COUNSELORS' MULTICULTURAL COMPETENCIES: FROM GENDER AND ETHNICITY PERSPECTIVES

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Chapter One

Introduction

For more than two decades, multiculturalism in counseling psychology has been noted and emphasized in theory and research, as well as in training, supervision, and practice (Pedersen, 1991). Researchers, educators, and practitioners now recognize multicultural counseling as the "fourth force" in psychology (Pedersen, 1991). Indeed, multicultural counseling competencies are now emphasized in research, theory, training, and practice in contemporary counseling psychology (APA, 2002; 2003), which advocates multiculturalism to maximize counseling efficacy (Sue & Sue, 1999; 2003). This Introduction defines multiculturalism, then describes ethnicity and gender in multiculturalism, social desirability and multiculturalism, ethnic identity and color blind racial attitudes, and concludes with purposes of the study of the present dissertation. *Multiculturalism*

Multicultural counseling today emphasizes differences between clients and counselors due to ethnical backgrounds, gender, worldviews, national origins, social economic statuses, and sexual orientations (Sodowsky, Kuo-Jackson, Richardson, & Corey, 1998). According to the *Guidelines on multicultural education, training, research, practice, and organizational change for psychologists* (APA, 2003), multiculturalism is a recognition of "the broad scope of dimensions of race, ethnicity, language, sexual orientation, gender, age, disability, class status, education, religious/spiritual orientation, and other cultural dimensions" (p. 379).

In such a multicultural milieu, Sue and Sue (1999) listed six characteristics of

culturally competent counselors: (1) awareness of sociopolitical forces that have impacts on clients, (2) awareness that differences in culture, social class, and language can be barriers to counseling, (3) awareness of the impact of worldviews, (4) awareness of how expertness, trustworthiness, and lack of similarities can influence clients' receptivity of counseling, (5) knowledge and skills about appropriate communication styles among different cultural groups, and (6) awareness of counselors' racial biases. Multicultural counseling competence was defined as the combination of counselors' attitudes/beliefs, knowledge, and skills regarding experiences of racial and ethnic minorities and cultural differences from White-Americans (Sodowsky, Taffe, Gutkin, & Wise, 1994; Sue & Sue, 1999; 2003). To further refine the concepts of multicultural competencies, scholars have paid research attention to varied sub-categories: cross-cultural contacts, awareness of counselors' cultural backgrounds, worldviews, and biases (Ibrahim, 1985), awareness of racism related to mental health (Cross, 1978), knowledge of minority clients' life styles, coping behaviors, and family interaction (Cayleff, 1986), awareness of one's guilt and defensiveness (Helms, 1990), valuing and encouraging differences (Espin, 1987), flexibility as a key guideline to helping ethnical minority (Cayleff, 1986), and viewing clinical data from contextual perspectives (Hull, 1987).

Ethnicity and Gender in Multiculturalism

Current studies on multiculturalism are, however, typically limited to one specific aspect at a time. For example, the *Guidelines on multicultural education, training,* research, practice, and organizational change for psychologists (APA, 2003) define "multicultural...to refer to interactions between individuals from minority ethnic and racial groups in the United States and the dominant European-American culture" (p. 379).

We tend to focus on one specific aspect at a time, such as ethnic groups, sexual orientations, women, elders, or clients with disability.

Narrowly defining "multicultural" as exclusively interactions among interracial groups this way misses two points. One, this narrow specific approach misses opportunities to explicitly describe how the interaction of gender and ethnicity, for example, shapes individuals' respective contexts that influence individuals' behaviors and mental health. Two, as Bowman, Rasheed, Ferris, Thompson, McRae, and Weitzman (2001) pointed out, for female counselors of color, "claiming one identity is perceived as requiring denial of the other identity" (p. 796).

Although gender and ethnicity have been noted as two essentials in cultural diversity, multicultural research still needs to link gender issues with ethnicity (Hansen & Gaman, 1996). Moreover, gender is consistently treated only as an item in personal data, not as an important dimension in counseling or as an important construct with a potential to interacting with ethnicity. Although researchers in feminist psychology extensively discuss gender and its implications, they focus on gender as gender, not as a distinctive variable intimately related to racial/ethnical issue(s) (Bowman et al., 2001; Hansen & Gaman, 1996). As a result, North American gender issues scholars tend to take "white females" as the norm when studying women of other ethnicities.

Such a separatist mindset in counseling is unfortunate. Female and male counselors carry with them their gender-distinct framework and worldviews that underlie their counseling. Thus, gender must be recognized as a crucial factor impinging on every aspect of psychological research and practice, and gender should be considered as an essential aspect of culture.

Gender role perception was found to influence many aspects of daily life, as recognized by psychological diagnosis and treatment (Belitsky, Toner, Ali, Yu, Osborne, & deRooy, 1996), bias on employment selection (Tang, Au, Ngo, & Pun, 2002), and men's psychological distress (Good et al., 1995). Besides, research of gender roles has been extended to different ethnic groups (e.g., Chinese [Tan, Au, Ngo, & Pun 2002] and African American [McGhee, Johnson, & Liverpool, 2001]).

The Sex-Role Egalitarianism Scale (SRES; King & King, 1993), one of the gender role attitudes scales, is an instrument developed to measure the sex-role egalitarianism construct defined as "an attitude that causes one to respond to another individual independently of the other individual's sex. People who endorse sex-role egalitarianism believe that the sex of an individual should not influence the perception of an individual's abilities, obligations, and opportunities" (Beere et al., 1984, p. 564).

Good et al. (1995) investigated how gender role conflict influenced men's mental health. Severe psychological symptoms are related to "restriction-related male gender role conflict." In other words, by constricting men's emotions and thoughts learned from socialization, men tend to experience strain and distress. Good et al. (1995) also suggested that men in clinical settings with more *traditional* views of masculinity tend to have greater difficulties with intimacy.

The above research findings suggest that how individuals perceive traditional and nontraditional gender role may influence their well being, mental health, and biases in daily life. Although this dissertation study does not examine how counselors' gender role perception influences their mental health, gender stereotypes, and other biases, it may be reasonable to hypothesize a relationship between counselors' gender-related attitudes and

their perception of counseling efficacy.

Social Desirability and Multicultural Competencies

Social desirability is defined as the tendency for participants to respond in a self-enhancing manner (Paulhus & Reid, 1991), with a pattern of behaviors and/or thoughts they view as socially desirable rather than to exhibit/report actual thoughts, feelings, and/or behaviors (Vella-Brodrick & White, 1997). Social desirability could well be one of most common biases affecting research findings (Nederhof, 1985).

To reduce the potential bias of social desirability in evaluating multicultural counseling competencies, many scholars have examined how prone people are to provide socially desirable responses when examining multicultural counseling competencies (Pope-Davis & Dings, 1995). Sodowsky (1996) recommended inclusion of social desirability instrument (e.g., Balanced Inventory of Desirable Responding) when seeking to assess multicultural counseling competencies.

In addition, gender differences may also be related to social desirability (Nicotera, 1996). For example, Nicotera (1996) found that males scored higher than females on angry arguments, but the gender difference diminished when the variance attributed to social desirability was statistically removed. Hence, social desirability seemed to be significantly related to multicultural counseling competencies (Constantine & Ladany, 2000; Sodowsky et al., 1998; Worthington, Mobley, Franks, & Tan, 2000) and gender differences (Nicotera, 1996).

Multicultural Training and Multicultural Counseling Competencies

Scholars sensitive to multicultural issues have been advocating multicultural training at professional, organizational, and systemic levels (APA, 2003; Sue & Sue,

1999). Pope-Davis and Dings (1995) reported that multicultural training has been positively related to multicultural counseling awareness, knowledge, and skills. Ponterotto (1998) documented how multicultural training enhanced counselors' multicultural counseling competencies.

Ethnic Identity and Color Blind Racial Attitudes

Counselors' self-awareness of their ethnic identity and racial attitudes may correlate with their multicultural counseling competence. Self-awareness is one of the most important ingredients of counseling competence (Sue & Sue, 1999; 2003). Many researchers use ethnic identity as a frame to conceptualize the *client's* ethnic development. For instance, Helms (1994) argues that racial identity models could provide a framework to investigate the influence of racial factors on the career decision-making process. Richardson and Helms (1994) applied Black Racial Identity Attitude Scale to examine the therapeutic relationship between White therapists and Black clients.

Ethnic identity, measured by the Multigroup Ethnic Identity Measure (MEIM; Phinney, 1992), was found to be positively related with three ethnic groups' (European American, African American, Mexican American) psychological well-being such as coping ability, mastery, self-esteem and optimism, and negatively related to measures of loneliness and depression. Multigroup Ethnic Identity Measure scores also were moderately strong and positively correlated with salience (the importance of a person's own ethnic background in his or her life) across ethnic groups. This also suggests that the Multigroup Ethnic Identity Measure could be used as a global composite index of ethnic identity (Roberts, Phinney, Masse, Chen, Roberts, & Romero, 1999). Pope-Davis, Menefee, and Ottavi (1993) found that White racial identity attitudes influenced the

social dyad between faculty and students, especially when students were from non-White cultural or ethnic backgrounds.

"Color blind racial attitudes" are defined as denial or non-awareness of White privilege and institutional discrimination. Like the Multigroup Ethnic Identity Measure, Color-Blind Racial Attitudes Scale (CoBRAS; Neville et al., 2000) appeared to gain more scholars' attention. Although no previous research exists on the relation between ethnic identity and racial attitudes on multicultural counseling competence, it is hypothesized that awareness of one's ethnic identity and sensitivity to racial attitudes would positively relate to multicultural counseling competence.

Purposes of the Study

The purposes of this dissertation are as follows:

One, we must apply emic (culture-general) and etic (culture-specific) approaches to understand the interaction between culture and gender (Hansen & Gama, 1996). The two approaches should not be treated in rigid dichotomy but as two complementary aspects/viewpoints to enhance understanding cultural diversity (Pedersen, 1997). When a culture-general approach is limited in its explanation of cultural variances, the culture-specific approach can account for these limitations (Leong, 1997). And emic and etic approaches should be applied to understanding both ethnic and gender differences. Both men and women experience sadness (emic) but develop unique ways to deal with sadness (etic). It is likewise with people of different ethnicity. Both European Americans and Asians grieve when significant others die (emic), but they often deal with their grief in different manners (etic). For example, female Asians are likely to deal with grief differently from White females, and from males of whatever races and cultures.

Two, since gender should be included as an aspect in multicultural counseling (Hansen & Gama, 1996; Sue, Bingham, Porche-Burke, & Vasquez, 1999), therefore gender should also be included when in evaluating counselors' multicultural competencies.

Three, as the American population has grown increasingly diverse in recent decades, so too have clients in psychotherapy. Many research articles and books have been published that discuss counseling populations (e.g., Atkinson, 1983; Cheung & Snowden, 1990; Parham & Helms, 1981; Sue & Sue, 1999), and recruitment of students with different cultural/gender backgrounds has also diversified counselors' gender/cultural backgrounds (e.g., Rogers, Hoffman, & Wade, 1998).

Pope-Davis and Ottavi (1994) evaluated the multicultural competencies of counselors of four racial origins, White, African American, Asian American, and Hispanic. They found that Asian and Hispanic counselors have more multicultural knowledge than White counselors. African American, Asian American, and Hispanic counselors reported more competence in multicultural awareness and relationship than did White counselors. This research did not, however, discuss significant difference in other demographic variables, including gender. Female counselors were not found to have significant difference than male counselors in knowledge, skills, awareness, and relationship in multicultural competencies.

However, multicultural competencies should be evaluated within context, as Ridley (1985) identified that psychotherapy occurs in a cultural context. For example, female therapists may be more competent than male therapists in counseling women (Fitzgerald & Nutt, 1986). Asian clients may have less rate of premature termination

with Asian counselors than with European American counselors (Pedersen, 1997).

Hypotheses

Based on the above literature review and purposes, three research hypotheses are offered or advanced. One, after the contributions of multicultural social desirability to self-perceived multicultural counseling competencies is taken into account, respondents' race, gender, and multicultural training will individually and collectively significantly predict self-reported multicultural competencies (as measured by Multicultural Counseling Inventory and Multicultural Counseling Knowledge and Awareness Scale).

Two, after the potential contributions of social desirability, gender, race, and multicultural training experience are taken into account, counselors' ethnic identities will significantly predict self-reported multicultural competencies (as measured by Multicultural Counseling Inventory and Multicultural Counseling Knowledge and Awareness Scale).

Three, after the potential contributions of social desirability, gender, race, multicultural training experience, and counselors' ethnic identities are taken into account, gender role perception will significantly predict self-reported multicultural competencies (as measured by Multicultural Counseling Inventory and Multicultural Counseling Knowledge and Awareness Scale).

Four, after the potential contributions of social desirability, race, gender, multicultural training, ethnic identities, and gender role perceptions are taken into account, counselors' color-blind racial attitudes will significantly predict self-reported multicultural competencies (as measured by Multicultural Counseling Inventory and Multicultural Counseling Knowledge and Awareness Scale).

Chapter Two

Literature Review

This chapter reviews literature relevant to the research described in the present dissertation. The chapter has six sections: (1) multicultural counseling competence in general, (2) race and gender as related to multicultural counseling competence, (3) social desirability, (4) multicultural training as related to multicultural counseling competence, (5) ethnic identity, and (6) racial attitudes.

Multicultural Competence in General

As mentioned earlier in Chapter One, "multicultural counseling competence" is defined as a combination of counselors' attitudes/beliefs, knowledge, and skills regarding experiences of racial and ethnic minorities and cultural differences from White-Americans" (Sodowsky, Taffe, Gutkin, & Wise, 1994; Sue & Sue, 1999; 2002). Sue and Sue (1999) listed six characteristics of culturally competent counselors. Specifically, culturally competent counselors include awareness in six dimensions: (1) awareness of sociopolitical forces that have impacts on clients, (2) awareness that differences in culture, social class, and language can be barriers to counseling, (3) awareness of the impact of worldviews, (4) awareness how expertness, trustworthiness, and lack of similarities can influence clients' receptivity of counseling, (5) awareness that knowledge and skills are needed for appropriate communication that takes different styles to fit different cultural groups, and (6) awareness of counselors' racial biases.

Multicultural knowledge comprises a critical ingredient in multicultural competence (Sodowsky et al., 1994; 1998). Multicultural competence involves having

knowledge of how age, gender, race, ethnicity, national origin, religion, sexual orientation, disability, language, and socioeconomic status can influence clients' lives and counseling process. Multicultural knowledge crucially contributes to counseling competencies in the following three areas: (1) culture-specific diagnostic categories and assessment tools (Dana, 1993; Diagnostic and Statistical Manual of Mental Disorders [4th ed.; American Psychiatric Association, 2000]; APA, 1993), (2) help-seeking behavior, and (3) styles of interaction (Dana, 1993; Sue & Sue, 2003). Multicultural knowledge also means that counselors have knowledge about how family structures, gender roles, values, and worldviews differ across groups and how these affect personality formation, developmental outcomes, and manifestations of mental and physical illness (Draguns, 1997). Counselors with multicultural knowledge above described should also be aware of the extent of cultural and historical backgrounds of psychological theory and practice, as well as the effects of such issues as oppression, prejudice, discrimination, poverty, stereotyping, stigmatization, and marginalization (Sue & Sue, 1999; 2003).

Both awareness and knowledge competencies are two obviously essential prerequisites to developing adequate multicultural skills. These skills include three capacities: being able (a) to conduct culturally sensitive interviews and assessments (Cheung, Leong, Ben-Porath, 2003; Dana, 1993); (b) to form accurate, unbiased conceptualizations (APA, 1993); and (c) to plan and implement unbiased, effective treatment plans (APA, 1993; 2003).

Equipped with multicultural awareness, knowledge, and skills, counselors are professionals with self-awareness and capability to accurately evaluate the adequacy and

efficacy of one's skills and to take corrective actions as needed (Sue, Arredondo, & McDavis, 1992; Sue et al., 1998).

In addition to the awareness, knowledge, and skills relevant to multicultural competence, three other variables gained much attention: (a) social desirability (Sodowsky et al., 1998; Worthington, Mobley, Franks, & Tan, 2000), (b) multicultural training (Neville, Heppner, Louie, Brooks, Thompson, & Baker, 1996; Pope-Davis, Reynolds, Dings, & Nielson, 1995), and [c] counselors' race (Pope-Davis et al., 1995; Sodowsky et al., 1998).

The following paragraphs review literature in multicultural competence in its six variables: (1) race and gender, (2) social desirability, (3) multicultural training experience, (4) sex-role egalitarianism, (5) racial identity, and (6) racial attitudes.

Ethnicity and Gender in Multicultural Competence

Many studies found that counselors' race and ethnicity significantly contribute to multicultural competence (Pope-Davis et al., 1995; Sodowsky et al., 1998). Pope-Davis et al. (1995) found that ethnicity significantly contributes to the variance of Awareness and Relationship subscales in Multicultural Counseling Inventory, where minority counselor trainees were found to have higher level of self-perceived multicultural competence than majority counselor trainees. Sodowsky et al. (1998) found that Hispanic participants had higher scores in Multicultural Counseling Inventory full scores than Whites.

The current studies on multiculturalism are, however, confined to one specific aspect at a time. The studies focus on one specific aspect at a time, such as ethnic groups, sexual orientations, women, elders, or clients with disability. For example, the *Guidelines* on multicultural education, training, research, practice, and organizational change for

psychologists (APA, 2003) takes "multicultural...to refer to interactions between individuals from minority ethnic and racial groups in the United States and the dominant European-American culture" (p. 379).

Narrowly defining "multicultural" as interactions among interracial groups alone, misses two critical points. One, this specific approach misses opportunities to be explicitly aware and describe how the interaction of gender and ethnicity, for example, shapes individuals' respective contexts that influence individuals' behaviors and mental health. Two, as Bowman, Rasheed, Ferris, Thompson, McRae, and Weitzman (2001) pointed out, for female counselors of color "claiming one identity is perceived as requiring denial of the other identity" (p. 796). Further, the same issue applies to male counselors of color.

Counselors' gender as related to psychotherapy has received controversial findings. On the one hand, some researchers suggested gender did not significantly influence multicultural competence (e.g., Pope-Davis et al., 1995) or psychotherapy (e.g., Bowmen et al., 2001). On the other hand, other researchers emphasize the importance of gender in multicultural counseling (e.g., Hansen & Gaman, 1996).

Although gender and ethnicity have been noted as two essential ingredients of cultural diversity, multicultural research still needs to link gender issues with ethnicity (Hansen & Gaman, 1996). Moreover, gender is consistently treated only as an item in personal data, not as an important dimension in counseling or as an important construct with a potential of interacting with ethnicity. Although researchers of feminist psychology extensively discuss gender and its implications, many focus on gender as gender, not as a distinctive variable intimately related to racial and ethnic issue(s)

(Bowman et al, 2001; Hansen & Gaman, 1996). As a result, North American scholars on gender issues tend to assume "white females" as the norm when studying women of other ethnicities.

Gender and ethnicity tend to be treated <u>separately</u> in counseling psychology. Reid and Comas-Diaz (1990) observed, "gender research fails to include race/ethnic concerns...[and] studies of ethnic groups often ignore gender issues" (p. 397). Yet it is clear that personal identity consists of interactive involvements between gender and ethnicity/race, and a single construct of ethnicity *or* gender alone misses the whole picture of the individual's holistic dynamics of personal identity and/or behavior (Robinson, 1993). Gender and ethnicity are two characteristics that mutually interact to constitute a person and must be jointly taken into serious account in counseling interactions to be really relevant and effective.

A separatist mindset in counseling contributes to deleterious results. Limiting the meaning of "multicultural" (APA, 2002) to ethnicity alone, involving no gender, encourages counselors to apply knowledge and skills to treating women as if they were men, and vice versa. They do not realize that women and men often bring their own respective problems and frameworks into counseling that are peculiar to their gender distinct from the other. They have their own gender-distinctive mindsets, socialization processes, and identity developments, all of which can be properly described as "culturally distinct" (Collier, 1982; McNamara & Rickard, 1989) and can only be handled differently as they respectively differ. These distinctive features between females and males carry over to counselors themselves; female and male counselors carry with them their respective gender-specific frameworks and gender-distinct worldviews that

guide their counseling, albeit unaware to themselves.

Fortunately, perceptions of men and women's gender-distinct roles and the impacts of those perceptions have come to be receiving more attention recently.

Researchers found that masculine role conflicts may relate to mental health issues

(Blazina & Watkins, 1996; Good et al., 1995; Levant et al., 2003). Gender-role attitudes were found to be relevant to psychological diagnosis. Counselor's awareness of ethnic backgrounds and gender roles, has been found to be one of the critical components in multicultural competence (Pope-Davis & Ottavi, 1995; Sodowsky, 1996; Sodowsky et al., 1994; 1998; Sue & Sue, 1999; 2003). Accordingly, the study will investigate the relevant impacts of counselors' awareness and perceptions of their own ethnicity and gender on multicultural competence.

Social Desirability and Multicultural Competencies

Social desirability is defined as the tendency for participants to respond in a self-enhancing manner. People have varying degrees to which they display thoughts of trying to conform to socially desirable and acceptable ways, instead of honestly exhibiting and reporting their actual thoughts, feelings, and/or behaviors (Vella-Brodrick & White, 1997). Social desirability could well be one of the most common biases affecting research findings (Nederhof, 1985). To reduce the potential bias of social desirability in evaluating multicultural counseling competencies, many scholars have investigated how prone people are, when speaking, to provide socially desirable responses (Pope-Davis & Dings, 1995).

Sodowsky, Kuo-Jackson, Richardson, and Corey (1998) investigated the relationship between self-reported multicultural competence and multicultural social

desirability. They found that multicultural social desirability measured by Multicultural Social Desirability Scale was significantly related to Multicultural Counseling Inventory full scores and significantly contributed to the variance of multicultural competence.

Constantine and Ladany (2000) examined the relationship between social desirability and self-report multicultural competence measures. They found that social desirability was significantly and positively correlated with three of four multicultural competence measures. In their study, only the Multicultural Counseling Knowledge and Awareness Scale did not significantly correlate with social desirability. After controlling for social desirability, the multicultural competence measures were found not to significantly relate to multicultural competence conceptualization ability. Worthington, Mobley, Franks, and Tan (2000) found that social desirability was significantly and positively associated with Multicultural Counseling Inventory total scores and Multicultural Counseling Inventory Relationship subscale scores, but not with scores on the Cross-Cultural Counseling Inventory-Revised (CCCI-R, LaFromboise, Coleman, & Hernandez, 1991).

In addition, gender differences may also be related to social desirability (Nicotera, 1996). For example, Nicotera (1996) found that males scored higher than females on angry arguments, but that the gender difference diminished when the variance attributed to social desirability was statistically removed. In sum, social desirability seemed to be significantly related to multicultural counseling competencies (Constantine & Ladany, 2000; Sodowsky et al., 1998; Worthington, Mobley, Franks, & Tan, 2000) and gender differences (Nicotera, 1996).

Multicultural Training and Multicultural Counseling Competencies

Scholars sensitive to multicultural issues have been advocating multicultural training at professional, organizational, and systemic levels (APA, 2003; Sue & Sue, 1999; 2003). Multicultural training was emphasized by the American Psychological Association, national APA-accredited counseling psychology programs, and their faculties (Hills & Strozier, 1992). Preparing students both to counsel ethnically diverse clients and to conduct research on multicultural issues has gained attention of university professors and graduate students (Hills & Strozier, 1992; Jackson, 1999; Ponterotto, 1988; Ponterotto, Alexander, & Grieger, 1995). The attention originated in the "input from new and culturally diverse faculty members, the need to meet APA accreditation requirements, more attention to cross-cultural issues at conferences and in the literature, and crises in the schools" (Hills & Strozier, 1992, p. 45).

To officially underscore the importance of multicultural training, the American Psychological Association included the significance of multicultural training in (a) its *Ethical Principles of Psychologists and Code of Conduct* (APA, 2002), (b) *Guidelines on Multicultural Education, Training, Research, Practice, and Organizational Change for Psychologists* (APA, 2003), and (c) *Guidelines for Providers of Psychological Services to Ethnic, Linguistic, and Culturally Diverse Populations* (APA, 1993). Indeed, it is imperative that counselors receive adequate training to effectively address the mental health concerns in our pluralistic and culturally diverse society (Dana, 1994). Ethical codes (APA, 2002) and American Psychological Association (APA) accreditation criteria (Hills & Strozier, 1992) have been established to ensure that students in applied psychology receive competent and comprehensive training on multicultural research, theories, and practice with racial and ethnic minority populations (Hansen, Pepitone,

Arreola, Rockwell, & Greene, 2000).

Ponterotto (1988) documented how multicultural training enhanced counselors' multicultural counseling competencies. From the 1970s to 1980s, multicultural training tended to be descriptive and filled with detailed training interventions. These earlier efforts provided useful information on various applied multicultural training models. In recent research on multicultural training, the focus shifted to how multicultural training has an impact on multicultural competence (Constantine & Ladany, 2000; Pope-Davis, Reynolds, Dings, & Nielson,1995; Sodowsky et al., 1998). In addition to examining the connection between multicultural training and multicultural counseling competence, scholars also evaluated the influence of multicultural training on counselors' White racial identity attitudes (Neville, Heppner, Louie, Brooks, Thompson, & Baker, 1996).

Pope-Davis, Reynolds, Dings, and Nielson (1995) examined the impact of multicultural training among national clinical and counseling graduate students. More specifically, surveying 244 female and 100 male graduate students, Pope-Davis et al. (1995) sought identify how multicultural training contributed to multicultural counseling competence as measured by Multicultural Counseling Inventory for counseling psychology graduate students. They found that educational and clinical experiences were not associated with scores on the Relationship subscale. However, educational and clinical experiences, such as participation in multicultural workshop, practicum, and contact hours with racially or ethnically diverse clients, were not associated with higher scores on the Awareness subscale, and accounted for 19% of the variance. No other subscales were significantly predicted by these variables for counseling psychology students. For clinical psychology graduate students, multicultural courses were associated

with higher scores on the multicultural Knowledge and Awareness subscales of the Multicultural Counseling Inventory. Moreover, participation in multicultural courses and workshops were significantly and positively correlated with graduate students' multicultural Knowledge and Awareness (Pope-Davis et al., 1995).

Sodowsky et al. (1998) found that multicultural training (e.g., courses, research, workshops, and number of minority clients) significantly correlated with multicultural competence. The multicultural training also predicted multicultural competence as measured by Multicultural Counseling Inventory.

Neville et al. (1996) investigated the relationship among multicultural training, White racial identity attitudes, and therapy competence. They found students' participation in multicultural courses to be associated with "increasing multicultural competencies and ...promoting more sophisticated White racial identity attitudes" (p. 88). Additionally, the importance of incorporating different training experiences (e.g., guest speakers, videotapes, class discussions) also improved students' attention (Neville et al., 1996; Ponterotto, 1988). In fact, many scholars (e.g., Constantine & Ladany, 2000; Pope-Davis, Reynolds, Dings, & Nielson, 1995; Sodowsky et al., 1998) listed multicultural training experiences includes courses, workshops, research projects of increased multicultural competence.

Ethnic Identity

Ethnic identity has been used to investigate multicultural research (Ponterotto, Gretchen, Utsey, Stracuzzi, & Saya, Jr., 2003). Ethnic identity is a complex construct that reflects various aspects of identification with, and membership in, an ethnic group (Cuellar, Nyberg, Maldonado, & Roberts, 1997). More specifically, ethnic identity

involves self-identification as a group member, attitudes and evaluations in relation to one's group, attitudes about oneself as a group member, the extent of ethnic knowledge and commitment, and ethnic behaviors and practices (Phinney, 1992). Ethnic identity can change over time and vary across individuals. Moreover, it can be conceptualized on a continuum from low to high (Phinney, 1992).

Ethnic identity and related attitudes and behaviors influence the ways in which individuals conduct their lives, interact with people from other groups, and view society as a whole (Phinney, 1996). Because of the importance of ethnic identity, various models have been created on ethnic identity development and formation (e.g., Cross, 1971; Helms, 1990; Phinney, 1996). Most models concentrate on the ethnic identity development of racial minorities, although Helms has recently focused on White racial identity development. Ethnic identity facilitates individuals to progress from an unexamined view of their ethnicity to a crisis or exploration phase of their ethnicity, and ultimately to a secure sense of their ethnicity (Phinney, 1996).

Based on Black racial identity development, Cross (1971) developed one of the earliest models of ethnic identity; his model (1971). According to Cross, African Americans evolve from having a self-view of being Black as degraded to a self-view where they are secure with being Black. The model includes four distinct stages of progress: preencounter, encounter, immersion—mersion, and internalization. The model has been tested and modified over time to further refine the stages, and a more complex view of the factors influencing African American identity formation has emerged. For example, the formation of one's self-concept seems to be independently influenced by both personal identity and ethnic identity, and these two factors are not necessarily highly

interrelated (Cross, 1991). In addition, depending on one's stage of ethnic identity development, the constructs examined in this investigation (i.e., ethnic identity, selfesteem, and ethnocentrism) may or may not be interrelated (Vandiver, Fhagen-Smith, Cokley, Cross, & Worrell, 2001). The Cross model of racial identity development focuses specifically on the African American experience, as most ethnic identity models do with specific racial experiences. Phinney (1996), however, has proposed a more general model of ethnic identity development that can be applied to all ethnic minorities. In the initial stage, ethnicity is unexamined and is not salient for an individual, typically a child or young adolescent. In this stage, they generally accept with little scrutiny values and attitudes from the environment. The second stage emphasizes search or immersion in which individuals become interested in knowing more about their ethnic group, which may include a desire to understand the history, traditions, and current situation of their group. Exploring the history of one's group may reveal instances of racism and discrimination by outsiders and may include anger at historical or contemporary injustices. In the final stage, ethnic minority individuals would ideally have developed a secure, positive sense of themselves in their ethnic group and an acceptance of other groups.

Helms (1990) model of White identity development differs from models created on ethnic minorities. According to Helms, Whites are generally unaware of implications of being White, and so initially give little or no thought to issues of ethnicity. They may assume that the concept of "ethnicity" pertains to ethnic minorities alone. With experience, the presumed advantages and inequalities of being White over minorities may be recognized. Realizing these differences in experience may lead to discomfort, guilt,

and denial. Some Whites remain at this stage, whereas others reexamine their attitudes and realize their potential contributions to racism. Ideally, the individual would finally gain a positive sense of being White, recognize the need to confront racism and oppression, and come to value individual differences, and relate to other ethnic minorities positively, more open in dealing with other groups.

Clearly, ethnic identity has become an increasingly important topic for multicultural research (Ponterotto, Gretchen, Utsey, Stracuzzi, & Saya, Jr., 2003) in relation to understanding mental health and self-esteem (Negy, Shreve, Jensen, & Uddin, 2003) and therapists' White racial identity attitudes (Pope-Davis, Menefee, & Ottavi, 1993; Ottavi, Pope-Davis, & Dings, 1994). In addition, counselors and graduate students in the mental health profession have become racially diversified. Minority graduate students now make 30% of total graduate students in the mental health profession. An instrument, such as Phinney's (1992) Multigroup Ethnic Identity Measure, applicable to different racial backgrounds, would help researchers to understand counselors and counselor trainees' awareness of racial identity. After reviewing Cross' (1971) minority development model, Helms' (1990) White identity model, and Phinney's (1992) multigroup ethnic identity model, the study of the present dissertation chose to adopt Phinney's (1992) model as the most appropriate for ethical diverse participants.

In last decade, the issue of prejudice has gained many scholars' attention (Rudman, Ashmore, & Gary, 2001). One component in multicultural competence is to have knowledge of the history of oppression, prejudice, and discrimination in the United

Color Blind Racial Attitudes

States and of their psychological sequences (Sue & Sue, 2003). Having knowledge of

sociopolitical influences such as discrimination is critical for counselors to conceptualize clients' issues in line with clients' historical, sociopolitical, and socioeconomic contexts.

Researchers, in addition, have related racial attitudes to racial prejudice. Colorblind racial attitudes refers to the belief that race should not and does not matter (Neville et al., 2000). Carr (1997) investigated relations between color-blind racial attitudes and racism among college students. Other researchers measured color-blind racial attitudes to understand clients' mental health issues. There is currently no research, however, that applies color-blind racial attitudes to evaluate counselors' multicultural counseling competence.

Hypotheses

Based on the above literature review and purposes, three research hypotheses are advanced. One, after the contribution of multicultural social desirability to self-perceived multicultural counseling competencies is taken into account, respondents' race, gender, and multicultural training will individually and collectively significantly predict self-reported multicultural competencies (as measured by Multicultural Counseling Inventory and Multicultural Counseling Knowledge and Awareness Scale).

Two, after the potential contribution of social desirability, gender, race, and multicultural training experience are taken into account, counselors' ethnic identities will significantly predict self-reported multicultural competencies (as measured by Multicultural Counseling Inventory and Multicultural Counseling Knowledge and Awareness Scale).

Three, after the potential contributions of social desirability, gender, race, multicultural training experience, and counselors' ethnic identities are taken into account,

gender role perceptions will significantly predict self-reported multicultural competencies (as measured by Multicultural Counseling Inventory and Multicultural Counseling Knowledge and Awareness Scale).

Four, after the potential contribution of social desirability, race, gender, multicultural training, ethnic identities, and gender role perceptions are taken into account, counselors' color-blind racial attitudes will significantly predict self-reported multicultural competencies (as measured by Multicultural Counseling Inventory and Multicultural Counseling Knowledge and Awareness Scale).

Chapter Three

Methods

Subjects

Potential participants were (a) selected from listservs provided by the American Counseling Association, Divisions 12 (Society of Clinical Psychology), 17 (Society of Counseling Psychology), 35 (Society for the Psychology of Women), 44 (Society for the Psychological Study of Lesbian, Gay, and Bisexual Issues), 45 (Society for the Psychological Study of Ethnic Minority Issues), 51 (Society for the Psychological Study of Men and Masculinity), 52 (International Psychology), American Psychological Association Graduate Students, and (b) identified through personal contacts of faculty and students in doctoral programs in counselor education and counseling psychology. All the listservs and personal contacts received web-survey announcements, and participants responded to the survey through the Internet.

The 338 participants were between 20 and 68 years of age (M = 30.96, SD = 9.37) with 279 female and 54 male participants. Five participants did not indicate their gender. The majority (68%) of the sample was White/European American (n = 231); 32% were racial/ethnic minorities: Asian American/Pacific Islander (n = 26), African American or Black (n = 20), Hispanic/Latino(a) (n = 20), and others (Native American and biracial/multiethnic) (n = 40). One participant (.3%) did not identify his or her racial/ethnic background.

Most participants had multicultural training experiences through courses, research, workshops, and sessions with both White and minority clients. On multicultural

courses, 327 participants have taken 0 to 20 such courses with mean 2.06 and median $2.00 \ (SD = 2.02)$, while 11 (3%) participants did not provide the number of multicultural courses. On multicultural research, 326 participants were involved in 0 to 100 of such research projects, with a mean of 2.80 and median of 1.00 research projects (SD = 6.39). On multicultural workshops, 326 participants reported having had 0 to 100 workshops, with a mean of 5.52 and median of 2.00 workshops (SD = 13.00). Twelve participants did not indicate the number of workshops they had attended.

Multicultural experiences also include the sessions in which counselors work with clients from diverse cultural backgrounds. On working with White clients, 297 participants reported to have had 0 to 15,000 sessions, with a mean of 328.74 and median of 52.50 (SD = 1,254.39). Forty-one (12.1%) participants did not answer this question. On working with African American clients, 296 participants reported having had 0 to 2,500 sessions, with a mean of 53.85 and median of 10.00 (SD = 183.34). Forty-two (12.4%) participants did not answer this question. On Hispanic clients, 296 participants had 0 to 4,000 sessions, with a mean of 57.30 and median of 4.00 (SD = 292.50). Forty-two (12.4%) participants did not answer this question. On working with Asian clients, 295 participants had 0 to 2,000 sessions, with a mean of 34.56 and median of 2.50 sessions (SD = 169.23). Forty-three (12.7%) participants did not answer the question. On Native American, biracial, and other clients, 293 participants had 0 to 500 sessions, with a mean of 8.54 and median of 0.00 sessions (SD = 41.89). Forty-five (13.3%) participants did not answer this question.

Instruments

This study was conducted using the following seven instruments: Multicultural

Counseling Inventory, Multicultural Counseling Knowledge and Awareness Scale, Color-Blind Racial Attitudes Scale, Multigroup Ethnic Identity Measure, Balanced Inventory of Desirable Responding, Sex-Role Egalitarianism Scale, and Demographic Questionnaire. Their descriptions follow.

Multicultural Counseling Inventory (MCI). Sodowsky, Taffe, Gutkin, and Wise (1994) developed the MCI to measure respondents' self-reported multicultural counseling competencies. The MCI consists of 40 items that assess self-reported multicultural counseling competencies on a 4-point Likert scale ranging from 1 to 4 (1 = very inaccurate, 2 = inaccurate, 3 = accurate, and 4 = very accurate). Scale scores are calculated by adding the items in each subscale, with higher scores indicating greater self-assessed competence in respective areas. The MCI has four subscales as follows:

The Skills subscale consists of 11 items that measure general counseling skills and specific multicultural counseling skills. Sample items include "When working with all clients, I am able to be concise when reflecting, clarifying, and probing" and "When working with minority clients, I monitor and correct my defensiveness." The mean coefficient alpha for the Skills subscale is .80 (Ottavi et al., 1994; Pope-Davis & Dings, 1994; Pope-Davis & Ottavi, 1994; Pope-Davis et al., 1993; 1994; 1995; Sodowsky et al., 1994, 1998).

The Knowledge subscale consists of 11 items that measure treatment planning, case conceptualization, and multicultural counseling research. Sample items include "When working with minority clients, I keep in mind research findings about minority clients' preference in counseling" and "When working with minority clients, I apply the sociopolitical history of the clients' respective groups to understand them better." The

mean coefficient alpha for this Knowledge subscale is .77 (Ottavi et al., 1994; Pope-Davis & Dings, 1994; Pope-Davis & Ottavi, 1994; Pope-Davis et al., 1993; 1994; 1995; Sodowsky et al., 1994; 1998).

The Awareness subscale consists of 10 items that measure multicultural sensitivity, interactions, and advocacy in general life experiences, and professional life. Sample items include "When working with international students or immigrants, I understand the importance of the legalities of visa, passport, green card and naturalization." The mean coefficient alpha for this Awareness subscale is .78 (Ottavi et al., 1994; Pope-Davis & Dings, 1994; Pope-Davis & Ottavi, 1994; Pope-Davis et al., 1993; 1994; 1995; Sodowsky et al., 1994; 1998).

The Relationships subscale consists of 8 items that measure counselors' comfort levels of interaction with minority clients' worldviews. Sample items include "When working with minority clients, I am confident that my conceptualization of individual problems does not consist of stereotypes and biases." The mean coefficient alpha for this Relationship subscale is .68 (Ottavi et al., 1994; Pope-Davis & Dings, 1994; Pope-Davis & Ottavi, 1994; Pope-Davis et al., 1993; 1994; 1995; Sodowsky et al., 1994; 1998).

Across several studies, the MCI total scale had a mean coefficient alpha of .87 (Sodowsky et al., 1994; 1998). The mean correlations of subscales to full scale are .34 for Multicultural Skills, .30 for Multicultural Awareness, .27 for Multicultural Relationships, and .32 for Multicultural Knowledge (Pope-Davis & Dings, 1994; Sodowsky et al, 1994). The construct validity of MCI is supported by expert raters' accuracy of classifying items into appropriate subscale categories. Criterion-related validity is supported by findings that individuals with multicultural training or with greater cross-cultural experiences

obtained higher scores on the MCI (Ponterotto & Alexander, 1996).

Multicultural Counseling Knowledge and Awareness Scale (MCKAS; Ponterotto, Gretchen, Utsey, Rieger, & Austin, 2002). The MCKAS is a revision of Multicultural Counseling Awareness Scale (Ponterotto et al., 1996), and consists of 32 items designed to assess self-reported multicultural counseling knowledge and awareness. The MCKAS uses a 7-point Likert scale ranging from 1 (not at al true) to 7 (totally true), with higher scores indicating greater perceived knowledge and awareness of multicultural counseling issues. Scale scores are calculated by adding items in each subscale, with higher scores indicating greater self-assessed competence in respective areas. The MCKAS is a two-factor instrument with 20 knowledge items and 12 awareness items extracted from the 45-item MCAS. Participants respond to a two-part scale—Knowledge scale and Awareness scale.

The Knowledge subscale consists of 20 items that measure perceived knowledge of multicultural counseling issues. Sample items are "I check up on my minority/cultural counseling skills by monitoring my functioning—via consultation, supervision, and continuing education," and "I am aware some research indicates that minority clients receive 'less preferred' forms of counseling treatment than majority clients." The coefficient alpha for Knowledge subscale was .85.

The Awareness subscale consists of 12 items that measure the perceived awareness of multicultural counseling issues. Sample items are "I believe all clients should maintain direct eye contact during counseling," and "I think that clients who do not discuss intimate aspects of their lives are being resistant and defensive." The coefficient alpha for Awareness subscale was .85.

Ponterotto et al. (2002) reported that the inter-correlation between the two subscales was .04. The convergent, criterion-related, and discriminant validity of MCKAS were examined by an analysis of the correlation of MCI and MEIM. The MCKAS Knowledge subscale displayed significant correlations with the MCI Knowledge (.49), Skill (.43), and Awareness (.44) subscales. The MCKAS Awareness subscale correlated highly and significantly with the MCI Counseling Relationship subscale (.74). The MCKAS Knowledge subscale correlated significantly and moderately (.31) with MEIM Ethnicity Identity subscale.

Color-Blind Racial Attitudes Scale (CoBRAS; Neville, Lilly, Duran, Lee, & Browne, 2000). The CoBRAS is designed to assess "cognitive dimensions of color-blind racial attitudes" (Nevelle et al., p. 61). It consists of 20 items that assess color-blind racial attitudes using a 6-point Likert scale ranging from 1 (strongly disagree) to 6 (strongly agree). Total scores on each scale can range from 20 to 120, with higher scores indicating greater levels of blindness, denial, or unawareness. The CoBRAS includes three factors: Racial Privilege, Institutional Discrimination, and Blatant Racial Issues.

The Racial Privilege subscale consists of 7 items that measure blindness to the existence of White privilege. Scores for Racial Privilege range from 7 to 42, with higher scores indicating greater levels of unawareness of racial privilege. Samples of these items are "Everyone who works hard, no matter what race they are, has an equal chance to become rich," and "White people in the U.S. have certain advantages because of the color of their skin." Neville et al. (2000) reported that the coefficient alpha for Racial Privilege was .83.

The Institutional Discrimination subscale consists of 7 items that measure limited

awareness of the implications of institutional forms of racial discrimination and exclusion. Scores for Racial Privilege range from 7 to 42, with higher scores indicating greater levels of unawareness of institutional discrimination. Sample items include "It is important that people begin to think of themselves as American and not African American, Mexican American or Italian American," and "Due to racial discrimination, programs such as affirmative action are necessary to help create equality." Neville et al. (2000) reported that the coefficient alpha for Institutional Discrimination was .81.

The Blatant Racial Issues subscale consists of 6 items that measure unawareness of general and pervasive racial discrimination. Scores for Blatant Racial Issues range from 6 to 36, with high scores indicating greater levels of unawareness of blatant racial issues. Sample items include "Racism is a major problem in the U.S.," and "Racism may have been a problem in the past, but it is not an important problem today." The coefficient alpha for Blatant Racial Issues subscale was .76 (Neville et al., 2000).

Neville et al. (2000) reported that the coefficient alpha for the total scale was .91. Interrelations among the three factors ranged from .42 to .59. Test-retest reliability over a two-week period was .80 for the Racial Privilege subscale, .80 for Institutional Discrimination subscale, .34 for Blatant Racial Issues subscale, and .68 for CoBRAS total. The concurrent validity of the CoBRAS is supported by its significant correlation with Global Belief in a Just World and Multidimensional Belief in a Just World—Sociopolitical subscale. The criterion validity is also supported by findings that racial groups (i.e., White, Black, and Latino) had different mean scores on three CoBRAS factors.

The Multigroup Ethnic Identity Measure (MEIM; Phinney, 1992). MEIM is a 12-

item scale designed to measure ethnic identity awareness using a 5-point Likert scale ranging from 1 (strongly disagree) to 5 (strongly agree). Total scores of MEIM can range from 12 to 70, with higher scores indicating greater levels of identity awareness and commitment. The MEIM consists of two components: ethnic identity search and affirmation, belonging, and commitment (Phinney, 1992). Although the MEIM has two components—ethnic identity search and affirmation—Phinney (1992) suggested that its preferred scoring is to use the mean of the total item scores; that is, the mean of the 12 items for an overall score.

The Ethnic Identity Search subscale consists of 5 items to measure the developmental and cognitive component in ethnic identity awareness. Sample items include "I have spent time trying to find out more and more about my ethnic group, such as its history, traditions, and customs," and "I think a lot about how my life will be affected by my ethnic group membership." The Affirmation, Belonging, and Commitment subscale consists of 7 items to measure the affective component in ethnic identity awareness. Sample items include "I have a clear sense of my ethnic background and what it means to me" and "I am happy that I am a member of the group to which I belong." The MEIM has a reliability of .81 for the total scale (12 items) among high school students, and .90 among college students (Phinney, 1992). In the high school population, a two-factor structure was most interpretable, with Factor 1 labeled Ethnic Identity (20% of variance) and Factor 2 labeled Belonging and Commitment (9% of variance). Results of the factor analysis for the college sample was similar, with Factor 1 accounting for 31% of the variance and the Factor 2 accounting for additional 11% of variance.

Balanced Inventory of Desirable Responding (BIDR; Paulhus, 1991). The BIDR is designed to measure two constructs: self-deceptive positive enhancement and impression management. The Self-deceptive Positive Enhancement subscale consists of 20 items designed to tap the tendency to give self-reports that are honest but positively biased; the Impression Management subscale consists of 20 items designed to tap to deliberate self-presentation on audience. The BIDR items use a 7-point Likert scale ranging from 1 (not true) to 7 (very true), with a total range 0 to 20, with higher scores indicating greater levels of providing positively biased self-reports and impression management.

Sample items of the Self-deceptive Enhancement (SDE) subscale include "My first impression of people usually turn out to be right," "It would be hard for me to break down any of my bad habits," and "I don't care to know what other people really think of me." Internal consistency of SDE is supported by a coefficient alpha of .69. Temporal stability over a 4-week period is satisfactory (.81), and the construct validity of SDE has been supportive in many studies (Winters & Neale, 1985). Sample items the Impression Management (IM) subscale include "I don't gossip about other people's business" (reverse scored), "I have some pretty awful habits," and "I don't take things that don't belong to me." Coefficient alpha for IM was .69, and validity of IM scores is supported by significantly correlation with measures of psychological distress and mental health (Linden, Paulhus, & Dobson, 1986). Paulhus (1984) reported that IM appeared at the center of a cluster of measures of impression management including MMPI Lie scale, Wiggins Social Desirability scale, and Positive Malingering scale in factor analytic studies.

Paulhus (1994) authorized two methods of scoring BIDR, namely, continuous scoring (e.g., all answers on the continuous answer scale are counted) and dichotomous scoring (e.g., only extreme answers are counted). In contrast, Stober, Dette, and Musch (2002) suggest that scores from continuous scoring had higher coefficient alphas than those from dichotomous scoring.

The Sex-Role Egalitarianism Scale (SRES; King & King, 1993). The SRES measures attitudes toward equality between women and men. It contains items that require judgments about both women and men who assume nontraditional roles for their respective genders. For example, statements such as "Women should have as much right as men to go to a bar alone" and "It is wrong for a man to enter a traditionally female career" are presented. The SRES differs from other measures of gender-role attitudes in that it includes not only judgments of women in traditional and nontraditional role behaviors but also of men in their role behaviors. There are four forms of the SRES, two 95-item alternate long forms (B and K) and two 25-item alternate short forms (BB and KK). The present study used the BB form because it can be completed in an average three to four minutes. Within each form there is an equal distribution of items reflecting five domains of adult living (marital roles; parental roles; employment roles; social, interpersonal, heterosexual roles; and educational roles). Items are scored on a 5-point Likert scale ranging from "strongly agree" to "strongly disagree." For each item the score of 5 represents the most egalitarian position, and the score of 1 represents the least egalitarian position. Total scores can range from 25 to 125, with higher scores indicating greater levels of sex role egalitarian beliefs. There are no set "cut-off" scores that would classify an individual as "traditional" or "egalitarian." Internal consistency reliability

estimates have been in the low .90s, and test–retest coefficients of .88 over a 2-week period have been reported (King & King, 1993). Support for the validity of SRES is provided by the correlations with other measures designed to detect individual differences along with the traditional/nontraditional sex-role attitudinal dimension, and it is not correlated with scales measuring social desirability (King & King, 1993).

Demographic Questionnaire. By answering this questionnaire, participants provided information about their ethnicity, generation of immigration into USA, gender, age, multicultural training (e.g., number of multicultural courses taken, multicultural research activities engaged, and workshops participated/conducted) (Sodowsky et al., 1998), and the number of sessions they conducted with White, African American, Hispanic, and Asian clients.

Procedure

An e-mail message announced the study to the following organization in their electronic mailing lists (i.e., an e-mail address that an organization uses to communicate to all students and colleagues) and sever members of practice-oriented divisions of the APA. These Divisions are Divisions 12 (Society of Clinical Psychology), 17 (Society of Counseling Psychology), 35 (Society for the Psychology of Women), 44 (Society for the Psychological Study of Lesbian, Gay, and Bisexual Issues), 45 (Society for the Psychological Study of Ethnic Minority Issues), 51 (Society for the Psychological Study of Men and Masculinity), 52 (International Psychology), and American Psychological Association Graduate Students.

The announcement message requested voluntary participation from a national sample of mental health practitioners and graduate psychology students to complete the

web-survey. The message described the present dissertation study as an investigation of counselors' multicultural competence. Individuals interested in participating were directed to an address on the World Wide Web (WWW) where they could access the online survey. Participants were first directed to a Web page containing an informed consent form that explained that transmission of survey data via the Internet is not completely secure, and therefore that although all standard precautions were taken, complete security of the data could not be guaranteed. Participants were also told, however, that security was guaranteed once the researcher had received the data. Participants indicated their agreement by clicking on text reading "Agree."

Those who agreed with the informed consent statement were then directed to the survey page that included Multicultural Counseling Inventory, Multicultural Counseling Knowledge and Awareness Scale, Color-Blind Racial Attitudes Scale, Multigroup Ethnic Identity Measure, Balanced Inventory of Desirable Responding, Sex-Role Egalitarianism Scale and a demographic information form. No identifying information was collected, but participants were given the option of including their e-mail address if they wished to receive a summary of the research findings and enter a lottery to win \$100. They also were given the researcher's contact information.

A total of 402 completed surveys were received. Twenty-three of these completed surveys were submitted more than once by three participants; one participant submitted 13 times, another submitted 6 times, and yet another submitted 4 times. A potential characteristic of Internet-based collected data is the possibility that a participant can submit data more than once. As recommended by Schmidt (1997), duplicate surveys can be identified by the date, time, and the origin of submissions. Only one version of

duplicate surveys remained in the data. For example, of one participant's 13 submissions, 12 submissions were deleted; of a participant's 6 submissions, 5 submissions were deleted; and of a participant's 4 submissions, 3 submissions were deleted. Kraut, Olson, Banaji, Bruckman, Cohen, and Couper (2004) noted that Internet-based survey methodologies are susceptible to respondents intentionally supplying incorrect data. Inattentive replies by respondents may also result from an enormous variety in their websurvey environments, from private to public.

Three strategies were used to reduce chances of incorrect collection of data. First, announcing the research through APA division listservs, professional programs, or known colleagues reduced the likelihood of malicious responses. Second, requiring the respondents to click their agreement in the informed consent reduced the frequency of random surfing by those not interested in completing the survey. Third, an inclusion of two validity check items in the survey served to identify inattentive or random responses. The two validity check items stated identically, "Please do not respond to this item." Data from 6 participants who did respond to one or both of these items were deleted from analysis.

Such an Internet-based research has several strengths. First, the research can collect nationwide samples which are potentially more diverse (Mohr & Rochlen, 1999) than samples which are restricted in their means of data acquisition. Internet samples are thus more representative than traditional samples with respect to gender, socioeconomic status, geographic location, and age, and are about as representative as traditional samples with respect to race (Gosling, Vazire, Srivastava, & John, 2004).

Analysis of Data

The study examined the main effects of gender and race on multicultural competence, as measured by MCKAS and MCI via Analysis of Variance (ANOVA). If no significant differences of gender and race on MCKAS and MCI were found, gender and race would not be included in the subsequent multiple regression.

The present dissertation applied a forced-entry method of multiple regression to analyze data. Thus, two separate hierarchical multiple regression analyses were conducted to predict MCI and MCKAS total scale scores.

In the first step, the Social Desirability (measured by BIDR) was entered. In the second step, multicultural training experience (e.g., courses, workshop, research, and the number of sessions working with White and minority clients) was entered. In the third step, the attitude toward the equality of men and women (measured by SRES) was entered. In the fourth step, ethnicity identity (measured by MEIM) was entered. In the fifth step, color-blind racial attitudes (measured by CoBRAS) will be entered.

Chapter Four

Results

Preliminary Analyses

In order to ensure the appropriateness of data for analysis, the author examined missing data, validity items, multicollinearity, and normality. The percentage of missing data on each variable was less than 3%, lower than 5% or 10% suggested as acceptable by Cohen and Cohen (1983). Thus, due to the low percentage of missing data in this study, it was sensible to replace them with sample means (Kline, 1998; Tabachnic & Fidell, 2001). Skewness of each variable was between 2 and –2, and the absolute value of kurtosis for each variable was under 10 (Kline, 1998; Tabachnic & Fidell, 2001). The statistics of skewness and kurtosis of all variables in this study thus indicated reasonably normal distribution of data.

Table 1 shows the means and standard variances of respondents' MCI and MCKAS total scores and subscales. Analysis of Variance (ANOVA) indicated that male and female counselors had no significant differences on MCKAS, F(1, 337) = 2.16, p = .14; and no significant differences between male and female counselors on MCI, F(1, 337) = .05, p = .82. Additional ANOVAs reveal no significant differences among five counselor racial groups—Asian American, African American, Hispanic/Latino, White, and others (e.g., Native American, biracial/multiracial) on MCKAS, F(5, 333) = 1.41, p = .22, or MCI, F(5, 333) = .65, p = .66. Counselors' multicultural training experiences (e.g., multicultural courses, workshops, research, and sessions with White and minority clients) was examined for possible use as covariates in analysis. A variable was deemed

to be a covariate if it had a significant correlation with an independent variable. As a result, multicultural courses, workshops, research, and sessions with White and minority clients were used as covariates.

The results of multivariate analysis of covariance on MCKAS and MCI indicated no significant differences of gender and races after controlling the covariates. For the dependent variable MCKAS, male and female counselors did not have significant differences after controlling multicultural training experience, F(1, 337) = 1.38, p = .24.

Table 1

Means and Standard Deviations of MCKAS and MCI by Counselor Gender and Race

	Male						<u>Female</u>												
	<u>Asian</u>	<u>B1</u>	ack	<u>His</u>	panic	Wh	<u>iite</u>	<u>Oth</u>	<u>ers</u>	<u>Asi</u>	<u>an</u>	Bla	<u>.ck</u>	His	<u>panic</u>	Wh	<u>ite</u>	<u>Oth</u>	<u>iers</u>
	M SE) M	SD	M	SD	M	SD	M	SD	M	SD	M	SD	M	SD	M	SD	M	SD
MCKAS	6.03 .56	6.2	7 .41	5.54	.45	5.48	.69	5.57	.53	5.79	.55	5.93	.50	6.14	.46	5.66	.68	5.92	.69
Awareness	5.891.01	5.9	4 .64	5.48	.60	5.58	.71	5.76	.61	5.80	.82	5.74	.70	6.11	.59	5.94	.74	6.07	.77
Knowledge	6.12 .30	6.4	8 .57	5.60	.58	5.37	.80	5.46	.69	5.80	.72	6.02	.65	6.15	.62	5.49	.80	5.82	.81
MCI	3.12 .15	3.3	8 .37	3.15	.28	3.13	.46	3.13	.38	3.24	.30	3.12	.27	3.27	.29	3.09	.29	3.26	.32
General	3.15 .10	3.3	6 .51	3.18	.46	3.13	.38	3.24	.46	3.20	.43	3.14	.47	3.19	.63	3.15	.42	3.24	.46
Awareness	3.40 .44	3.5	0 .42	3.29	.52	3.98	.65	3.11	.57	3.24	.45	3.00	.42	3.45	.45	3.04	.50	3.25	.50
Relation	3.17 .31	3.1	3 .51	2.92	.30	2.93	.28	3.10	.47	2.93	.53	3.09	.27	3.07	.35	2.92	.43	3.19	.32
Knowledge	3.27 .24	3.4	8 .41	3.19	.22	3.13	.37	3.15	.36	3.44	.34	3.24	.46	3.35	.34	3.22	.38	3.36	.38

Note. MCKAS = Multicultural Counseling Knowledge and Awareness Scale; MCKAS/Awareness = Awareness subscale in Multicultural Counseling Knowledge and Awareness Scale; MCKAS/Knowledge = Knowledge subscale in Multicultural Counseling Knowledge and Awareness Scale; MCI = Multicultural Counseling Inventory; MCI/General = General Skills subscale in Multicultural Counseling Inventory; MCI/Aware = Awareness subscale in Multicultural Counseling Inventory; MCI/Relation = Counseling/relationship subscale in Multicultural Counseling Inventory; MCI/Knowledge = Knowledge subscale in Multicultural Counseling Inventory.

Five racial groups of counselors did not have significant differences on MCKAS after controlling multicultural training experience, F(5, 333) = 1.68, p = .14.

The gender X race did not indicate a significant differences on MCKAS, F (5, 333) = 1.81, p = .11. For the MCI, male counselors and female did not have a significant difference on MCI after controlling multicultural training experiences, F (1, 337) = .13, p = .72. Counselors from five racial groups, after controlling multicultural training experience, did not have a significant difference on MCI, F (5, 337) = 1.65, p = .15. The gender X race, after controlling multicultural training experience, did not have a significant difference on MCI, F (5, 337) = 1.01, p = .41.

Main Analyses

The preliminary analyses revealed that there was no significant effect of gender and race on MCKAS or MCI, before and after controlling the multicultural training experience. Thus, the subsequent hierarchical multiple regression did not include counselors' gender and race. Table 2 showed the correlations among variables. First, a hierarchical multiple regression analysis was conducted by using the MCKAS as the criterion variable. Secondly, a hierarchical multiple regression analysis was conducted using the MCI as the criterion variable.

The same order of variable entry was used in both regression analyses.

Specifically, in the first step, social desirability, measured by BIDR, was entered. In the second step, multicultural training experiences (e.g., courses, workshop, and research), and the number of sessions working with clients, were entered. In the third step, attitudes toward the equality of men and women, measured by SRES, was entered. In the fourth

Table 2

Correlations among MCKAS, MCI, and Predictable Variables

Variable	1	2	3	4	5	6	7	8	9	10	11	12	13	14	М	SD	Range
1. MCKAS		.52**	:04	.34*	*58**	.34**	.19**	* .20**	* .25**	.09	.11	.03	.03	.11*	5.71	.66	3.94- 7.00
2. MCI			.23**	.36*	*26**	.17**	.13*	.24**	.23**	.13*	.10	.05	.03	.13*	3.13	.30	2.17- 3.83
3. BIRD				.08	26**	12*	01	01	04	.02	.04	.00	05	.02	3.75	.67	1.83- 6.38
4. MEIM					19**	.01	.01	.11*	.16**	.05	.14**	.08	.09	.10	3.74	.72	1.25- 5.08
5. CoBRAS						38**	13*	20**	·29**	12*	02	.03	02	04	2.47	.69	1.25- 4.55
6. SRES							.03	01	11	01	.05	.09	.03	.049	3.10	.28	1.84- 3.40
7. MC Course								.07	.11*	.02	00	04	01	.056	2.06	2.02	0.00- 20
8. Research									.50**	.55**	.07	.06	.08	.20**	2.80	6.39	0.00- 100
9. Workshop										.41**	.23**	.16**	.12*	.20**	5.52	13.00	0.00- 100
10. CL-White											.42**	.41**	.50**	.33**	328.74	1254.39	0.00-15,000
11. CL-Black												.79**	.61**	.69**	58.35	183.34	0.00-2500
12. CL-Hispanic													.66**	.58**	57.30	292.49	0.00-4000
13. CL-Asian														.30**	34.56	169.24	0.00-2000
14. CL-Others															8.54	41.89	0.00- 500

Note. MCKAS = Multicultural Knowledge and Awareness Scale; MCI = Multicultural Counseling Inventory; BIDR = Balanced Inventory of Desirable Responding; MEIM = The Multigroup Ethnic Identity Measure; CoBRAS = Color-Blind Racial Attitudes Scale; SRES = The Sex-Role Egalitarianism Scale; MC Course = Number of multicultural courses; Research = Number of research projects on multicultural issues; Workshop = Number of workshops on multicultural issues; CL-W = Number of sessions with White clients; CL-B = Number of sessions with African American clients; CL-H = Number of sessions with Hispanic clients; CL-A = Number of sessions with Asian clients; CL-O = Number of sessions with clients from other backgrounds.

^{**} Correlation is significant at the 0.01 level (2-tailed).

^{*} Correlation is significant at the 0.05 level (2-tailed).

step, ethnicity identity, measured by MEIM, was entered. In the fifth step, color-blind racial attitudes, measured by CoBRAS, was entered.

Multicultural Counseling Knowledge and Awareness Scale (MCKAS). Table 3 provides a summary of the forced-entry regression analysis for variables predicting the MCKAS. The multicultural training experience (e.g., courses, workshop, research, the number of client sessions), attitudes toward the equality of men and women, ethnicity identity, and color-blind racial attitudes as a whole—all these variables were found to contribute significant variance to multicultural competence as measured by MCKAS. After the second step, multicultural training experiences added to social desirability were found to contribute to the significant variance of multicultural competence, F (9, 329) = 4.59, p < .001, $R^2 = .11$ (adjusted $R^2 = .09$).

After the third step, attitudes toward the equality of men and women, added to social desirability and multicultural training experience, were found to contribute to the significant variance of multicultural competence, $F(10, 328) = 8.62, p < .001; R^2 = .21$ (adjusted $R^2 = .18$). After the fourth step, ethnic identity, added to social desirability, multicultural training experience, attitudes toward the equality of men and women, were found to contribute to the significant variance of multicultural competence, $F(11, 327) = 12.02, p < .001; R^2 = .29$ (adjusted $R^2 = .26$).

After the fifth step, color-blind racial attitude, added to social desirability, multicultural training experience, attitudes toward the equality of men and women, and ethnic identity, were found to contribute to the significant variance of multicultural competence, F(12, 326) = 21.24, p < .001; $R^2 = .44$ (adjusted $R^2 = .42$).

Table 3
Summary of the Five-Step, Forced-Entry Multiple Regression Analysis for Variables
Predicting the MCKAS Full Scale

Variable	В	SBC	β	t
Step 1				
BIDR	-4.094E-02	.05	04	77
Step 2				
MC Course	4.989E-02	.02	.15	2.91**
Research	1.598E-02	.01	.16	2.19*
Workshop	8.625E-03	.00	.17	2.71**
CL-White	-5.334E-05	.00	10	-1.33
CL-Black	6.316E-04	.00	.18	1.68
CL-Hispanic	-2.698E-04	.00	12	-1.29
CL-Asian	8.000E-05	.00	.02	.26
CL-Others	1.624E-04	.00	.01	.13
Step 3				
SRES	-3.769E-02	.00	32	-6.33***
Step 4				
MEIM	.267	.04	.29	6.05***
Step5				
CoBRAS	44	.05	46	-9.36***

Note. BIDR = Balanced Inventory of Desirable Responding; MC Course = Number of

multicultural courses; Research = Number of research projects on multicultural issues; Workshop = Number of workshops on multicultural issues; CL-W = Number of sessions with White clients; CL-B = Number of sessions with African American clients; CL-H = Number of sessions with Hispanic clients; CL-A = Number of sessions with Asian clients; CL-O = Number of sessions with clients from other backgrounds; MEIM = Multigroup Ethnic Identity Measure; CO-BRAS = Color-Blind Racial Attitudes Scale; Total $R^2 = .44$.

^{*}p<.05. **p<.01. ***p<.001.

The MCKAS consists of two subscales: the Knowledge subscale and the Awareness subscale. The study then analyzed how the variables—social desirability, multicultural training experiences, ethnic identity, and color blind racial attitude—were found to contribute to the significant variance of Knowledge scale and Awareness scale.

MCKAS Knowledge subscale. In the first step, social desirability, measured by BIDR, was entered. In the second step, multicultural training experiences (e.g., courses, workshop, and research), and the number of sessions working with clients, were entered. In the third step, attitudes toward the equality of men and women, measured by SRES, were entered. In the fourth step, ethnicity identity, measured by MEIM, was entered. In the fifth step, color-blind racial attitudes, measured by CoBRAS, were entered.

Table 4 provides a summary of the forced-entry regression analysis for variables that predict the knowledge scale. The multicultural training experiences (e.g., courses, workshop, research, the number of client sessions), attitudes toward the equality of men and women, ethnicity identity, and color-blind racial attitudes as a whole—all these variables were found to contribute significant variance to multicultural knowledge as measured by the knowledge scale in MCKAS.

After the second step, multicultural training experiences, added to social desirability, were found to contribute to the significant variance of multicultural knowledge, F(9, 329) = 4.80, p < .001; $R^2 = .12$ (adjusted $R^2 = .09$). After the third step, attitudes toward the equality of men and women, added to social desirability and multicultural training experiences, were found to contribute to the significant variance of multicultural knowledge, F(10, 328) = 6.01, p < .001; $R^2 = .16$ (adjusted $R^2 = .13$).

Table 4
Summary of the Five-Step, Forced-Entry Multiple Regression Analysis for Variables
Predicting the MCKAS Knowledge Subscale

Variable				
	В	<u>SBC</u>	β	t
Step 1				
BIDR	3.161E-02	.07	.03	.49
Step 2				
MC Course	7.325E-02	.02	.19	3.55***
Research	2.190E-02	.01	.18	2.50*
Workshop	8.228E-03	.00	.14	2.14*
CL-White	-5.962E-05	.00	09	-1.23
CL-Black	6.608E-04	.00	.15	1.46
CL-Hispanic	-2.792E-04	.00	10	-1.11
CL-Asian	2.090E-04	.00	.05	.57
CL-Others	3.088E-04	.00	.02	.21
Step 3				
SRES	-2.884E-02	.01	20	-3.88***
Step 4				
MEIM	.36	.06	.33	6.63***
Step5				
CoBRAS	44	.06	38	-7.14***

Note. BIDR = Balanced Inventory of Desirable Responding; MC Course = Number of multicultural courses; Research = Number of research projects on multicultural issues; Workshop = Number of workshops on multicultural issues; CL-W = Number of sessions with White clients; CL-B = Number of sessions with African American clients; CL-H = Number of sessions with Hispanic clients; CL-A = Number of sessions with Asian clients; CL-O = Number of sessions with clients from other backgrounds; MEIM = Multigroup Ethnic Identity Measure; Co-BRAS = Color-Blind Racial Attitudes Scale; Total R² = .36.

*p<.05. **p<.01. ***p<.001.

After the fourth step, ethnicity identity, added to social desirability, multicultural training experiences, and attitudes toward the equality of men and women, were found to contribute to the significant variance of multicultural knowledge, F(11, 327) = 10.18, p < .001; $R^2 = .26$ (adjusted $R^2 = .23$). After the fifth step, color blind racial attitude, added to social desirability, multicultural training experiences, attitudes toward the equality of men and women, and ethnicity identity, were found to contribute to the significant variance of multicultural knowledge, F(12, 326) = 15.00, p < .001; $R^2 = .36$ (adjusted $R^2 = .33$).

MCKAS Awareness subscale. In the first step, social desirability, measured by BIDR, was entered. In the second step, multicultural training experiences (e.g., courses, workshop, and research), and the number of sessions working with clients, were entered. In the third step, attitudes toward the equality of men and women, measured by SRES, were entered. In the fourth step, ethnicity identity, measured by MEIM, was entered. In the fifth step, color-blind racial attitudes, measured by CoBRAS, were entered.

Table 5 provides a summary of the forced-entry regression analysis for variables that predict the awareness scale. The attitudes toward the equality of men and women, ethnicity identity, and color-blind racial attitudes as a whole were found to contribute significant variance to multicultural awareness, as measured by the awareness scale in MCKAS. After the third step, attitudes toward the equality of men and women, added to social desirability and multicultural training experiences, were found to contribute to the significant variance of multicultural awareness, F(10, 328) = 10.51, p < .001; $R^2 = .24$ (adjusted $R^2 = .22$).

After the fourth step, ethnicity identity, added to social desirability, multicultural training experiences, and attitudes toward the equality of men and women, were found to

Table 5

Summary of the Five-Step, Forced-Entry Multiple Regression Analysis for Variables

Predicting the MCKAS Awareness Subscale

Variable	В	SBC	β	t
Step 1				
BIDR	17	.06	15	-2.84**
Step 2				
MC Course	1.447E-02	.02	.04	.74
Research	6.939E-03	.01	.06	.84
Workshop	9.831E-03	.00	.17	2.71**
CL-White	-4.724E-05	.00	08	-1.03
CL-Black	5.786E-04	.00	.15	1.35
CL-Hispanic	-2.551E-04	.00	10	-1.07
CL-Asian	-1.075E-04	.00	03	31
CL-Others	2.601E-05	.00	00	02
Step 3				
SRES	-5.576E-02	.01	42	-8.58***
Step 4				
MEIM	.11	.05	.11	2.27*
Step5				
CoBRAS	52	.05	49	-9.68***

Note. BIDR = Balanced Inventory of Desirable Responding; MC Course = Number of

multicultural courses; Research = Number of research projects on multicultural issues; Workshop = Number of workshops on multicultural issues; CL-W = Number of sessions with White clients; CL-B = Number of sessions with African American clients; CL-H = Number of sessions with Hispanic clients; CL-A = Number of sessions with Asian clients; CL-O = Number of sessions with clients from other backgrounds; MEIM = Multigroup Ethnic Identity Measure; CO-BRAS = Color-Blind Racial Attitudes Scale; Total $R^2 = .42$.

^{*}p<.05. **p<.01. ***p<.001.

contribute to the significant variance of multicultural awareness, F(11, 327) = 10.15, p < .001; $R^2 = .26$ (adjusted $R^2 = .23$). After the fifth step, color blind racial attitude, added to social desirability, multicultural training experiences, attitudes toward the equality of men and women, and ethnicity identity, were found to contribute to the significant variance of multicultural awareness, F(12, 326) = 19.76, p < .001; $R^2 = .42$ (adjusted $R^2 = .40$).

This dissertation research applied a forced-entry method of multiple regression, which includes five steps, to analyze MCI total score and then its four subscales—

Multicultural/General Counseling Skills, Multicultural Awareness/Experience,

Multicultural Counseling/Relationship, and Multicultural Counseling Knowledge.

Multicultural Counseling Inventory (MCI). In the first step, social desirability, measured by BIDR, was entered. In the second step, multicultural training experiences (e.g., courses, workshop, and research), and the number of sessions working with clients, were entered. In the third step, attitudes toward the equality of men and women, measured by SRES, were entered. In the fourth step, ethnicity identity, measured by MEIM, was entered. In the fifth step, color-blind racial attitudes, measured by CoBRAS, were entered.

Table 6 provides a summary of the forced-entry regression analysis for variables predicting the MCI. The variables of social desirability, multicultural training experiences (e.g., courses, workshop, research, the number of client sessions), attitudes toward the equality of men and women, ethnicity identity, and color-blind racial attitudes as a whole, were found to contribute significant variance to multicultural competence as measured by MCI.

Table 6

Summary of the Five-Step, Forced-Entry Multiple Regression Analysis for Variables

Predicting the MCI Full Scale

Variable	В	SBC	β	t
Step 1				
BIDR	.10	.02	.23	4.40***
Step 2				
MC Course	1.462E-02	.01	.10	1.91
Research	9.136E-03	.00	.20	2.81**
Workshop	3.283E-03	.00	.14	2.31*
CL-White	-1.856E-05	.00	08	-1.03
CL-Black	1.263E-04	.00	.08	.75
CL-Hispanic	-3.709E-05	.00	04	40
CL-Asian	2.106E-05	.00	.01	.15
CL-Others	2.793E-04	.00	.04	.52
Step 3				
SRES	-1.036E-02	.00	19	-3.76***
Step 4				
MEIM	.12	.02	.29	6.00***
Step5				
CoBRAS	-7.690E-02	.02	18	-3.17**

Note. BIDR = Balanced Inventory of Desirable Responding; MC Course = Number of

multicultural courses; Research = Number of research projects on multicultural issues; Workshop = Number of workshops on multicultural issues; CL-W = Number of sessions with White clients; CL-B = Number of sessions with African American clients; CL-H = Number of sessions with Hispanic clients; CL-A = Number of sessions with Asian clients; CL-O = Number of sessions with clients from other backgrounds; MEIM = Multigroup Ethnic Identity Measure; CO-BRAS = Color-Blind Racial Attitudes Scale; Total $R^2 = .29$.

^{*}p<.05. **p<.01. ***p<.001.

After the first step, social desirability was found to contribute to the significant variance of multicultural competence, F(1, 337) = 19.33, p < .001; $R^2 = .05$ (adjusted R^2 = .05). After the second step, multicultural training experiences, added to social desirability, were found to contribute to the significant variance of multicultural competence, F(9, 329) = 6.39, p < .001; $R^2 = .15$ (adjusted $R^2 = .13$). After the third step, attitudes toward the equality of men and women, added to social desirability and multicultural training experiences, were found to contribute to the significant variance of multicultural competence, F(10, 328) = 7.39, p < .001; $R^2 = .18$ (adjusted $R^2 = .16$). After the fourth step, ethnicity identity, added to social desirability, multicultural training experiences, and attitudes towards the equality of men and women, were found to contribute to the significant variance of multicultural competence, F(11, 327) = 10.71, p< .001: $R^2 = .27$ (adjusted $R^2 = .24$). After the fifth step, color-blind racial attitudes, added to social desirability, multicultural training experiences, attitudes towards the equality of men and women, and ethnicity identity, were found to contribute to the significant variance of multicultural competence, F(12, 326) = 10.93, p < .001; $R^2 = .29$ (adjusted R^2 = .26).

The MCI consists of four subscales: Multicultural/General Counseling Skills,
Multicultural Awareness/Experience, Multicultural Counseling/Relationship, and
Multicultural Counseling Knowledge. Results of forced entry regression analyses for the
four subscales follow.

MCI Multicultural/General Counseling Skills. In the first step, social desirability, measured by BIDR, was entered. In the second step, multicultural training experiences (e.g., courses, workshop, and research), and the number of sessions working with clients,

were entered. In the third step, attitudes toward the equality of men and women, measured by SRES, was entered. In the fourth step, ethnicity identity, measured by MEIM, was entered. In the fifth step, color-blind racial attitudes, measured by CoBRAS, were entered.

Table 7 provides a summary of the forced-entry regression analysis for variables predicting the multicultural general counseling skills. The variables of social desirability, multicultural training experiences, attitudes toward the equality of men and women, ethnicity identity, and color-blind racial attitudes as a whole, were found to contribute significant variance to multicultural general counseling skills as measured by the multicultural/general counseling skills subscale in MCI.

After the first step, social desirability was found to contribute to the significant variance of multicultural general counseling skills, F(1, 337) = 18.13, p < .001; $R^2 = .05$ (adjusted $R^2 = .05$). After the second step, multicultural training experiences, added to social desirability, were found to contribute to the significant variance of multicultural general counseling skills, F(9, 329) = 3.92, p < .001; $R^2 = .10$ (adjusted $R^2 = .07$). After the third step, attitudes toward the equality of men and women, added to social desirability and multicultural training experiences, were found to contribute to the significant variance of multicultural general counseling skills, F(10, 328) = 3.83, p < .001; $R^2 = .11$ (adjusted $R^2 = .07$).

After the fourth step, ethnicity identity, added to social desirability, multicultural training experiences, and attitudes towards the equality of men and women, were found to contribute to the significant variance of multicultural general counseling skills, F(11, 327) = 4.21, p < .001; $R^2 = .12$ (adjusted $R^2 = .10$). After the fifth step, the variables of

Table 7
Summary of the Five-Step, Forced-Entry Multiple Regression Analysis for Variables
Predicting the MCI General Subscale

Variable	В	SBC	β	t
Step 1				
BIDR	.14	.03	.23	4.26***
Step 2				
MC Course	7.629E-03	.01	.04	.68
Research	5.978E-03	.01	.09	1.26
Workshop	3.299E-03	.00	.10	1.59
CL-White	7.964E-06	.00	.02	.30
CL-Black	2.852E-04	.00	.12	1.16
CL-Hispanic	-8.882E-05	.00	06	65
CL-Asian	-4.026E-05	.00	02	20
CL-Others	2.069E-05	.00	.00	.03
Step 3				
SRES	-6.907E-03	.00	09	-1.68
Step 4				
MEIM	8.561E-02	.03	.14	2.70**
Step5				
CoBRAS	2.299E-02	.04	.04	.60

Note. BIDR = Balanced Inventory of Desirable Responding; MC Course = Number of

multicultural courses; Research = Number of research projects on multicultural issues; Workshop = Number of workshops on multicultural issues; CL-W = Number of sessions with White clients; CL-B = Number of sessions with African American clients; CL-H = Number of sessions with Hispanic clients; CL-A = Number of sessions with Asian clients; CL-O = Number of sessions with clients from other backgrounds; MEIM = Multigroup Ethnic Identity Measure; CO-BRAS = Color-Blind Racial Attitudes Scale; Total $R^2 = .29$.

*p<.05. **p<.01. ***p<.001.

color-blind racial attitudes, added to social desirability, multicultural training experiences, attitudes towards the equality of men and women, and ethnicity identity, were found to contribute to the significant variance of multicultural general counseling skills, $F(12, 326) = 3.88, p < .001; R^2 = .13$ (adjusted $R^2 = .10$).

MCI Multicultural Awareness/Experience subscale. In the first step, social desirability, measured by BIDR, was entered. In the second step, multicultural training experiences (e.g., courses, workshop, and research), and the number of sessions working with clients, were entered. In the third step, attitudes toward the equality of men and women, measured by SRES, were entered. In the fourth step, ethnicity identity, measured by MEIM, was entered. In the fifth step, color-blind racial attitudes, measured by CoBRAS, were entered.

Table 8 provides a summary of the forced-entry regression analysis for variables predicting the multicultural awareness/experience in MCI. The attitudes toward the equality of men and women, ethnicity identity, and color-blind racial attitudes as a whole, were found to contribute significant variance to multicultural awareness measured by MCI.

After the first step, social desirability was not found to contribute to the significant variance of multicultural awareness, F(1, 337) = 2.99, p = .09; $R^2 = .01$ (adjusted $R^2 = .01$). After the second step, multicultural training experiences, added to social desirability, were found to contribute to the significant variance of multicultural awareness, F(9, 329) = 3.13, p < .001; $R^2 = .08$ (adjusted $R^2 = .05$). After the third step, attitudes toward the equality of men and women, added to social desirability and multicultural training experiences, were found to contribute to the significant variance of

Table 8

Summary of the Five-Step, Forced-Entry Multiple Regression Analysis for Variables

Predicting the MCI Awareness Subscale

Variable	В	SBC	β	t
Step 1				_
BIDR	7.180E-02	.042	.094	1.728
Step 2				
MC Course	2.500E-02	.014	.099	1.839
Research	1.919E-02	.006	.239	3.320**
Workshop	1.358E-03	.003	.034	.537
CL-White	-6.867E-05	.000	168	-2.148*
CL-Black	-3.148E-05	.000	011	105
CL-Hispanic	7.308E-05	.000	.042	.441
CL-Asian	1.316E-04	.000	.043	.540
CL-Others	1.150E-03	.001	.094	1.196
Step 3				
SRES	-1.107E-02	.005	120	-2.226*
Step 4				
MEIM	.191	.037	.268	5.118***
Step5				
CoBRAS	127	.044	171	-2.851**

Note. BIDR = Balanced Inventory of Desirable Responding; MC Course = Number of

multicultural courses; Research = Number of research projects on multicultural issues; Workshop = Number of workshops on multicultural issues; CL-W = Number of sessions with White clients; CL-B = Number of sessions with African American clients; CL-H = Number of sessions with Hispanic clients; CL-A = Number of sessions with Asian clients; CL-O = Number of sessions with clients from other backgrounds; MEIM = Multigroup Ethnic Identity Measure; CO-BRAS = Color-Blind Racial Attitudes Scale; Total $R^2 = .18$.

^{*}p<.05.

multicultural awareness, F(10, 328) = 3.34, p < .001; $R^2 = .09$ (adjusted $R^2 = .07$). After the fourth step, ethnicity identity, added to social desirability, multicultural training experiences, and attitudes towards the equality of men and women, were found to contribute to the significant variance of multicultural awareness, F(11, 327) = 5.66, p < .001; $R^2 = .16$ (adjusted $R^2 = .13$). After the fifth step, color-blind racial attitudes, added to social desirability, multicultural training experiences, attitudes towards the equality of men and women, and ethnicity identity, were found to contribute to the significant variance of multicultural awareness, F(12, 326) = 5.97, p < .001; $R^2 = .18$ (adjusted $R^2 = .15$).

Multicultural Counseling/Relationship. In the first step, social desirability, measured by BIDR, was entered. In the second step, multicultural training experiences (e.g., courses, workshop, and research), and the number of sessions working with clients, were entered. In the third step, attitudes toward the equality of men and women, measured by SRES, were entered. In the fourth step, ethnicity identity, measured by MEIM, was entered. In the fifth step, color-blind racial attitudes, measured by CoBRAS, were entered.

Table 9 provides a summary of the forced-entry regression analysis for variables predicting the multicultural relationship measured in the multicultural counseling/relationship subscale in MCI. The variables of social desirability, multicultural training experiences (e.g., courses, workshop, research, the number of client sessions), attitudes toward the equality of men and women, ethnicity identity, and colorblind racial attitudes as a whole, were found to contribute significant variance to multicultural relationship.

Table 9

Summary of the Five-Step, Forced-Entry Multiple Regression Analysis for Variables

Predicting the MCI Relationship Subscale

Variable	В	SBC	β	t	
Step 1					
BIDR	.201	.031	.331	6.422***	
Step 2					
MC Course	1.653E-02	.010	.082	1.607	
Research	-1.751E-03	.004	027	400	
Workshop	6.171E-03	.002	.197	3.223**	
CL-White	-3.348E-05	.000	024	267	
CL-Black	1.633E-04	.000	.073	.722	
CL-Hispanic	-3.709E-05	.000	036	398	
CL-Asian	-1.262E-04	.000	052	685	
CL-Others	-5.173E-04	.001	053	711	
Step 3					
SRES	-1.218E-02	.004	166	-3.264**	
Step 4					
MEIM	4.963E-02	.029	.087	1.711	
Step5					
CoBRAS	-4.150E-02	.035	070	-1.191	

Note. BIDR = Balanced Inventory of Desirable Responding; MC Course = Number of

multicultural courses; Research = Number of research projects on multicultural issues; Workshop = Number of workshops on multicultural issues; CL-W = Number of sessions with White clients; CL-B = Number of sessions with African American clients; CL-H = Number of sessions with Hispanic clients; CL-A = Number of sessions with Asian clients; CL-O = Number of sessions with clients from other backgrounds; MEIM = Multigroup Ethnic Identity Measure; CO-BRAS = Color-Blind Racial Attitudes Scale; Total $R^2 = .20$.

^{*}p<.05. **p<.01. ***p<.001.

After the first step, social desirability was found to contribute to the significant variance of multicultural relationship, F(1, 337) = 41.24, p < .001; $R^2 = .11$ (adjusted R^2 = .11). After the second step, multicultural training experiences, added to social desirability, were found to contribute to the significant variance of multicultural relationship, F(9, 329) = 7.28, p < .001; $R^2 = .17$ (adjusted $R^2 = .14$). After the third step, attitudes toward the equality of men and women, added to social desirability and multicultural training experiences, were found to contribute to the significant variance of multicultural relationship. F(10.328) = 7.81, p < .001; $R^2 = .19$ (adjusted $R^2 = .17$). After the fourth step, ethnicity identity, added to social desirability, multicultural training experiences, and attitudes towards the equality of men and women, were found to contribute to the significant variance of multicultural relationship, F(11, 327) = 7.41, p <.001; $R^2 = .20$ (adjusted $R^2 = .17$). After the fifth step, color-blind racial attitudes, added to social desirability, multicultural training experiences, attitudes towards the equality of men and women, and ethnicity identity, were found to contribute to the significant variance of multicultural relationship, F(12, 326) = 6.92, p < .001; $R^2 = .20$ (adjusted R^2 = .17).

MCI Multicultural Counseling Knowledge. In the first step, social desirability, measured by BIDR, was entered. In the second step, multicultural training experiences (e.g., courses, workshop, and research), and the number of sessions working with clients, were entered. In the third step, attitudes toward the equality of men and women, measured by SRES, were entered. In the fourth step, ethnicity identity, measured by MEIM, was entered. In the fifth step, color-blind racial attitudes, measured by CoBRAS, were entered.

Table 10 provides a summary of the forced-entry regression analysis for multicultural knowledge measured in multicultural knowledge subscale in the MCI. The multicultural training experiences (e.g., courses, workshop, research, the number of client sessions), attitudes toward the equality of men and women, ethnicity identity, and colorblind racial attitudes as a whole were found to contribute significant variance to multicultural knowledge measured by MCI.

After the first step, social desirability was found to contribute to the significant variance of multicultural knowledge, F(1, 337) = 5.32, p < .001; $R^2 = .02$ (adjusted $R^2 =$.01). After the second step, multicultural training experiences, added to social desirability, were found to contribute to the significant variance of multicultural knowledge, F(9, 329) = 3.98, p < .001; $R^2 = .10$ (adjusted $R^2 = .07$). After the third step, attitudes toward the equality of men and women, added to social desirability and multicultural training experiences, were found to contribute to the significant variance of multicultural knowledge, F(10, 328) = 5.31, p < .001; $R^2 = .14$ (adjusted $R^2 = .11$). After the fourth step, ethnicity identity, added to social desirability, multicultural training experiences, and attitudes towards the equality of men and women, were found to contribute to the significant variance of multicultural knowledge, F(11, 327) = 8.03, p <.001; $R^2 = .21$ (adjusted $R^2 = .19$). After the fifth step, color-blind racial attitudes, added to social desirability, multicultural training experiences, attitudes towards the equality of men and women, and ethnicity identity, were found to contribute to the significant variance of multicultural knowledge, F(12, 326) = 9.70, p < .001; $R^2 = .29$ (adjusted $R^2 =$.24).

Table 10
Summary of the Five-Step, Forced-Entry Multiple Regression Analysis for Variables
Predicting the MCI Knowledge Subscale

Variable	В	SBC	β	t
Step 1				
BIDR	7.075E-02	.031	.125	2.306*
Step 2				
MC Course	2.751E-02	.010	.146	2.761**
Research	8.394E-03	.004	.141	1.981*
Workshop	4.307E-03	.002	.147	2.322*
CL-White	-2.022E-05	.000	067	863
CL-Black	1.099E-04	.000	.053	.502
CL-Hispanic	-8.185E-05	.000	063	673
CL-Asian	5.918E-05	.000	.026	.332
CL-Others	2.034E-04	.001	.022	.288
Step 3				
SRES	-1.428E-02	.004	209	-3.983***
Step 4				
MEIM	.147	.027	.279	5.503***
Step5				
CoBRAS	147	.031	268	-4.720***

Note. BIDR = Balanced Inventory of Desirable Responding; MC Course = Number of

multicultural courses; Research = Number of research projects on multicultural issues; Workshop = Number of workshops on multicultural issues; CL-W = Number of sessions with White clients; CL-B = Number of sessions with African American clients; CL-H = Number of sessions with Hispanic clients; CL-A = Number of sessions with Asian clients; CL-O = Number of sessions with clients from other backgrounds; MEIM = Multigroup Ethnic Identity Measure; CO-BRAS = Color-Blind Racial Attitudes Scale; Total $R^2 = .26$.

^{*}p<.05. **p<.01. ***p<.001.

Chapter Five

Discussion

This study examined various contributions to the prediction of multicultural counseling competence by constructs including counselor race, gender, multicultural training and working with cultural different clients, ethnic identity, gender role equality attitudes toward men and women, and color-blind racial attitudes. Five-step, forced-entry multiple regression analyses indicated that attitudes toward the equality of men and women, ethnic identity, and racial attitudes made significant contributions to self-reported Multicultural Counseling Knowledge and Awareness Scale and Multicultural Counseling Inventory after controlling social desirability and multicultural training experience (e.g., number of multicultural courses, research projects, workshops).

Paralleling the findings of previous studies (e.g., Constantine & Ladany, 2000; Sodowsky et al., 1998; Worthington et al., 2000), the results in this study also indicated that social desirability was significantly associated with counselors' self-reported multicultural counseling competence (as measured by the Multicultural Counseling Inventory). Although social desirability was noted as a confounding variable in measurement of self-reported multicultural competence, this study found social desirability to be associated with multicultural competence as measured by the Multicultural Counseling Inventory but not by the Multicultural Counseling Knowledge and Awareness Scale.

Two reasons may explain why social desirability was not associated with multicultural knowledge as measured by the Multicultural Counseling Knowledge and Awareness Scale. One, Ponterotto et al. (2002) eliminated three items due to their

correlation with social desirability in their process of designing Multicultural Counseling Knowledge and Awareness Scale. In addition, they examined correlations with the Marlow-Crowne Social Desirability Scale (Crowne & Marlowe, 1960) to assess the discriminant validity of the Multicultural Counseling Counseling Knowledge and Awareness Scale. Social desirability was found to be significantly and negatively related to Multicultural Counseling Knowledge and Awareness Scale-Knowledge subscale, but without significant relation to Multicultural Counseling Knowledge and Awareness Scale-Awareness subscale (Ponterotto et al., 2002). This fact may explain why this study showed similar results; that is, no significant relation was found between social desirability and the Multicultural Counseling Knowledge and Awareness Scale (see Table 2). Two, social desirability in this study was found to be negatively related with the Awareness subscale. This finding echoes the findings of Constantine et al. (2001) and Constantine and Ladany (2000), who reported that social desirability was significantly negatively related to multicultural counseling awareness (as measured by the Multicultural Counseling Knowledge and Awareness Scale-Awareness subscale).

In this study, multicultural training was found to significantly contribute to multicultural counseling competence (as measured by both the Multicultural Counseling Inventory and the Multicultural Counseling Knowledge and Awareness Scale). This finding suggests the importance of multicultural training in various training experiences, didactic format, research, and experiential learning. In addition to formal course work, the findings indicate that workshop participation was a strong predictor among three training components—courses, research, and workshops. Experiential learning in workshops might enhance students' knowledge and awareness in multicultural

competence. In fact, Neville et al. (1995) found that counselor trainees appreciated the varied ingredients in their multicultural courses, and guest speakers who provoked a stimulating perspective provided students with further cultural experiences. Participation in multicultural research was also positively related to multicultural knowledge (as measured by the Multicultural Counseling Knowledge and Awareness Scale). This fact indicates that multicultural research may be more than an ivory-tower intellectual exploration; counselors involved in multicultural research report greater multicultural counseling competence (as assessed by the Multicultural Counseling Knowledge and Awareness Scale-Knowledge subscale).

The multicultural training findings offer three implications for the future of multicultural training. One, students may benefit more from varied training than from just didactic instruction. Perhaps multicultural courses would maximize their effects if students received exposure to the concepts using multiple varieties (e.g., research, short-term workshops, cultural dialogues) that increase knowledge about different cultures and in acquaintance with cultures of different sorts.

Two, it now appears of value to rethink on the meaning of multicultural training. Experience with research and participation in workshops, though not belonging to traditional classroom instruction, were found to be significantly associated with greater multicultural competence. This finding supports the potential value that continued education may play in improving multicultural competence. Participation in continuing education has been strongly advocated by American Psychological Association and American Counseling Association.

Three, research, workshops, and regular classroom coursework appear to

contribute to different aspects of learning, and future trainers may further help trainees integrate these different sources of learning to create a holistic and comprehensive multicultural learning environment that strongly enhances multicultural counseling competence. The importance of a holistic training environment echoes Sue and Sue's (1999; 2003) model of multicultural competence, that is, "knowledge, skill, and awareness."

In addition, the findings of this study also indicate that demographic race and gender did not make significant contributions to multicultural counseling competence (as measured by the Multicultural Counseling Knowledge and Awareness Scale or Multicultural Counseling Inventory. At the same time, importantly, attitudes toward gender equality, ethnic identity, and racial attitudes made significant contributions to multicultural counseling competence (as measured by the Multicultural Counseling Knowledge and Awareness Scale or Multicultural Counseling Inventory). The role of counselor's ethnic identity has captured many scholars' attention, and many of them suggested that counselors of color appeared to have higher level of multicultural counseling competence than white counselors (Constantine et al., 2001; Pope-Davis et al., 1994; Sodowsky et al., 1998). Although no significant effects from counselors' race were found, this study found significant effects from ethnic identity and color-blind racial attitudes. Ponterotto et al. (2002) found a significant relationship between multicultural counseling awareness and appreciation of other groups. That is, the more individuals have an overall awareness of themselves, the more they also appreciate people from other racial groups. This study supported Ponterotto et al.'s (2002) finding that Multigroup ethnic identity (as measured by the Multigroup Ethnic Identity Measure; Phinney, 1992)

was significantly related to multicultural counseling competence (as measured by the Multicultural Counseling Knowledge and Awareness Scale-Knowledge subscale). In fact, in this study, Multigroup ethnic identity was significantly related to multicultural competence knowledge and awareness of their working with minority clients (as measured by both the Multicultural Counseling Knowledge and Awareness Scale or Multicultural Counseling Inventory). Ponterotto et al. (2002) expected "a significant correlation between the MCKAS Awareness subscale and MEIM Other Group Orientation subscale, although this expectation did not materialize" (p. 172). In this study, the mulitiplegroup ethnic identity was significant correlated with the Multicultural Counseling Knowledge and Awareness Scale-Awareness subscale. The Multigroup Ethnic Identity Measure has been used primarily to evaluate the ethnic identity development of adolescents and young adults. Of course, knowing one's ethnic identity is also one aspect of self-awareness (Negy et al., 2003; Sue & Sue, 1999; 2003). It is not surprising then to see that, despite more than 200 Caucasian White participants in this study, greater levels of ethnic identity development were related to greater multicultural counseling competence (as measured by both the Multicultural Counseling Knowledge and Awareness Scale or Multicultural Counseling Inventory). In other words, White counselors who have high ethnic identity awareness could have as much multicultural counseling competence as minority counselors do.

This study is the first one in multicultural research to include gender role equality attitudes as a predictor of multicultural competence. Although counselors' sex was not related to their degree of multicultural counseling competence, gender role attitudes were associated with multicultural counseling competence (as measured both by Multicultural

Counseling Knowledge and Awareness Scale and Multicultural Counseling Inventory). Moreover, this study found gender role attitude to be negatively related to color-blind racial attitudes. Appreciating non-traditional gender roles may also indicate more flexibility and acceptance of different roles-and-positions in society (Belitsky et al., 1996). An alternative explanation would be that the attitude of equality has a universal spread to awareness of gender roles and color-blind racial attitudes. According to Beere et al. (1984), "sex-role egalitarianism" means "an attitude that causes one to respond to another individual independently of the other individual's sex. One who possesses this attitude believes that the sex of an individual should not influence the perception of an individual's abilities or the determination of an individual's rights, obligations, and opportunities" (p. 564). In fact, the attitude towards equality between men and women parallels the attitude towards equality among people of different racial backgrounds. The relationship among gender role, color-blind racial attitudes, and multicultural counseling competence deserves future research attention. The relationship among them should be included in future training courses to enhance counselors' multicultural awareness, concerns, and sensitivity.

Although racial attitudes have gained much attention from psychologists, Neville et al. (2000) pointed out that "color-blind racial attitudes are a relatively undeveloped area in the field of psychology" (p. 61). Greater level of color-blind racial attitudes were related to greater level of racial prejudice and the belief that society as we have it today is just. Color-blind racial attitudes do not exist exclusively among White people; people from different racial groups may share color-blind racial attitudes (Neville et al., 2000). Despite this knowledge and research on color-blind racial attitudes, to date there has been

no research on the relation between color-blind racial attitudes and multicultural counseling competence. For example, Neville et al. (2000), who developed the Color-Blind Racial Attitudes Scale, said that:

Counseling psychologists can also begin to explore the concept of color-blind racial attitudes in applied work. For example, the CoBRAS should be used as a self-assessment tool in multicultural counseling courses. Although we did not examine the relationship between the CoBRAS and multicultural counseling competence (MCC) per se, the notion of color-blind racial attitudes is theoretically consistent with MCC in that it assesses a specific component of MCC. (p. 69)

Thus, this study is the first to investigate the relation between color-blind awareness and multicultural counseling competence. As hypothesized, color-blind racial attitudes were found to significantly contribute to multicultural counseling competence (as measured both by Multicultural Counseling Knowledge and Awareness Scale or Multicultural Counseling Inventory). In addition, the study found color-blind racial attitude to be related to social desirability and ethnic identity. In future training, increasing the awareness of color-blind racial attitudes may well enhance multicultural counseling competence.

This study has several further suggestions to multicultural trainers. First, multicultural training should expand its focus from race/ethnicity to include gender roles, especially on how counselors perceive themselves in terms of their racial identity and gender equality. Second, multicultural trainers need to attend to trainees' awareness of White privileges and color blindness, since both issues are closely tied to their

multicultural competencies (Neville et al., 2000). Thus, in general, this study found support for the initial hypothesis that counselors' multicultural awareness would contribute to multicultural counseling competence. More than overall awareness, this study recognized as crucial factors the awareness of ethnic identity, color-blind racial attitudes, and appreciation of non-traditional gender roles to bear on multicultural sensitivity. Although the demographic gender and race were generally not found to have significant effects on multicultural counseling competence, this study found that counselors with higher levels of awareness of how their cultural backgrounds might influence their working with minority clients were more likely to have higher level of multicultural counseling competence. This finding also indicates the importance of training that would benefit counselors from different racial backgrounds (e.g., White, Asian, Latino, African American, Native American, and many more).

Limitations and Suggestions for Future Research

The study identified multicultural training experiences, attitudes toward the equality between men and women, ethnic identity awareness and commitment, and racial attitudes to have significantly contributed to multicultural competence. However, the study did not identify the relationship among them. For example, this study did not answer how or whether multicultural training experience is related to color-blind racial attitudes or to ethnic identity awareness and commitment. This study used self-report instruments to investigate multicultural counseling competence. As many scholars (Constantine & Ladany, 2001; Sodowsky et al., 1998; Worthington et al., 2000) indicated, self-reported measures may be contaminated by social desirability. Self-reported measures were also questioned as to how much they reflect counselors' actual

multicultural counseling competence.

In addition, the relationships among multicultural training, ethnic identity, and multicultural competence deserve additional research in the future. The following queries could be raised and pursued. Does multicultural training enhance ethnic identity awareness, which in turn increases multicultural competence? Why and how does ethnic identity awareness positively correlate with attitude towards equality between men and women? Do these factors suggest an underlying perception that appreciation of ethnic identity correlates with appreciation of gender roles? These questions deserve future research explorations, for they would crucially enhance our understanding and help promotion of multicultural competence.

This study has several limitations. First, this study used Internet-based research, so there was no way of ascertaining the response rate. In other words, the research was unable to include the statistics of the extent of exposure among people to this study announcement, though the data were collected from nationwide sampling (Gosling et al., 2004). Secondly, this study did not examine specific aspects of counselors' practices, (e.g., Ph.D., MA, students, faculties, work settings, practitioners, and years of practice) as they may potentially relate to their multicultural competence.

Finally, racial attitudes in this study presented two important indications. One, racial attitudes were found to significantly contribute to multicultural competence, and to be negatively associated with participation in multicultural courses, research, and workshops. These findings indicate the crucial relevance multicultural training has to racial blindness and unawareness – with further attention certainly warranted (Neville et al., 2000). Two, multicultural counseling educators may need to utilize multicultural

training courses, research, and workshops to increase the awareness of racial blindness and institutional discrimination.

In sum, this study has investigated how counselor's gender and race identities influence their multicultural counseling competence, as measured by both Multicultural Counseling Knowledge and Awareness Scale and Multicultural Counseling Inventory. In addition to factors of demographic gender and race, as measured by multiple regression analysis, this study also examined a number of possible contributors to multicultural counseling competence. More specifically, after controlling for social desirable responding, this study examined how the following factors influence multicultural counseling competence, counselors' multicultural training experiences (e.g., courses, research, workshops, and number of sessions working with cultural different clients), ethnic identity, attitudes toward equality between men and women, and color-blind racial attitudes. Despite the finding that demographic gender and race did not significantly influence multicultural counseling competence, counselors' multicultural training experience, ethnic identity, attitudes toward the equality between men and women, and color-blind racial attitudes were found to have significantly contributed to the variance of multicultural counseling competence.

Agreeing with Ponterotto et al.'s (2002) finding, social desirability in this study was found not to be significantly related to multicultural counseling competence, as measured by Multicultural Counseling Knowledge and Awareness Scale. However, agreeing with the findings of many multicultural scholars (e.g., Constantine & Ladany, 2000; Sodowsky et al., 1998; Worthington et al., 2000), social desirability was found to be significantly related to the multicultural counseling competence, as measured by

Multicultural Counseling Inventory. Furthermore, this study indicated the importance of multicultural training for multicultural counseling competence, since multicultural training was found to have significantly contributed to multicultural counseling competence. The relationship between multicultural training and ethnic identity and color-blind racial identity certainly deserves further research (Neville et al., 2000).

Appendices

Multicultural Counseling Knowledge and Awareness Scale (MCKAS)

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A Revision of the Multicultural Counseling Awareness Scale (MCKAS)

A Revision of the Municultural Counseling Awareness Scale (MCRAS)						
		Copyrighted ©	by Joseph G. P	onterotto, 1	991 	
Using the f	following s	scale, rate the tr	uth of each item	as it applie	s to you.	
1 Not at All True	2	3	4 Somewhat True	5	6	7 Totally True
1. I believ	e all client	s should mainta	in direct eye cor	ntact during	counseling.	
1	2	3	4	5	6	7
		•	al counseling ski ntinuing educati	•	toring my func	tioning –
1	2	3	4	5	6	7
			es that minority najority clients.	clients rece	ive "less prefer	red"
1	2	3	4	5	6	7
4. I think t and defens		who do not dis	cuss intimate as	pects of the	ir lives are bein	g resistant
1	2	3	4	5	6	7
			skills, technique with any clients		ches that are m	ore likely
1	2	3	4	5	6	7

6. I am familiar with the "culturally deficient" and "culturally deprived" depictions of

discriminati	ion.					
1	2	3	4	5	6	7
Using the fo	ollowing scal	le, rate the t	ruth of each item	as it applies	s to you.	
Not at All True	2	3	4 Somewhat True	5	6	7 Totally True
	the recent at nd not really		ected toward mult	icultural issi	ues in counseli	ng is
1	2	3	4	5	6	7
			nces that exist am fs, and level of ac	-	rs within a par	ticular
1	2	3	4	5	6	7
			ates that minority n are majority clic		nore likely to b	e
1	2	3	4	5	6	7
10. I think	that clients s	hould perce	eive the nuclear fa	mily as the	ideal social un	it.
1	2	3	4	5	6	7
	that being hi		etitive and achieve	ement orient	ed are traits th	at all
1	2	3	4	5	6	7
			nterpretations of n akes) within vario			(e.g.,
1	2	3	4	5	6	7
13. I under	stand the imp	pact and op	erations of oppres	ssion and the	e racist concep	ts that

minority mental health and understand how these labels serve to foster and perpetuate

have permeated the mental health professions.

1	2	3	4	5	6	7			
	14. I realize that counselor-client incongruities in problem conceptualization and counseling goals may reduce counselor credibility.								
1	2	3	4	5	6	7			
Using th	e following so	cale, rate the tr	uth of each item	as it applies	s to you.				
1 Not at All True	2	3	4 Somewhat True	5	6	7 Totally True			
			nic minorities see the status and p	-	- •				
1	2	3	4	5	6	7			
16. I an	n knowledgeal	ble of accultura	ation models for	various ethi	nic minority gr	oups.			
1	2	3	4	5	6	7			
		anding of the rows among mine	ole culture and rority groups.	acism play i	n the developn	nent of			
1	2	3	4	5	6	7			
18. I be clients.	lieve that it is	important to e	mphasize object	ive and ratio	onal thinking in	n minority			
1	2	3	4	5	6	7			
	n aware of cul racial/ethnic g	-	hat is culturally	indigenous,	models of cou	nseling for			
1	2	3	4	5	6	7			
20. I be	lieve that my	clients should	view a patriarch	al structure	as the ideal.				
1	2	3	4	5	6	7			
21. I an	aware of bot	h the initial ba	rriers and benefi	its related to	the cross-cultu	ıral			

counseling relationship.

1	2	3	4	5	6	7		
	22. I am comfortable with differences that exist between me and my clients in terms of race and beliefs.							
1	2	3	4	5	6	7		
Using the f	following scale	, rate the truth	of each item as	it applies to y	ou.			
1 Not at All True	2	3 S	4 omewhat True	5	6	7 Totally True		
23. I am a health serv		tional barriers v	which may inhi	bit minorities	from using	mental		
1	2	3	4	5	6	7		
24. I think sophisticat	•	s should exhibi	t some degree	of psychologic	al mindedn	ess and		
1	2	3	4	5	6	7		
		y clients will b ass values and		m counseling v	with a majo	rity who		
1	2	3	4	5	6	7		
26. I am a advantages	-	g born a White	person in this s	society carries	with it certa	ain		
1	2	3	4	5	6	7		
	27. I am aware of the value assumptions inherent in major schools of counseling and understand how these assumptions may conflict with values of culturally diverse clients.							
1	2	3	4	5	6	7		
28. I am aware that some minorities see the counseling process as contrary to their own life experiences and inappropriate or insufficient to their needs.								
1	2	3	4	5	6	7		

		ong born a mi	nority in this soc e.	iety brings	with it certain	cnallenges
1	2	3	4	5	6	7
30. I be	elieve that all c	elients must vie	ew themselves as	their numb	er one respons	sibility.
1	2	3	4	5	6	7
Using th	ne following se	cale, rate the tr	uth of each item	as it applies	s to you.	
Not at All True	2 e	3	4 Somewhat True		6	7 Totally True
identity		which may di	(personal biases, ctate referral of t			-
1	2	3	4	5	6	7
			believe counseledent potential, p		•	into non-
1	2	3	4	5	6	7
Thonk	you for comple	ting this instru	umant Dlagga fac	al fran to av	proce in writin	a balow

Thank you for completing this instrument. Please feel free to express in writing below any thoughts, concerns, or comments you have regarding this instrument:

Multicultural Counseling Inventory Gargi Royircar Sodowsky, University of Nebraska-Lincoln

The following statements cover counselor practices in multicultural counseling. Indicate how accurately each statement describes you as a counselor, psychologist, or student in a mental health training program when working in a multicultural counseling situation. Give ratings that you actually believe to be true rather than those that you wish were true.

The Scale ranges from 1 (very inaccurate) to 4 (very accurate). The Scale indicates the following:

- 1- Very Inaccurate
- 2- Somewhat Inaccurate
- 3- Somewhat Accurate
- 4- Very Accurate

When working with minority clients.....

1.	I perceive that my race causes the clients to mistrust me.	1	2	3	4
2.	I have feelings of overcompensation, over solicitation, and guilt that				
	I do not have when working with majority clients.	1	2	3	4
3.	I am confident that my conceptualizations of client problems do not				
	consist of stereotypes and biases.	1	2	3	4
4.	I find that differences between my worldviews and those of the				
	clients impede the counseling process.	1	2	3	4
5.	I have difficulties communicating with clients who use a perceptual,				
	reasoning, or decision-making style that is different from mine.	1	2	3	4
6.	I include the facts of age, gender roles, and socioeconomic status in				
	my understanding of different minority cultures.		2		
7.	I use innovative concepts and treatment methods.	1	2	3	4
8.	I manifest an outlook on life that is best described as "world-minded"	,			
	or pluralistic.		2		
9.	I examine my own cultural biases.	1	2	3	4
10.	I tend to compare client behaviors with those of majority group				
	members.	1	2	3	4
11.	I keep in mind research findings about minority clients' preferences				
	counseling.	1	2	3	4
12.	I know what are the changing practices, views, and interests of				
	people at the present time.	1	2	3	4
13.	I consider the range of behaviors, values, and individual differences				
	within a minority group.	1	2	3	4

The Scale ranges from 1 (very inaccurate) to 4 (very accurate). The Scale indicates the following:

1- Very Inaccurate

- 2- Somewhat Inaccurate
- 3- Somewhat Accurate
- 4- Very Accurate

When working with minority clients.....

make referrals or seek consultations based on the clients' minority identity development.	1	2	3	4
feel my confidence is shaken by the self-examination of my personal limitations.	1	2	3	4
minimizing, overconfidence).	1	2	3	4
ninority groups to understand them better.	1	2	3	4
am successful at seeing 50% of the clients more than once, not including intake.	1	2	3	4
experience discomfort because of their different physical appearance, color, dress, or socioeconomic status.	1	2	3	4
am able to quickly recognize and recover from cultural mistakes or misunderstandings.	1	2	3	4
use several methods of assessment (including free response questions, observations, and varied sources of information and excluding standardized tests).	1	2	3	4
have experience at solving problems in unfamiliar settings.	1	2	3	4
clients' better.	1	2	3	4
understand my own philosophical preferences. have a working understanding of certain cultures (including	1	2	3	4
African American, Native American, Hispanic, Asian American, new Third World immigrants, and international students).	1	2	3	4
solving structured therapy and those who need long-term, process- priented, unstructured therapy.	1	2	3	4
When working with international students or immigrants, I understand the importance of the legalities of visa, passport, green card, and naturalization.	1	2	3	4
	minority identity development. feel my confidence is shaken by the self-examination of my personal limitations. monitor and correct my defensiveness (e.g., anxiety, denial, minimizing, overconfidence). apply the sociopolitical history of the clients' respective minority groups to understand them better. am successful at seeing 50% of the clients more than once, not including intake. experience discomfort because of their different physical appearance, color, dress, or socioeconomic status. am able to quickly recognize and recover from cultural mistakes or misunderstandings. use several methods of assessment (including free response questions, observations, and varied sources of information and excluding standardized tests). have experience at solving problems in unfamiliar settings. learn about clients' level of acculturation to understand the clients' better. understand my own philosophical preferences. have a working understanding of certain cultures (including African American, Native American, Hispanic, Asian American, new Third World immigrants, and international students). am able to distinguish between those who need brief, problemolving structured therapy and those who need long-term, processoriented, unstructured therapy. When working with international students or immigrants, I	minority identity development. feel my confidence is shaken by the self-examination of my personal limitations. monitor and correct my defensiveness (e.g., anxiety, denial, minimizing, overconfidence). apply the sociopolitical history of the clients' respective minority groups to understand them better. am successful at seeing 50% of the clients more than once, not including intake. experience discomfort because of their different physical personal mistakes or misunderstandings. am able to quickly recognize and recover from cultural mistakes or misunderstandings. use several methods of assessment (including free response questions, observations, and varied sources of information and excluding standardized tests). have experience at solving problems in unfamiliar settings. learn about clients' level of acculturation to understand the clients' better. understand my own philosophical preferences. have a working understanding of certain cultures (including African American, Native American, Hispanic, Asian American, new Third World immigrants, and international students). am able to distinguish between those who need brief, problemolving structured therapy and those who need long-term, processoriented, unstructured therapy. When working with international students or immigrants, I understand the importance of the legalities of visa, passport,	minority identity development. feel my confidence is shaken by the self-examination of my personal limitations. monitor and correct my defensiveness (e.g., anxiety, denial, minimizing, overconfidence). apply the sociopolitical history of the clients' respective minority groups to understand them better. am successful at seeing 50% of the clients more than once, not including intake. experience discomfort because of their different physical personal methods of assessment (including free response questions, observations, and varied sources of information and excluding standardized tests). have experience at solving problems in unfamiliar settings. learn about clients' level of acculturation to understand the dients' better. understand my own philosophical preferences. have a working understanding of certain cultures (including African American, Native American, Hispanic, Asian American, new Third World immigrants, and international students). 1 2 2 3 4 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	minority identity development. feel my confidence is shaken by the self-examination of my bersonal limitations. monitor and correct my defensiveness (e.g., anxiety, denial, minimizing, overconfidence). apply the sociopolitical history of the clients' respective minority groups to understand them better. am successful at seeing 50% of the clients more than once, not including intake. experience discomfort because of their different physical preparance, color, dress, or socioeconomic status. am able to quickly recognize and recover from cultural mistakes or misunderstandings. use several methods of assessment (including free response questions, observations, and varied sources of information and excluding standardized tests). have experience at solving problems in unfamiliar settings. learn about clients' level of acculturation to understand the dients' better. understand my own philosophical preferences. have a working understanding of certain cultures (including African American, Native American, Hispanic, Asian American, lew Third World immigrants, and international students). am able to distinguish between those who need long-term, processoriented, unstructured therapy and those who need long-term, processoriented, unstructured therapy. When working with international students or immigrants, I anderstand the importance of the legalities of visa, passport,

The Scale ranges from 1 (very inaccurate) to 4 (very accurate). The Scale indicates the following:

- 1- Very Inaccurate
- 2- Somewhat Inaccurate
- 3- Somewhat Accurate

4- Very Accurate

Evaluate the degree to which following multicultural statements can be applied to you.

28.	My professional or collegial interactions with minority individual are extensive.	1	2	3	1
29.	In the past year, I have had a 50% increase in my multicultural	1	_	5	7
29.	case load.	1	2	3	1
30.	I enjoy multicultural interactions as much as interactions with	1	2	5	4
30.		1	2	2	4
21	people of my own culture.	1	2	3	4
31.	I am involved in advocacy efforts against institutional barriers				
	in mental health services for minority clients (e.g., lack of bilingual		•	•	
	staff, multicultural skilled counselors, and outpatient counseling	1	2	3	4
	facilities).				
32.	I am familiar with nonstandard English.	1	2	3	4
33.	My life experiences with minority individuals are extensive (e.g.,				
	via ethnically integrated neighborhoods, marriage, and friendship).	1	2	3	4
34.	In order to be able to work with minority clients, I frequently seek				
	consultation with multicultural experts and attend multicultural				
	workshops or training sessions.	1	2	3	4
Whe	n Working with all Clients				
35.	I am effective at crisis interventions (e.g., suicide attempt, tragedy,				
	broken relationship).	1	2	3	4
36.	I use varied counseling techniques and skills.			3	
37.	I am able to be concise and to the point when reflecting, clarifying,				
0,.	and problems.	1	2	3	4
38.	I am comfortable with exploring sexual issues.	1	2	3	4
39.	I am skilled at getting a client to be specific in defining and	1	2	3	4
40.	I make my nonverbal and verbal responses congruent.	1	2	3	4

Sex-role Egalitarianism Scale

Instructions: Below you will find a series of statements about men and women. Read each statement carefully and decide the extent to which you agree or disagree with each. We are not interested in what society say; we are interested in *your personal opinions*. For each item, write the number from the scale below that seems to *best* describe your opinion. Please do not omit any statements.

	1	2	3	4	5
	Strongly Agree	Agree	Neutral or Undecided	Disagree	Strongly Disagree
1.	Home ecfemale st	onomics courses shoudents.	ould be as acceptable	e for male students	as for
2.		nave as much ability or organization.	as men to make ma	jor decisions in a la	rge
3.		ool counselors shoul fields such as physic	U 1	ed interested wome	n to enter
4	Cleaning	up the dishes should	d be the joint respon	sibility of husbands	and wives.
5.	A husbar	d should leave the c	are of young babies	to his wife.	
6.		ly home will run mo ble for establishing r			e mother is
7.		be the mother's resp rthday party.	onsibility, not the fa	ther's, to plan the y	roung
8.		child awakens at nighte child's needs.	nt, it should be the n	nother's responsibil	ity to take
9.	Men and	women should be gi	iven equal opportun	ities for professiona	al training.
10.	It is wors	e for a woman to ge	t drunk than for a m	an.	
11.		comes to planning a ople to invite.	social gathering, wo	men are better judg	ges of
12.	The entry	of women into trad	itionally male jobs s	should be discourag	ged.
13.	Expensive men.	e vocational and pro	ofessional training sh	nould be given prim	narily to
14.	The husb	and should be the he	ead of the family.		
15.	It is wron	ng for a man to enter	a traditionally fema	le career.	
16.	The important husband.	ortant decisions abou	it career-related issu	es should be left to	the
17.	A woman dating.	n should be careful n	ot to appear more ir	itelligent than the n	nan she is

18	Women are more likely than men to gossip about their acquaintances.
19	A husband should not meddle with the domestic affairs of the household.
20	It is more appropriate for a mother rather than a father to change their baby's diaper.
21	When two people are dating, it is generally best if their social life is based around the man's friends.
22	Women are just as capable as men to operate a business.
23	When a married couple is invited to a party, the wife, not the husband, should be responsible to RSVP.
24	Both men and women should be treated equally when applying for student loans.
25	Equal opportunity for all jobs regardless of sex is an ideal we should all uphold

Balanced Inventory of Desirable Responding

Paulhus (1984, 1988, 1991)

The BIDR measures two constructs: self-deceptive positivity (the tendency to give self-reports that are honest but positively biased) and impression management (deliberate self-presentation to an audience).

Instructions: Using the scale below as a guide, write a number beside each statement to indicate how much you agree with it.

	12	-35	67
	NOT TRUE	SOMEWHAT TRUE	VERY TRUE
	1. My first impression	as of people usually turn out to	o be right.
	*2. It would be hard for	r me to break any of my bad h	nabits.
	3. I don't care to know	what other people really thin	nk of me.
	*4. I have not always b	een honest with myself.	
	5. I always know why	I like things.	
	*6. When my emotions	are aroused, it biases my thir	nking.
	7. Once I've made up	my mind, other people can se	eldom change my opinion
	*8. I am not a safe driv	er when I exceed the speed lin	mit.
	9. I am fully in contro	l of my own fate.	
	*10. It's hard for me to s	shut off a disturbing thought.	
	11. I never regret my de	ecisions.	
enough		nt on things because I can't m	ake up my mind soon
	13. The reason I vote is	s because my vote can make a	difference.
	*14. My parents were no	ot always fair when they punis	shed me.
	15. I am a completely r	ationale person.	

	*16. I rarely appreciate criticism.
	17. I am very confident of my judgments.
	*18. I have sometimes doubted my ability as a lover.
	19. It's all right with me if some people happen to dislike me.
	*20. I don't always know the reasons why I do the things I do.
	*21. I sometimes tell lies if I have to.
	22. I never cover up my mistakes.
	*23. There have been occasions when I have taken advantage of someone.
	24. I never swear.
	*25. I sometimes try to get even rather than forgive and forget.
	26. I always obey laws, even if I'm unlikely to get caught.
	*27. I have said something bad about a friend behind his or her back.
	28. When I hear people talking privately, I avoid listening.
her.	*29. I have received too much change from a salesperson without telling him or
	30. I always declare everything at customs.
	*31. When I was young I sometimes stole things.
	32. I have never dropped litter on the street.
	*33. I sometimes drive faster than the speed limit.
	34. I never read sexy books or magazines.
	*35. I have done things that don't I don't tell other people about.
	36. I never take things that don't belong to me.
	*37. I have taken sick-leave from work or school even though I wasn't really sick.
	38. I have never damaged a library book or store merchandise without reporting 94

it.	
	*39. I have some pretty awful habits.
	40. I don't gossip about other people's business.
	20 assess SDE; items 21-40 assess IM. Add one point for every "6" or "7" um = 0: maximum = 20) * = items keyed in the "false" (negative) direction

Multigroup Ethnic Identity Measure (MEIM)

In this country, people come from many different countries and cultures, and there are many different words to describe the different backgrounds or ethnic groups that people come from. Some examples of the names of ethnic groups are Hispanic or Latino, Black or African American, Asian American, Chinese, Filipino, American Indian, Mexican American, Caucasian or White, Italian American, and many others. These questions are about your ethnicity or your ethnic group and how you feel about it or react to it.

Please fill in: In term	s of ethnic gr	oup, I consider	myself to be		
Use the numbers below to indicate how much you agree or disagree with each statement.					
(5) Strongly agree	(4) Agree	(3) Neutral	(2) Disagree	(1) Strongly disagree	
-	1- I have spent time trying to find out more about my ethnic group, such as its history, traditions, and customs.				
2- I am active in organizations or social groups that include mostly members of my own ethnic group.					
3- I have a clear sense of my ethnic background and what it means for me.					
4- I think a lot about how my life will be affected by my ethnic group membership.					
5- I am happy that I am a member of the group I belong to.					
6- I have a strong sense of belonging to my own ethnic group.					
7- I understand pretty well what my ethnic group membership means to me.					
8- In order to learn more about my ethnic background, I have often talked to other people about my ethnic group.					
9- I have a lot of pride in my ethnic group.					
10- I participate in cultural practices of my own group, such as special food, music, or customs.					
11- I feel a strong attachment towards my own ethnic group.					
12- I feel good about my cultural or ethnic background.					
13- My ethnicity is (1) Asian or Asian American, including Chinese, Japanese, and others (2) Black or African American					

(3) Hispanic or Latino, including Mexican American, Central American, and others
(4) White, Caucasian, Anglo, European American; not Hispanic
(5) American Indian/Native American(6) Mixed; Parents are from two different groups
(7) Other (write in):
14- My father's ethnicity is (use numbers above) 15- My mother's ethnicity is (use numbers above)

Color-Blind Racial Attitudes Scale SCORING

INFORMATION

Neville, H. A., Lilly, R. L, Duran, G., Lee, R. M., Browne, L. (2000). Construction and Initial Validation of the Color-Blind Racial Attitudes Scale (CoBRAS). <u>Journal of Counseling Psychology</u>, 47, 59-70.

Counsein	g i sy circ	710 <u>5</u> y, 17	<u>.</u>	0.
Directions. Below is a set of questions that deal with social issues in the United States (U.S.). Using the 6-point scale, please give your honest rating about the degree to which you personally agree or disagree with each statement. Please be as open and honest as you can; there are no right or wrong answers. Record your response to the left of each item.				
1 2 Strongly Disagree	3	4		6 Strongly Agree
1 matter what race become rich.		ne who w has an e		
2. the type of socia health care or de that people rece	l service ay care)			
3. begin to think of not African American American	themselv rican,		nerica	
4. programs such a necessary to hel	as affirm		tion a	
5. in the U.S.	Racism	is a maj	or pr	oblem
6. determining wh		very im _] essful an		
7. problem in the pa problem today.		may hav is not an		
8. do not have the people in the U.S	same op	and ethn portunit		
9	White p	eonle in	the II	S are

discriminated aga skin.	ainst because of the color their
10 causes unnecessa	Talking about racial issues ry tension.
	It is important for political bout racism to help work society's problems.
12. certain advantag their skin.	White people in the U.S. have ges because of the color of
13 and the culture are	Immigrants should try to fit adopt the values of the U.S.
14 official language	English should be the only in the U.S.
	White people are more to discrimination in the U.S. ethnic minorities.
16 affirmative action White people.	Social policies, such as a, discriminate unfairly against
	It is important for public about the history and racial and ethnic minorities.
18 the U.S. have cer color of their skin	Racial and ethnic minorities in tain advantages because of the n.
19 rare, isolated situ	Racial problems in the U.S. are ations.
20 in who gets sent	Race plays an important role to prison.

Demographic Questionnaire

Age:	Gender:	Ethnicity:		
Generation of immigration is	nto USA:			
Number of multicultural courses taken:				
Number of multicultural reso	earch projects engaged:			
Number of multicultural wo	rkshops participated/conducted	l:		
Number of sessions conduct	ing with White clients:			
Number of sessions conduct	ing with African American clic	ents:		
Number of sessions conduct	ing with Hispanic clients:			
Number of sessions conduct	ing with Asian clients:			
Number of sessions conduct	ing with clients with other raci	al backgrounds:		

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