized housing.

### MULTICULTURAL B.I.A.S. SURVEY® - RESULTS TABLE

<b>MULTICULTURAL B.I.A.S. SURVEY® designed by:</b> J. Stephen Neynaber, Ed. D Western Michigan University 1992	<b>CLIENT NAME</b>	<b>FORM 'A'</b>	<b>FORM 'B'</b>	<b>FORM 'C'</b>	<b>FORM 'D'</b>	<b>GROUP MEAN SCORES</b>
		Average BIAS Score	Average BIAS Score	Average BIAS Score	Average BIAS Score	
<b>Middle S.E.S. Physically Able</b>	Client 1	* Black Male	Black Female	Caucasian Male	Caucasian Female	
<b>Low S.E.S. Physically Able</b>	Client 2	Black Female	Black Male	Caucasian Female	Caucasian Male	
<b>Middle S.E.S. Physically Disabled</b>	Client 3	Caucasian Female	Caucasian Male	Black Female	Black Male	
<b>Low S.E.S. Physically Disabled</b>	Client 4	Caucasian Male	Caucasian Female	Black Male	Black Female	

**M-B.I.A.S. SURVEY®**  
**GROUP WORKSHOP DISCUSSION GUIDE**

**GROUP ANALYSIS:**

- A** A counselor's bias can be defined as the Beliefs which are likely to Inhibit a counselor's Appropriate Support of his or her client. Beliefs Inhibiting Appropriate Support (B.I.A.S.) are revealed in the MULTICULTURAL B.I.A.S. SURVEY, with high total scores indicating a high degree of negative bias toward the client.
- B** Note the differences in the M-B.I.A.S. scores for Client 1, depending which form is used. How much variation is there in the B.I.A.S. score for Client 1 as a Black male (Form 'A'), compared to when Client 1 is a Caucasian male, or Black female, or Caucasian female? Note the differences in the M-B.I.A.S. scores of each of the other clients, depending which form was used. Now go back to the instructions page and read the first paragraph. If all four graduated from the same high school program, in the top half of their class, what does the difference in scores indicate about counselor stereotypes toward or against race (i.e., racism, or over-compensation for racial equality), or counselor stereotypes toward or against gender (i.e., sexism)?
- C** Note the difference in the M-B.I.A.S. scores between Client 1 & Client 2 in all columns of the Results Table. Now, note the difference in the scores between Client 3 & Client 4. What does the difference in scores reveal about counselor stereotypes toward or against socio-economic status (i.e., Social-Class Stereotyping).
- D** Note the difference in the M-B.I.A.S. scores between Client 3 & Client 4. What does this reveal about counselor bias toward or against people with differing degrees of physical disability (i.e., paraplegic vs. hearing impairment)? How might an emotional disability have ranked with physical disability? How did the group rate Client 3 compared to Client 1 or Client 4 compared with Client 2 on item 5 of the ratings form? Does a person's physical disability necessarily equate to lack of extracurricular activity? If Client 1 was a starter on the tennis team, and Client 3 was the captain of the chess team, was one more "extracurricular" than the other?
- E** What do the different scores on the MULTICULTURAL B.I.A.S. SURVEY indicate about the inherent potential for influencing counselor attitudes with intake reports? Could the intake scenario for Client 1, which states that Client 1 is in, "excellent physical condition", still be accurate if Client 1 had revealed a "Hidden" physical disability (e.g., could a person with a clubbed foot be labeled, "In excellent physical condition"? Also, can a paraplegic person be accurately labeled, "In excellent physical condition"? How did the group rate Client 3 compared to Client 1 or Client 4 compared with Client 2 on item 4 of the ratings form? Does a person's physical disability necessarily equate to lack of energy?

**Appendix F**  
**Sample Career B.I.A.S. Survey and Workshop**

**C-B.I.A.S. SURVEY®**  
**GROUP WORKSHOP FORMAT**

## WORKSHOP COORDINATOR'S INSTRUCTIONS

**This survey is recommended:**

- As a tool for personal bias awareness and stimulation of group discussions
- For people training or working in multicultural settings
- For people training or working in career counseling or other helper-professions

**You will need:**

- Survey Forms A, B, C, D (As even a distribution of each Form as possible)
- Instructions & Rating Scales for each member of the group
- Four Copies of the Survey-Results Table
- One Master Survey-Results Table Transparency & a colored marker
- An overhead projector
- 1-4 Calculators

### SCORING INSTRUCTIONS:

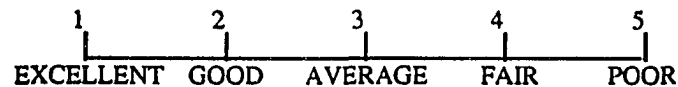
- 1 Randomly hand each person one of the forms (either 'A', 'B', 'C', or 'D') After all participants have finished rating their four scenarios, split the group into sub-groups corresponding to their C-B.I.A.S. SURVEY form 'A', 'B', 'C', or 'D'. Hand out the C-B.I.A.S. SURVEY - Results Table to one member of the group who will record the individual scores for the group.
- 2 Have each member of the group tally his or her individual scores on the C-B.I.A.S. SURVEY - Rating Form for each of the four clients. Scores are tallied by adding the numbers of the six characteristics (Example: The total of the six characteristics for Client 1, is Client 1's C-B.I.A.S. score--Scores will be between 6 and 30)
- 3 The group leader should record each individual's score into the appropriate boxes of the C-B.I.A.S. SURVEY - Results Table (Example: The group leader in the group that filled out Form 'A' will record the individual scores for Client 1 into the box marked with an asterisk\*--The group leader will then move down, directly under Client 1 to record the scores in the box for Client 2's C-B.I.A.S. score, then Client 3's, then Client 4's)
- 4 Now find the average score for each box of individual scores (Example: If there were five members of the group who filled out form 'A', five individual scores should have been written into the box marked with an asterisk\*--The group leader should add the five individual scores and divide the total by five--The group leader will then place the average group scores into the corresponding boxes of a master results table).
- 5 When all group leaders have filled in their portion of a master C-B.I.A.S. SURVEY- Results Table, figure the group means of each client. Fill in the mean scores for each client on the far right-hand column of the master table.



**C.B. SURVEY®  
INSTRUCTIONS**

In the following survey, you are given a brief description of four people who have recently graduated from the same public high school, in the college-track curriculum. They each recently graduated with the same grade point average, in the top half of their class.

They are each about to attempt entering the work force. Your task is to use the information provided to rate each person in six job characteristics which are important to employers. The six job characteristics are randomly arranged alongside a 5-point rating scale from 1 (excellent likelihood of occurrence) to 5 (poor likelihood of occurrence) on the accompanying "Rating Scales" form.



Read case one, then immediately refer to the job characteristics "Rating Scales" to rate the first set of six characteristics. Rate the person on each characteristic by marking the appropriate space on the answer sheet.

Rate the second, third, and fourth persons in the same manner; first reading the description, then rating the next set of six characteristics.

**\* Do not hesitate; work quickly, indicating your first impressions.**

**C.B. SURVEY® - RATING FORM**

		EXCELLENT	AVERAGE		POOR	
			GOOD		FAIR	
<b>CLIENT 1</b>						
1) Awareness of Personal Strengths and Weaknesses	1	①	②	③	④	⑤
2) Goal Orientation	2	①	②	③	④	⑤
3) Self-Esteem	3	①	②	③	④	⑤
4) Energy Level	4	①	②	③	④	⑤
5) Participation in Extracurricular Activities	5	①	②	③	④	⑤
6) Level of Honesty	6	①	②	③	④	⑤
<b>CLIENT 2</b>						
1) Awareness of Personal Strengths and Weaknesses	1	①	②	③	④	⑤
2) Goal Orientation	2	①	②	③	④	⑤
3) Self-Esteem	3	①	②	③	④	⑤
4) Energy Level	4	①	②	③	④	⑤
5) Participation in Extracurricular Activities	5	①	②	③	④	⑤
6) Level of Honesty	6	①	②	③	④	⑤
<b>CLIENT 3</b>						
1) Awareness of Personal Strengths and Weaknesses	1	①	②	③	④	⑤
2) Goal Orientation	2	①	②	③	④	⑤
3) Self-Esteem	3	①	②	③	④	⑤
4) Energy Level	4	①	②	③	④	⑤
5) Participation in Extracurricular Activities	5	①	②	③	④	⑤
6) Level of Honesty	6	①	②	③	④	⑤
<b>CLIENT 4</b>						
1) Awareness of Personal Strengths and Weaknesses	1	①	②	③	④	⑤
2) Goal Orientation	2	①	②	③	④	⑤
3) Self-Esteem	3	①	②	③	④	⑤
4) Energy Level	4	①	②	③	④	⑤
5) Participation in Extracurricular Activities	5	①	②	③	④	⑤
6) Level of Honesty	6	①	②	③	④	⑤

**C.B. SURVEY®****FORM A**

(1) Client 1 is an 18 year old Black male, from a middle-socioeconomic background. He is in excellent physical condition, and his school records indicate no developmental problems. He has one younger brother and two younger sisters. His father is an electrical engineer and his mother is an elementary school teacher.

**STOP READING:** Answer questions 1-6 on the rating scales form.

(2) Client 2 is an 18 year old Black female, from a low-socioeconomic background. She was described by her grade school teachers as "excessively shy" until a hearing loss was discovered and she was enrolled in a sign-language training special-education program. Throughout her primary and secondary education, her schools have arranged to have a hand-signing interpreter in each of her classes. According to her mother, her father deserted the family when she was ten, and the family's financial resources have been primarily general assistance and A.D.C. child support for her, one younger brother and two younger sisters. Her family currently lives in government subsidized housing.

**STOP READING:** Answer questions 1-6 on the rating scales form.

(3) Client 3 is an 18 year old Caucasian female, from a middle-socioeconomic background. She is in excellent physical condition, and her school records indicate no developmental problems. She has one younger brother and two younger sisters. Her father is a computer software design engineer and her mother is an occupational therapist. She currently works part-time at a local pet store and has no idea what kind of career she wants. She has no college plans and says she will probably live at home for the next few months or longer.

**STOP READING:** Answer questions 1-6 on the rating scales form.

(4) Client 4 is an 18 year old Caucasian male, from a low-socioeconomic background. As the result of an automobile accident during his sophomore year in high school, he is confined to a motorized wheel chair. He is paralyzed from the waist down. The family's financial resources have been primarily general assistance and A.D.C. (child support) for him, one younger brother, and two younger sisters. His family currently lives in government subsidized housing. He would someday like to have a Master's degree in business administration (MBA), but his family's finances dictate that he must now secure a job. He plans to begin his college education in an evening extension program at the local university.

**C.B. SURVEY®****FORM B**

(1) Client 1 is an 18 year old Black female, from a middle-socioeconomic background. She is in excellent physical condition, and her school records indicate no developmental problems. She has one younger brother and two younger sisters. Her father is an electrical engineer and her mother is an elementary school teacher.

**STOP READING:** Answer questions 1-6 on the rating scales form.

(2) Client 2 is an 18 year old Black male, from a low-socioeconomic background. He was described by his grade school teachers as "excessively shy" until a hearing loss was discovered and he was enrolled in a hand sign-language training special education program. Throughout his primary and secondary education, his schools have arranged to have a hand-signing interpreter in each of his classes. According to his mother, his father deserted the family when he was ten, and the family's financial resources have been primarily general assistance and A.D.C. (child support) for him, one younger brother, and two younger sisters. His family currently lives in government subsidized housing.

**STOP READING:** Answer questions 1-6 on the rating scales form.

(3) Client 3 is an 18 year old Caucasian male, from a middle-socioeconomic background. He is in excellent physical condition, and his school records indicate no developmental problems. He has one younger brother and two younger sisters. His father is a computer software design engineer and his mother is an occupational therapist. He currently works part-time at a local pet store and has no idea what kind of career he wants. He has no college plans and says he will probably live at home for the next few months or longer.

**STOP READING:** Answer questions 1-6 on the rating scales form.

(4) Client 4 is an 18 year old Caucasian female, from a low-socioeconomic background. As the result of an automobile accident during her sophomore year in high school, she is confined to a motorized wheel chair. She is paralyzed from the waist down. The family's financial resources have been primarily general assistance and A.D.C. (child support) for her, one younger brother, and two younger sisters. Her family currently lives in government subsidized housing. She would someday like to have a Master's degree in business administration (MBA), but her family's finances dictate that she must now secure a job. She plans to begin her college education in an evening extension program at the local university.

**C.B. SURVEY®****FORM C**

(1) Client 1 is an 18 year old Caucasian male, from a middle-socioeconomic background. He is in excellent physical condition, and his school records indicate no developmental problems. He has one younger brother and two younger sisters. His father is an electrical engineer and his mother is an elementary school teacher.

**STOP READING:** Answer questions 1-6 on the rating scales form.

(2) Client 2 is an 18 year old Caucasian female, from a low-socioeconomic background. She was described by her grade school teachers as "excessively shy" until a hearing loss was discovered and she was enrolled in a sign-language training special-education program. Throughout her primary and secondary education, her schools have arranged to have a hand-signing interpreter in each of her classes. According to her mother, her father deserted the family when she was ten, and the family's financial resources have been primarily general assistance and A.D.C. (child support) for her, one younger brother, and two younger sisters. Her family currently lives in government subsidized housing.

**STOP READING:** Answer questions 1-6 on the rating scales form.

(3) Client 3 is an 18 year old Black female, from a middle-socioeconomic background. She is in excellent physical condition, and her school records indicate no developmental problems. She has one younger brother and two younger sisters. Her father is a computer software design engineer and her mother is an occupational therapist. She currently works part time at a local pet store and has no idea what kind of career she wants. She has no college plans and says she will probably live at home for the next few months or longer.

**STOP READING:** Answer questions 1-6 on the rating scales form.

(4) Client 4 is an 18 year old Black male, from a low-socioeconomic background. As the result of an automobile accident during his sophomore year in high school, he is confined to a motorized wheel chair. He is paralyzed from the waist down. The family's financial resources have been primarily general assistance and A.D.C. (child support) for him, one younger brother, and two younger sisters. His family currently lives in government subsidized housing. He would someday like to have a Master's degree in business administration (MBA), but his family's finances dictate that he must now secure a job. He plans to begin his college education in an evening extension program at the local university.

**C.B. SURVEY®****FORM D**

(1) Client 1 is an 18 year old Caucasian female, from a middle-socioeconomic background. She is in excellent physical condition, and her school records indicate no developmental problems. She has one younger brother and two younger sisters. Her father is an electrical engineer and her mother is an elementary school teacher.

**STOP READING:** Answer questions 1-6 on the rating scales form.

(2) Client 2 is an 18 year old Caucasian male, from a low-socioeconomic background. He was described by his grade school teachers as "excessively shy" until a hearing loss was discovered and he was enrolled in a hand sign-language training special education program. Throughout his primary and secondary education, his schools have arranged to have a hand-signing interpreter in each of his classes. According to his mother, his father deserted the family when he was ten, and the family's financial resources have been primarily general assistance and A.D.C. (child support) for him, one younger brother, and two younger sisters. His family currently lives in government subsidized housing.

**STOP READING:** Answer questions 1-6 on the rating scales form.

(3) Client 3 is an 18 year old Black male, from a middle-socioeconomic background. He is in excellent physical condition, and his school records indicate no developmental problems. He has one younger brother and two younger sisters. His father is a computer software design engineer and his mother is an occupational therapist. He currently works part time at a local pet store and has no idea what kind of career he wants. He has no college plans and says he will probably live at home for the next few months or maybe longer.

**STOP READING:** Answer questions 1-6 on the rating scales form.

(4) Client 4 is an 18 year old Black female, from a low-socioeconomic background. As the result of an automobile accident during her sophomore year in high school, she is confined to a motorized wheel chair. She is paralyzed from the waist down. The family's financial resources have been primarily general assistance and A.D.C. (child support) for her, one younger brother, and two younger sisters. Her family currently lives in government subsidized housing. She would someday like to have a Master's degree in business administration (MBA), but her family's finances dictate that she must now secure a job. She plans to begin her college education in an evening extension program at the local university.

**CAREER B.I.A.S. SURVEY® - RESULTS TABLE**

CAREER B.I.A.S. SURVEY® designed by:  J. Stephen Neynaber, Ed. D Western Michigan University 1992	CLIENT NAME	FORM 'A'	FORM 'B'	FORM 'C'	FORM 'D'	GROUP MEAN SCORES
		Average BIAS Score	Average BIAS Score	Average BIAS Score	Average BIAS Score	
Middle S.E.S. Physically Able	Client 1	* Black Male	Black Female	Caucasian Male	Caucasian Female	
Low S.E.S. Physically Disabled	Client 2	Black Female	Black Male	Caucasian Female	Caucasian Male	
Middle S.E.S. Physically Able  Very Low Career Focus	Client 3	Caucasian Female	Caucasian Male	Black Female	Black Male	
Low S.E.S. Physically Disabled  Very High Career Focus	Client 4	Caucasian Male	Caucasian Female	Black Male	Black Female	

**C-B.I.A.S. SURVEY®**  
**GROUP WORKSHOP DISCUSSION GUIDE**

**GROUP ANALYSIS:**

- A** A counselor's bias can be defined as the Beliefs which are likely to Inhibit a counselor's Appropriate Support of his or her client. Beliefs Inhibiting Appropriate Support (B.I.A.S.) are revealed in the CAREER B.I.A.S. SURVEY, with high total scores indicating a high degree of negative bias toward the client.
- B** Note the differences in the C-B.I.A.S. scores for Client 1, depending which form is used. How much variation is there in the C-B.I.A.S. score for Client 1 as a Black male (Form 'A'), compared to when Client 1 is a Caucasian male (Form C), or Black female, or Caucasian female? Note the differences in the C-B.I.A.S. scores of each of the other clients, depending which form was used. Now go back to the Instructions page and read the first paragraph. If all four graduated from the same high school, in the top half of their class, what does the difference in scores indicate about counselor stereotypes toward or against race (i.e., racism, or over-compensation for racial equality), or counselor stereotypes toward or against gender (i.e., sexism)?
- C** Note the difference in the C-B.I.A.S. scores between Client 1 & Client 2 in all columns of the Results Table. Is the difference in scores more a result of counselor attitudes toward or against socio-economic status (i.e., a reflection of Social-Class Stereotyping), or counselor attitudes toward or against physical disabilities?
- D** Note the difference in the C-B.I.A.S. scores between Client 2 & Client 4. What does this reveal about counselor bias toward or against people with differing degrees of physical disability (i.e., paraplegia vs. hearing impairment)? How might an emotional disability have ranked with physical disability? How did the group rate Client 1 compared to Client 2 or Client 3 compared with Client 4 on item 5 of the ratings form? Does a person's physical disability necessarily equate to lack of extracurricular activity? If Client 1 was a starter on the tennis team, and Client 3 was the captain of the chess team, would an employer interviewer consider one more "extracurricular" than the other?
- E** Note the difference in the C-B.I.A.S. scores of between Client 1 and Client 3, then between Client 2 and Client 4. What does this reveal about social stereotyping affecting counselor attitudes toward or against clients with an unstated career focus versus a strongly stated career motivation, or an unstated versus a strongly stated lack of career motivation? Notice how the strongly stated career focus overcame all the traditionally stereotyped multiple suppressions of client 4.
- F** Could the intake scenario for Client 1, which states that Client 1 is in, "excellent physical condition", still be accurate if Client 1 had revealed a "Hidden" physical disability (e.g., should a person with a clubbed foot be labeled, "In excellent physical condition"? Also, can a paraplegic person be accurately labeled, "In excellent physical condition"? How did the group rate Client 1 compared to Client 2 or Client 3 compared with Client 4 on item 4 of the ratings form? Does a person's physical disability necessarily equate to lack of energy?
- G** What do the different scores on the CAREER B.I.A.S. SURVEY indicate about the inherent potential for influencing counselor attitudes with intake reports?



## BIBLIOGRAPHY

- Abrahams, N. M. (1971, Spring). Faking vocational interests: Simulated versus real life motivation. Personnel Psychology, 24(1), 5-12.
- Adams, C., Hurt, H.T., & Preiss, R. (1981, December). Ethnocentrism as a multidimensional paradigm: Prejudice & homophily. (ERIC Document Reproduction Service No. ED 215 914)
- Allen, H. A., Peterson, J.S., & Keating, G. (1982). Attitudes of counselors toward the alcoholic. Rehabilitation Counseling Bulletin, 25(3), 162-164.
- Amir, Y., & Ben-Ari, R. (1983, October). Cognitive cultural learning, intergroup contact & change in ethnic attitudes & relations. Paper presented at the International Conference on Group Processes and Intergroup Conflict, Israel.
- Amir, Y., & Ben-Ari, R. (1985). International tourism, ethnic contact, and attitude change. Journal of Social Issues, 41(3), 105-115.
- Anderson, D. J., & Cranston G. A. (1991). Sensitizing counselors and educators to multicultural issues: An interactive approach. Journal of Counseling & Development, 70(1), 91-98.
- Atkinson, D. R. Furlong, M.J., & Poston, W.C. (1986, July). Afro-American preferences for counselor characteristics. Journal of Counseling Psychology, 33(3), 326-330.
- Aukayanagul, B. (1980). Comparing effectiveness of the use of selected instructional techniques in modifying negative or stereotypic attitudes of nondisabled individuals toward the disabled in Thailand (Doctoral dissertation, University of Northern Colorado, 1979). Dissertation Abstracts International, 40, 5817-A.
- Bauer, C. J. (1985). Books can break attitudinal barriers toward the handicapped. School-Counselor, 32(4), 302-306.
- Bennefield, R. L., & McNeil, J. M. (1989). Labor force status & other characteristics of persons with a work disability: 1981 to 1988. Suitland, MD: Bureau of the Census. (ERIC Document Reproduction Service No. ED 310 240)
- Berger, R. M. (1983, March-April). What is a homosexual? A definitional model. Social Work, 28(2), 132-135.
- Berry, J. W. (1991). Understanding & managing multiculturalism: Some possible implications of research in Canada. Psychology & Developing Societies, 3(1), 17-49.

- Berry, J. W., Kalin, R., & Taylor, D.M. (1976). Multiculturalism and ethnic attitudes in Canada: A summary of a national survey. Paper presented at the Annual Meeting of the Canadian Psychological Association, Toronto, Ontario.
- Biel, M. A. (1979). Characteristics and attitudes of guidelines for counselors working with persons with epilepsy. Education, Guidance, & Counseling, 39(7-A), 4052-4053.
- Birk, J. M., & Brooks, L. (1986). Required skills & training needs of recent counseling psychology graduates. Journal of Counseling Psychology, 33(3), 320-325.
- Bishop, J. B., & Richards, T. F. (1987). Counselor intake judgment about white & black clients in a university counseling center. Journal of Counseling Psychology, 34(1), 96-98.
- Black, H. D. (1986). Racial intolerance: A child's perspective. Foundation for child & youth studies. Kensington, Australia: Foundation for Child & Youth Studies. (ERIC Document Reproduction Service No. ED 286 578)
- Bolles, R. N. (1978, November-December). The so-called 'handicapped' job hunter: Strategies for helping him or her in today's job-market. Newsletter: About Life/Work Planning, 1-2. Walnut Creek, CA: National Career Development Project of United Ministries in Education.
- Bouchard, E. L. (1969). Psycholinguistic attitude study. Ann Arbor, MI: Michigan University, Center for Research on Language & Language Behavior. (ERIC Document Reproduction Service No. ED 028 436)
- Bowe, F. (1980). Disabled women in America: A statistical report drawn from Census Bureau Data. Washington, DC: President's Committee on Employment of the Handicapped. (ERIC Document Reproduction Service No. ED 282 369)
- Brant, L. (1979). Attitudinal barriers to responsive vocational education for handicapped students. Columbus, OH: Ohio State University, National Center for Research in Vocational Education.
- Broverman, I. K., & Others. (1970, January). Sex role stereotyping and clinical judgements of mental health. Journal of Consulting and Clinical Psychology, 34(1), 1-7. (ERIC Document Reproduction Service No. EJ 015 399)
- Brown, D., Pryzwansky, W. B., & Schulte, A. C. (1987). Psychological consultation: Introduction to theory & practice. Newton, MA: Allyn & Bacon.
- Bryson, B. (1990). The mother tongue: English and how it got that way. New York: William Morrow.
- Bureau of the Census (1991, August). 1990 Census of population and housing: Summary population and housing characteristics, California (1990). Washington, DC: U.S. Department of Commerce, Economics, and Statistics Administration.

- Caldwell, C. A., & Trainer, J. F. (1989, March). An ethnographic study of low participation rates in higher education in southcentral Pennsylvania. Paper presented at the American Research Association, San Francisco, CA.
- Cannon, B. J., & Szuhay, J. A. (1986). Faking can elevate scores on the attitudes toward disabled persons scale. Rehabilitation Counseling Bulletin, 30(2), 120-123.
- Carter, T. P. (1969, May). The effects of dogmatic and non-dogmatic leaders on teachers attending a race relations seminar. Paper presented at the Rocky Mountain Psychological Association Convention, Albuquerque, NM.
- Casas, J. M., & Others. (1981). The categorization of ethnic stereotypes by university counselors. Hispanic Journal of Behavioral Sciences, 3(1), 75-82. (ERIC Document Reproduction Service No. EJ 244 517)
- Christianson, K. C., & Sedlacek, W. E. (1972). Differential faculty attitudes towards Blacks, females, and students in general. College Park, MD: University of Maryland Counseling Center.
- Chubon, R. A., & Keith, A. D. (1989). Preliminary evaluation of a computer simulation of long cane use. Rehabilitation Counseling Bulletin, 32(4), 312-323.
- Clark, K. B., & Franklin, J. H. (1983). A policy framework for racial justice. (Report No. ISBN-0-941410-30-7) Washington, DC: Joint Center for Political Studies.
- Clark, M. L., & Pearson, W., Jr. (1983, April). Predictors of scientific majors for Black and White college students. Paper presented at the annual Meeting of the American Educational Research Association, Montreal, Canada.
- Clayton, R. L. (1979). Counseling Nonwhite students in an era of integration. National Institute of Education. (From ERIC/CAPS , abstract No. BBB02305)
- Cohen-Emerique, M. (1988). French social workers and their migrant clients: Recognizing cultural and class roles in social work (Occasional Papers in Intercultural Learning, 13). New York, NY: AFS International/Intercultural Programs.
- Collins, R., & Camblin, L. D., Jr. (1983). The politics and science of learning disability and classification: Implications for Black children. Contemporary Education, 54(2), 113-118.
- Cosby, W. H., Jr. (1977). An integration of the visual media via "Fat Albert and the Cosby Kids" into the elementary school curriculum as a teaching aid and vehicle to achieve increased learning (Doctoral dissertation, University of Massachusetts, 1976). Dissertation Abstracts International, 37, 5557-A.
- Coupland, N., Wiemann, J., & Giles, H. (in press). Miscommunication and problematic talk. Newbury Park, CA: Sage Publications.

- Cowan, D. G. (1984). The perceptual effect of patients' first name on the clinical judgement of psychopathology by psychotherapists (Doctoral dissertation, Western Michigan University, 1983). Dissertation Abstracts International, 44, 3927-B.
- Crager, M., & Rosen, D. (1988). Specialization job placement agencies. Careers and the Handicapped, 4(1), 44-46.
- Crosby, E. A. (1983, September). The stigma has lost its sting. VocEd, 57(6), 36,39.
- D'Andrea, M., & Daniels, J. (1991). Exploring the different levels of multicultural counseling training in counselor education. Journal of Counseling & Development, 70(1), 78-85.
- D'Andrea, M., Daniels, J., & Heck, R. (1991). Evaluating the impact of multicultural counseling training. Journal of Counseling & Development, 70(1), 143-150.
- Dailey, A. L. (1979). Spinal cord injured college students: Counseling and guidance approaches. Journal of College Student Personnel, 20(4), 341-347.
- Darnell, R. M. (1982). Attitudinal dimensions of rehabilitation professionals toward disabled persons (Doctoral dissertation, University of Northern Colorado, 1981). Dissertation Abstracts International, 42, 4297-A-4298-A.
- Darou, W. G. (1987). Counseling and the Northern Native. Canadian Journal of Counseling, 21(1), 33-41.
- Dobbins, J. E., & Skillings, J. H. (1991). The utility of race labeling in understanding cultural identity: A conceptual tool for the social science practitioner. Journal of Counseling and Development, 70(1), 37-44.
- Docherty, D. M., & Davis, B. I. (1992). Growing up with options. Educational Leadership, 49(6), 58-59.
- Donaldson, J. (1975). Effects of live, video, and audio presentations by a panel of physically disabled individuals on attitudes toward disabled persons (Doctoral dissertation, University of Kentucky, 1974). Dissertation Abstracts International, 36, 1431A-1432A.
- Douglas, A. M. (1992). Mending the rift between academic and vocational education. Educational Leadership, 49(6), 42-43.
- Elder, B. P. (1983). Rehabilitation: The double blind for blind women. Journal of Visual Impairment and Blindness, 77(6), 298-300.
- Fair, G. W., & Sullivan, A. R. (1980). Career opportunities for culturally diverse handicapped youth. Exceptional Children, 46(8), 626-63.
- Farrel, A.M. (1991). What teachers can learn from industry internships. Educational Leadership, 49(6), 38-39.

- Farrow D. L., Barnette, C. R., Rozos, E. S., Genin, R. A., & Beard, B. R. (1980, September). Relationship between applicant handicap and employment evaluations. Paper presented at the 88th Annual Convention of the American Psychological Association, September, Montreal, Quebec, Canada.
- Filer, P. S. (1982). Counselor trainees' attitudes toward mainstreaming the handicapped. Counselor-Education-& -Supervision, 22(1), 61-69.
- Fix, C., & Rohrbacher, J. A. (1977). What is a handicap?: The impact of attitudes. The Personnel & Guidance Journal, 56(3), 176-178.
- Flexer, R. W. (1975). A comparison of student attitudes toward the disabled in courses on disability and educational psychology courses (Doctoral dissertation, University of Connecticut, 1975). Dissertation Abstracts International, 35, 7122-7123.
- Fuller, C., & Kern, R. (1978). The effect of hostile clients on the opposite-race counselor. Journal of Non-White Concerns in Personnel & Guidance, 6(4), 169-174.
- Fuqua, D. R., Johnson, A. W., Anderson, M. W., & Newman, J. L. (1984). Cognitive methods in counselor training. Counselor Education and Supervision, 24(1), 85-95.
- Garcia, F., Jr., & Ybarra-Garcia, M. (1985). Strategies for counseling Chicanos: Effects of racial & cultural stereotypes. Olympia, WA: Office for Equity Education, Washington Office of the State Superintendent of Public Instruction.
- Garcia, S. B., & Ortiz, A. A. (1988, June). Preventing inappropriate referrals of language minority students to special education. Silver Springs, MD: National Clearinghouse for Bilingual Education: New focus, 5, 1-12. (ERIC Document Reproduction Service No. ED 309 591)
- Garfield, J. C., Weiss, S. L., & Pollack, E. A. (1973). Effects of child's social class on school counselor's decision making. Journal of Counseling Psychology, 20(2), 166-168.
- Garfinkle, E. M., & Morin, S. F. (1978). Psychotherapists' attitudes toward homosexual psychotherapy clients. Journal of Social Issues, 34(3), 101-112.
- Gittell, M. (1986). A place for women? New-Directions-for-Community-Colleges, 14(2), 71-79.
- Gliedman, J., & Roth, W. (1980). The unexpected minority: Handicapped children in America. New York: Carnegie Corporation.
- Goodyear, R. K. (1983). Patterns of counselors' attitudes toward disability groups. Rehabilitation Counseling Bulletin, 26(3), 181-184.
- Grub, W. N. (1992). Giving high schools an occupational focus. Educational Leadership, 49(6), 36-43.

- Gysbers, N. C., & Associates (1984). Designing careers: counseling to enhance education, work & leisure. San Francisco, CA : National Vocational Guidance Association.
- Gysbers, N. C., & Moore, E. J. (1987). Career counseling: Skills and techniques for practitioners. Englewood Cliffs, NJ: Prentice - Hall.
- Hagler, P., Vargo, J., & Semple, J. (1987). The potential for faking on the attitudes toward disabled persons scale. Rehabilitation Counseling Bulletin, 31(1), 72-76.
- Haring, M., Beyard-Tyler, K., & Grey, J. (1983). Sex-biased attitudes of counselors: The special case of nontraditional careers. Counseling & Values, 27(4), 242-247.
- Harrington, T. F. (1982). Developing communication skills. In T. F. Harrington (Ed.), Handbook of career planning for special needs students (pp. 217-242). Rockville, MD: Aspen Publication.
- Hatch, J. A. (1986, April). Learning to be an outsider: Peer stigmatization in kindergarten. Paper presented at the Annual Meeting of the American Educational Research Association, San Francisco, CA.
- Henderson, K. A. (1987, January). Attitudes of counselor to handicapped studied. Camping Magazine, pp. 28-29.
- Hill, A. D., & Reed, D. F. (1982, February). Overview of mainstreaming. Paper presented at the annual Meeting of the Association of Teacher Educators, Phoenix, AZ.
- Hinds, L. R. (1978, September). Labeling in education: The name of the game is the name. ETC. A review of General Semantics, 35(3), 310-313.
- Hudson, M. J. (1988, August). Counseling special needs groups: The visually impaired. Unpublished paper, Western Michigan University, Kalamazoo, MI.
- Hutchinson, R. L., Lee, R. T., & Hutchinson, E. P. (1988, May). A comparison of intake counselors' and clients' perceptions of clients' presenting problems. Paper presented at the Annual Meeting of the Midwestern Psychological Association, Chicago, IL.
- Ibrahim, F. A. (1991). Contribution of cultural worldview to generic counseling & development. Journal of Counseling & Development, 70(1), 13-19.
- Ibrahim, F. A., & Herr, E. L. (1982). Modification of attitudes toward disability: Differential effect of two educational modes. Rehabilitation Counseling Bulletin, 26(1), 29-36.
- Johnson, D. H., & Sedlacek, W. E. (1979). A comparison of White male and female students' racial attitudes. College Park, MD: University of Maryland Counseling Center.

- Jones, L. (1981, July). Distinctive features of midwest rural poverty: Implications for social work practice. Paper presented at the 6th National Institute on Social Work in Rural Areas, Beaufort County, SC.
- Jones, M. H., & Jones, M. C. (1970, March). The neglected client. Black Schools, 1(5), 35-42.
- Juliebo, M. F., & Elliot, J. (1984). The child fits the label. Alberta, Canada: University of Alberta, Edmonton. (ERIC Document Reproduction Service No. ED 309 591)
- Kaplan, S. P. (1983). The influence of client gender on female student perceptions. Rehabilitation Counseling Bulletin, 27(2), 124-127.
- Kaplan, S. P. (1984). Rehabilitation counseling students' perceptions of obese male and female clients. Rehabilitation Counseling Bulletin, 27(3), 172-181.
- Keen, S. (1988, December). The stories we live by: Personal myths guide daily life. Psychology Today, 22, 42-47.
- Keirse, D., & Bates M. (1984). Please understand me: Character & temperament types. Palo Alto, CA: Prometheus Nemesis.
- Knight, G. D., & Sedlacek, W. E. (1983). Sex-role identity and attitudes toward women in traditional & non-traditional occupations (Research Report No. 4-83). College Park, MD: University of Maryland Counseling Center.
- Kojima, Y. (1988, September). Strategies to improve socio-vocational integration of disabled women in Japan. Paper presented at the 16th World Conference of Rehabilitation International, Tokyo.
- Kratovil, J. (1986). Achieving equity in education programs for disabled women and girls: A model workshop (BBB 26146). Washington DC: Council for Chief State School Officers Resource Center on Sex Equity. (ERIC Document Reproduction Service No. ED 313 853)
- Kroger, R. O. (1974). Faking in interest measurement: A social-psychological perspective. Measurement & Evaluation in Guidance, 7(2), 130-134.
- Kurpius, D. J., & Morran, D. K. (1987, April). The relationship of counselor internal dialogue to level of behavioral performance. Paper presented at the Annual Meeting of the American Educational Research Association, Washington, DC.
- LaFromboise, T., Dauphinais, P., & Lujan, P. (1981). Verbal indicators of insincerity as perceived by American Indians. Journal of Non-White Concerns in Personnel and Guidance, 2(2), 87-94.
- Landrine, H. (1985). Race x class stereotypes of women. Sex Roles, 13(1-2), 65-75.

- Lawlis, G. F., & Crawford, J. D. (1975). Cognitive differentiation in women and pioneer-traditional vocational choices. Journal of Vocational Behavior, 6(2), 263-267.
- Lazar, A. L., Orpet, R., & Demos, G. (1973, November). The impact of class instruction in changing student attitudes. Paper presented at the Annual Conference of the California Educational Research Association, Long Beach, CA.
- Lazar, A. L., White, R., Songstock, W., & Gaines, L. (1976a, May - June). A comparative study of attitudes toward the handicapped and self concept by students at three universities. Paper presented at the 100th Annual Meeting of the American Association on mental Deficiency, Chicago, Illinois.
- Lazar, A. L., Gaines, L., Denney-Houghton, D., D'Alonzo, B. J., & Demos, G. (1976b, May - June). A study of parental attitudes toward their handicapped child. Paper presented at the 100th Annual Meeting of the American Association on mental Deficiency, Chicago, Illinois.
- Leonard, F., Loeb, L., & Yarrington, M.J. (1990). Heading for hardship: Retirement income for American women in the next century. Mother's Day report 1990. Washington DC: Older Women's League. (ERIC Document Reproduction Service No. ED 318 918)
- Leong, F. T., & Kim, H. H. (1991). Going beyond cultural sensitivity on the road to multiculturalism: Using the intercultural sensitizer as a counselor training tool. Journal of Counseling & Development, 70(1), 112-118.
- Levinson, E.M. (1986, October). A vocational evaluation program for handicapped students: Focus on the counselor's role. Journal of Counseling and Development, 65, 106.
- Lewis, A. C., & Hayes, S. (1991). Multiculturalism & the school counseling curriculum. Journal of Counseling & Development, 70(1), 119-125.
- Lloyd, A. P. (1987). Multicultural counseling: Does it belong in a counselor education program? Counselor Education and Supervision, 26(3), 164-167.
- Luzzo, D. A. (1991, April). Social class and ethnic differences in college students' career maturity: A quantitative and qualitative analysis. Paper presented at the Annual Meeting of the American Educational Research Association, Chicago, IL.
- Magner, D. K. (1992). Professor takes aim at Black's racial vulnerabilities. The Chronicle of Higher Education, 38(30), A5.
- Magoon, T., & McDermott, M. (1979). Availability and desirability of various skills in candidates for positions in counseling centers: A replication. Journal of Counseling Psychology, 26(2), 169-172.



- Marshall, C. (1985). The stigmatized woman: The professional woman in a male sex-typed career. Journal of Educational Administration, 23(2), 131-152.
- Marshall, C. A., Martin, W. E., Jr., Thomason, T. C., & Johnson, M. J. (1991). Multiculturalism and rehabilitation counselor training: Implications for counseling intervention. Journal of Counseling & Development, 70(1), 225-234.
- Martin, W. E., Scalia, V. A., Gay, D. A., & Wolfe, R. R. (1982). Beginning rehabilitation counselors' attitudes toward disabled persons. Journal of Applied Rehabilitation Counseling, 13, 14-16.
- Mathews, R. M., White, G. W., & Mrdjenovich-Hanks, P. (1990). Using a slide presentation to change attitudes toward people with disabilities and knowledge of independent living services. Rehabilitation Counseling Bulletin, 33(4), 301-306.
- Mazer, G. E. (1971). Effects of social-class stereotyping on teacher expectation. Psychology in the Schools, 8(4), 373-378.
- McDavis, R. T., & Parker, W. M. (1985). Help ethnic minorities with career guidance. Competency-based career guidance module developed for American Association for Counseling and Development, Alexandria, VA.
- McRae, M. B., & Johnson, S. D. (1991). Toward training for competence in multicultural counselor education. Journal of Counseling & Development, 70(1), 131-135.
- Megliocca, L. A., & Rinaldi, R. T. (1982). Multi-factored assessment for the handicapped. Theory Into Practice, 21(2), 106-113.
- Melvin, A. I., Reber, D. D., Melvin, M. R. (1984, November). Valuing analysis--A practical approach to teaching moral education. NASSP Bulletin, 68(475), 97-104.
- Merluzzi, B. H., & Merluzzi, T. V. (1978). Influence of client race on counselors' assessment of case materials. Journal of Counseling Psychology, 25(5), 399-404.
- Midgette, T. E., & Meggert, S. S. (1991). Multicultural counseling instruction: A challenge for faculties in the 21st century. Journal of Counseling & Development, 70(1), 136-141.
- Minatoya, L. Y., & Sedlacek, W. E. (1983). The situational attitude scale-women (SASW): A means to measure environmental sexism. Journal of the National Association of Women Deans and Counselors, 47(1), 25-30.
- Moghaddam, F. M., & Taylor, D. M. (1987). The meaning of multiculturalism for visible minority immigrant women. Canadian Journal of Behavioral Science, 19(2), 121-136.

- Morris, J. (1977). What tests do schools use with Spanish-speaking students? Integrated Education, 15(2), 21-23.
- Morris, J. R., Watts, J.A., & Collins, E.M. (1984). Attitudes of university students toward persons with specific handicaps. Kalamazoo, MI: Western Michigan University. (ERIC Document Reproduction Service No. ED 283 309)
- Mungo, S. J. (1980). Experiential cross-cultural approaches in multicultural early field experiences in the small community. Normal, IL: Illinois State University (ERIC Document Reproduction Service No. ED 240 120)
- Murray, J. (1985). Women and apprenticeship in Hawaii: Opportunities in nontraditional occupations. Honolulu, HI: Honolulu Community College.
- Myers, L. J., Speight, S. L., Highlen, P. S., & Cox, C. I. (1991). Identity development & worldview toward an optimal conceptualization. Journal of Counseling & Development, 70(1), 54-63.
- Nathanson, R. (1979). Counseling persons with disabilities: Are the feeling, thoughts, and behaviors of helping professionals helpful. Personnel and Guidance Journal, 58(4), 233-237.
- Neubauer, N. A., & Rounds, J. B., Jr. (1987, April). The effect of graduate training on counseling student's perceptions of disabilities: A longitudinal study. Paper presented at the Annual Meeting of the American Educational Research Association, Washington DC.
- Newman, J. L., Fuqua, D. R., & Seaworth, T. B. (1989). The role of anxiety in career indecision: Implications for diagnosis and treatment. Career Development Quarterly, 37, 221-331.
- Nwachuku, U. T., & Ivey, A. E. (1991). Culture-specific counseling: An alternative training model. Journal of Counseling and Development, 70(1), 106-111.
- Page, S. (1985, August). On gender roles & perception of maladjustment. Paper presented at the annual Convention of the American Psychological Association, Los Angeles, CA.
- Parker, R. J. (1987, April). The relationship between dogmatism, orthodox Christian beliefs, & ethical judgment. Paper presented at the Annual Convention of the American Association for Counseling and Development, New Orleans, LA.
- Peabody, S. A., & Gelso, C. J. (1981). Countertransference & empathy: The complex relationship between two divergent concepts in counseling. College Park, MD: University of Maryland Counseling Center. (ERIC Document Reproduction Service No. ED 220 759)
- Pearce, D. (1978). The feminization of poverty: Women, work, and welfare. Urban and Social Change Review, 11, 1-2; 28-36.

- Pedersen, P. B. (1990). The multicultural perspective as a fourth force in counseling. Journal of Mental Health Counseling, 12(1), 93-95.
- Pedersen, P. B. (1991). Multiculturalism as a generic approach to counseling. Special issues: Multiculturalism as a fourth force in counseling. Journal of Counseling and Development, 70(1), 6-12.
- Pedrini, D. T., & Pedrini, B. C. (1965). Reaction formulation: A bibliography. Omaha, NE: University of Nebraska. (ERIC Document Reproduction Service No. ED 067 581)
- Peters, H. J., & Slaughter, G. F. (1973). Racial interaction between counselor and client as a factor in counseling outcome (Final report for the National Center for Educational Research and Development, Washington, DC, No. DHEW/OE). Columbus, OH: Ohio State University. (ERIC document Reproduction Service No. ED 096 574)
- Pinkerton, S. S., & McAleer, C. A. (1976). Influence of client diagnosis--cancer--on counselor decisions. Journal of Counseling Psychology, 23(6), 575-578.
- Ponterotto, J. G. (1991). The nature of prejudice revisited: Implications for counseling intervention. Journal of Counseling & Development, 70(1), 216-224.
- Ponterotto, J. G., & Benesch, K. F. (1988). An organizational framework for understanding the role of culture in counseling. Journal of Counseling and Development, 66(5), 237-241.
- Prasse, D. P., & Reschly, D. J. (1986, January). Larry P.: A case of segregation, testing, or program efficacy? Exceptional Children, 52(4), 333-346.
- Priest, R. (1991). Racism and prejudice as negative impacts on African American clients in therapy. Journal of Counseling & Development, 70(1), 213-215.
- Progoff, I. (1975). At a journal workshop: The basic text and guide for using the intensive journal process. New York: Dialogue House Library.
- Ratzlaff, H. C., & Kahn, S. E. (1983). Occupational gender bias revisited: Methodological improvements. Canadian Counsellor, 17(3), 118-123.
- Reid, P. T. (1984). Feminism versus minority group identity: Not for black women only. Sex Roles: A Journal of Research, 10(3-4), 247-255.
- Reynolds, A. L., & Pope, R. L. (1991). The complexities of diversity: Exploring multiple oppressions. Journal of Counseling and Development, 70(1), 174-180.
- Rickelman, B. L., & Blaylock, J. N. (1983). Behaviors of sighted individuals perceived by blind persons as hindrances to self-reliance in blind persons. Journal of Visual Impairment and Blindness, 77(1), 8-11.

- Riddle, D. I., & Sang, B. (1978). Psychotherapy with lesbians. Journal of Social Issues, 34(3), 84-100.
- Rogers, E. J. (1982). Getting hired: Everything you need to know about resumes, interviews, and job-hunting strategies. Englewood Cliffs, NJ: Prentice Hall.
- Rosenthal, D. A., & Chapman, D. (1982). The lady spaceman: Children's perception of sex-stereotyped occupations. Sex Roles: A Journal of Research, 8(9), 959-965.
- Rule, W. R. (1984). Lifestyle counseling for adjustment to disability. Rockville, MD: Aspen Systems Corporation.
- Ruzicka, S. (1987). Attitudes of counselor to handicapped studied. Camping Magazine, 59(3), 28-29.
- Sampson, D. (1982, Summer). Career planning and placement: Meeting the needs of students with disabilities. Journal of NAWDAC, 45(4), 3-37.
- Sanders, J., Jr. (1978). The differential effects of selected methods of imparting information on teacher trainees' attitudes toward disabled persons. (Research paper, University of Georgia, 1978). Education, Guidance, and Counseling Abstracts, 39(7-A), 4065A-4066A.
- Sanua, V. D. (1977, May). Diagnostics & psychotherapy with minority groups: The importance of sociocultural factors in the training of clinical psychologists. Paper presented at the Annual Convention of the New York State Psychological Association, Kiamesha Lake, NY.
- Schofield, L. F., & Kunce, J. (1971). Client disability & counselor behavior. Rehabilitation Counseling Bulletin, 14(3), 158-165.
- Scott, H. (1985, May). A call for greater black consciousness & professionalism in the pursuit of cultural & academic excellence for African Americans. Paper presented at the Conference of the New York Alliance of Black School Educators, New York, NY.
- Scott, W., & Rohrbach, J. (1977). A comparison of five criteria for identifying fakable items on an attitude inventory. Journal of Experimental Education, 45(3), 51-55.
- Sears, J. T. (1988, April). Attitudes, experiences, and feelings of guidance counselors in working with homosexual students: A report on the quality of school life for southern Gay and Lesbian students. Paper presented at the Annual Meeting of the American Educational Research Association, New Orleans, LA.

- Sedlacek, W. E. (1974, April). Racism and sexism: A comparison and contrast (Research Report No. 5-74). Based on a symposium presented at the Annual Convention of the National Association of of Women Deans, Administrators, and Counselors, Chicago, IL. College Park., MD: University of Maryland Counseling Center.
- Sedlacek, W. E., & Brooks, G. C., Jr., (1967). The development of a measure of racial attitudes. College Park, MD: University of Maryland Counseling Center. (ERIC Document Reproduction Service No. ED 037 497)
- Sellin, D. F. (1981). Promising prospects. College of Education Monograph Series. Kalamazoo, MI: Western Michigan University.
- Shaw, M., & Wright, J. (1967). Scales for the measurement of attitudes. New York: McGraw-Hill.
- Shertzer, B., & Linden, J. D. (1979). Fundamentals of individual appraisal: Assessment techniques for counselors. Geneva, IL: Houghton Mifflin.
- Sibicky, M., & Dovidio, J. F. (1984, April). The stigma of counseling: Stereotypes, interpersonal reaction, & the self-fulfilling prophecy. Paper presented at the Annual Meeting of the Eastern Psychological Association, Baltimore, MD.
- Siller, J. (1964). Personality determinants of reaction to the physically disabled. American Foundation for the Blind Research Bulletin, 7, 37-52.
- Skillings, J. H., & Dobbins, J. E. (1991). Racism as a disease: Etiology and treatment implications. Journal of Counseling & Development, 70(1), 206-212.
- Slaney, R. B., & Brown, M. T. (1983). Effects of race and socioeconomic status on career choice variables among college men. Journal of Vocational Behavior, 23(3), 257-269.
- Slappo, J., & Katz, L. J. (1989). A survey of women with disabilities in nontraditional careers. Journal of Rehabilitation, 55(1), 23-30.
- Snowden, L. R., & Cheung, F. K. (1990). Use of inpatient mental health services by members of ethnic minority groups. American Psychologist, 45(3), 347-355.
- Speight, S. L., Myers, L. J., Cox, C. I., & Highlen, P. S. (1991). A redefinition of multicultural counseling. Journal of Counseling and Development, 70(1), 29-36.
- Steele, K. M., & Smithwick, L. E. (1989). First names & first impressions: A fragile relationship. Sex Roles: A Journal of Research, 21(7-8), 517-523.
- Stensrud, D. J. (1984). Meeting the needs of college students with disabilities: The effects of the sensitivity and special populations mediated inservice training program on the attitudes, knowledge and self assessed behavioral intentions of postsecondary personnel (Doctoral dissertation, University of Oregon, 1983). Dissertation Abstracts International, 44, 2066-A.

- Stephens, S. (1979). Assessment of a model to predict attitudes and behavior of vocational teacher trainees toward handicapped individuals (Doctoral dissertation). Dissertation Abstracts International, 40(2-A), 823-824.
- Stillson, R. W., O'Neil, J. M., & Owen, S. V. (1991). Predictors of adult men's gender-role conflict: Race, class, unemployment, age, instrumentality-expressiveness, and personal strain. Journal of Counseling Psychology, 38(4), 458-464.
- Stodden, R. A., Ianacone, R. N., & Lazar, A. L. (1973, April). The relationship between attitudes toward the handicapped and nonverbal behavior with educators of special needs students: An exploratory study. Paper presented at 54th Annual International Convention, the Council for Exceptional Children, Chicago, IL.
- Stovall, C., & Sedlacek W. E. (1983, July). Attitudes of male and female university students toward students with different physical disabilities. Journal of College Student Personnel, 24(4), 325-330.
- Straker, D. (1980, June). Attitudes toward English vernaculars. Paper presented at the conference, "Meeting the Educational Needs of Students Who Speak a Vernacular English in the Public School Setting," Ann Arbor, MI.
- Sue, D. W. (1981). Counseling the culturally different: Theory & practice. New York: Wiley & Sons.
- Summerville, M. B., Cohen, R., & Klesges, R. (1987, March). The relationship of body type, sociometric ratings, and self-perceptions in children. Paper presented at the 33rd Annual Meeting of the Southeastern Psychological Association, Atlanta, GA.
- Tagiuri, R., & Petrullo, L. (Eds.). (1958). Person perception and interpersonal behavior. Stanford, CA: Stanford University Press.
- Thams, G. M. (1975). The effects of a professional development seminar on the attitudes, knowledge, and behavioral strategies of counselors toward handicapped students. (Doctoral dissertation, Wayne State University, 1975). Dissertation Abstracts International, 36, 2651-A.
- Thomas, A. H., Sayers, M. I., Borgers, S. B., & Barke, C. R. (1987). Client affect and concerns: Their effect on the counselor. Journal of Humanistic Education and Development, 25(3), 92-103.
- Thomas, C. W. (1991). Early burnout among today's rising stars? Baylor Business Review, 2, 21-22.
- Thomas, K. R., Butler, A. J., & Davis, R. M. (1979). Semantic differentiation of meaning with the physically disabled. Rehabilitation Counseling Bulletin, 23(1), 48-57.

- Thomas, M. D., & Melvin, A. I. (1981). Community consensus is available on a moral valuing standard. Phi Delta Kappan, 62(7), 479-483.
- Threlkeld, R. M., & DeJong, W. (1982). Changing behavior toward the handicapped: An evaluation of the film "First Encounters." Rehabilitation Counseling Bulletin, 25(5), 282-285.
- Tichenor, D. F., Thomas, K. R., & Kravetz, S. P. (1975). Client-counselor congruence in perceiving handicapping problems. Rehabilitation Counseling Bulletin, 19(1), 299-304.
- Tobias, S., Zibrin, M., & Menell, C. (1982, August). Special education referrals: Failure to replicate student-teacher ethnicity interaction. Paper presented at the Annual Meeting of the American Psychological Association, August 23-27, Washington, D. C.
- Truax, B. M. (1986). The intuitive dimension of the therapist's consciousness: A new paradigm. (Doctoral dissertation, Western Michigan University, 1985) Dissertation Abstracts International, 47(1), 90-A.
- Uba, A. (1982). Performance of normal and disabled Nigerian students on a selective attention task. Journal of Psychology, 111(2), 273-276.
- Urbick, T. M. (1968, November). Helping procedures for use with the disadvantaged. CAPS Current Resources series. (Bureau of Research No. BR-6-2487). Washington, DC: Office of Education (DHEW).
- Ursprung, A. W. (1987). Influence of client intelligence quotient scores on placement recommendations: An analogue study. Rehabilitation Counseling Bulletin, 30(4), 227-231.
- Vargo, J. W., & Semple, J. E. (1984). Honest versus fake scores on the Attitudes Toward Disabled Persons Scale-Form A. Rehabilitation Counseling Bulletin, 27(3), 182-185.
- Vaughan, F. E. (1979). Awakening intuition. New York: Doubleday.
- Vaz, K. (1987). Building retention systems for talented minority students attending white universities. Negro Educational Review, 38, 23-29.
- Virginia State Department of Education (1986). Status report on vocational sex equity in Virginia: A five year study. Richmond, VA: Author.
- Vogelson, A. R. (1975, March). Empathy and stereotype accuracy of rehabilitation counselors as related to education and experience. Paper presented at the Annual Convention of the American Personnel and Guidance Association, New York, NY.
- Vontress, C. E. (1973, August). Racial and ethnic barriers in counseling. Paper presented at the 81st Annual Meeting of the American Psychological Association, Montreal, Quebec.

- Walker, P. W. & Juhasz, A. M. (1982). Sex-role stereotyping as a factor influencing counselors' advising of Black male students to investigate selected allied health professions. (ERIC Document Reproduction Service No. ED 256 984)
- Warren, S. A., & Gardner, D. C. (1981). Correlates of class rank of high school handicapped students in mainstream vocational education programs. Adolescence, 16(62), 335-344.
- Webster's New World Dictionary. (1988). New York: Simon & Schuster, Inc.
- Wenger, H. D. (1971, April). Counseling and the blue collar culture. Paper presented at the Annual Meeting of the American Personnel and Guidance Association, Atlantic City, NJ.
- Westbrook, F.D., & Sedlacek, W. E. (1991). Forty years of using labels to communicate about nontraditional students: Does it help or hurt? Journal of Counseling and Development, 70(1), 20-28.
- Wicas, E. A., & Carluccio, L. W. (1971). Attitudes of counselors toward three handicapped client groups. Rehabilitation Counseling Bulletin, 15(1), 25.
- Wierzbica, J. D. (1989, October). Bridging the gap: Counseling strategies in a cross-cultural context. Paper presented at the National Symposium on Aboriginal Women of Canada, Alberta, Canada.
- White, T. J., & Sedlacek, W. E. (1987). White students' attitudes toward Blacks and Hispanics: Programming implications. Journal of Multicultural Counseling and Development, 15(4), 171-183.
- Williamson-Ige, D.K. (1984). Intercultural education & school improvement. Bowling Green, OH: Bowling Green State University (ERIC Document Reproduction Service No. ED 243 881)
- Worell, J. (1986, August). Single mothers: Issues of stigma. Paper presented at the 94th Annual Convention of the American Psychological Association, Washington, DC.
- Wysocki, T., Gururaj, V. J., Rogers, M. A., & Galey, G. (1987). Training pediatric residents in early intervention with handicapped children. Journal of Medical Education, 62(1), 47-52.
- Yogev, A., & Roditi, H. (1987). School counselors as gatekeepers: Guidance in poor versus affluent neighborhoods. Adolescence, 22(87), 625-639.
- Yost, E. B., & Corbishley, M. A. (1987). Career Counseling: A psychological approach. San Francisco: Jossey-Bass Publishers.
- Yuker, H. E. (1966). Disability and the law: Attitudes of police, lawyers, and mental health professionals. Rehabilitation Psychology, 31, 13-26.



- Yuker, H. E. (1988). Perceptions of severely and multiply disabled persons. Journal of the Multihandicapped Person, 1(1), 5-16.
- Yuker, H. E., & Block, J. R. (1986). Research with the Attitudes Toward Disabled Persons Scales (ATDP) 1960-1985. Center for the Study of Attitudes Toward Persons with Disabilities Monograph Series. Hempstead, NY: Hoffstra University.
- Zweig, C. (1983, May). The eleventh megatrend. Esquire, p. 138.