ABSTRACT

DE VOSE, DELTON WADE. Perceptions of Aggression in African American Male Clients: A Qualitative Study of Licensed Professional Counselors. (Under the direction of Dr. Marc A. Grimmett).

Despite the academic training requirements for multicultural competence in graduate counseling programs and the professional licensing standards, licensed professional counselors have to continue to develop multicultural competence throughout their professional career, especially when working with diverse cultures. The purpose of this qualitative research study was to explore how counselor perceived aggression in African American male clients influences their decision to provide counseling services to African American male clients or to refer these clients to a different provider.

Through the use of semi-structured interviews, this study examined the lived experiences of six licensed professional counselors who have worked with African American male clients to understand the influence their perceptions have had on their professional experience with African American male clients. Two main questions were used to guide this study: What are counselor perceptions of aggression in African American male clients? How do counselor perceptions of aggression in African American male clients affect working with African American male clients? The data collected was analyzed using a thematic analysis. Seven themes emerged from this data. An interpretivist/constructivist theoretical lens was used to interpret the data.

The data analysis revealed that licensed professional counselors clinical practices are impacted by their perceptions; however, their experiences with African American male clients has had the most influence on them. The results of this study provided clarity to what these participants experienced in effort to gain multicultural competence with the African
American male population. The results also provided recommendations to provisionally licensed counselors, licensed counselors, supervisors, and academic programs about what has impacted their multicultural competence and what they believe has helped them to work effectively with African American male clients.
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Perceptions of Aggression in African American Male Clients: A Qualitative Study of Licensed Professional Counselors

by
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A dissertation submitted to the Graduate Faculty of North Carolina State University in partial fulfillment of the requirements for the degree of Doctor of Philosophy

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DEDICATION

First, this dissertation is dedicated to African American males everywhere. This work’s focus derived from the needs of the African American community. Secondly, this is also dedicated to the clinicians who participated in this study. Thank you for allowing me an opportunity to hear and understand your truths about working with African American males. Your perspectives were instrumental in the completion of my work. Lastly, this dissertation is dedicated to my wife (Dina) and children (Quiera, Delton II, Xavier and Kennedy). Be reminded that you can do all things through Christ who strengthens you. Let this also serve as an example that where you come from does not have to determine where you are headed. We can do hard things!
BIOGRAPHY

Delton Wade De Vose is a doctoral student in the Department of Curriculum, Instruction, & Counselor Education at North Carolina State University in Raleigh, North Carolina. Delton earned his BS degree in Criminal Justice with a concentration in Corrections in 1994 from North Carolina Central University in Durham, North Carolina. He earned his MS in Rehabilitation Counseling in 1998 from the University of North Carolina at Chapel Hill. He also completed a certificate program in Addiction Studies from the University of North Carolina in 2011. Delton is currently a Licensed Professional Counselor Supervisor, Licensed Clinical Addiction Specialist and a Certified Clinical Supervisor. His work includes over 15 years of counseling mental health and substance abuse clients, providing clinical supervision, and university-level teaching. Currently, Delton works as a Clinical Counselor for the Department of Defense, and is completing requirements for his Ph.D. expected in May 2015. His research area focuses on self-efficacy and multicultural competence.
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CHAPTER 1: INTRODUCTION

The purpose of this qualitative research study was to explore how counselor perceived aggression in African American male clients influences their decision to provide counseling services to African American male clients or to refer these clients to a different provider. This study explored counselors’ perceptions of African American males, as well as the personal and professional experiences with the population, and training/professional development, that has aided them with this population. Data were collected through semi-structured interviews and analyzed using an interpretivist/constructivist method, in order to obtain thick rich details of each counselor’s lived experiences. This study contributes to current research on multicultural competency when working with African American male clients through understanding the personal and professional experiences of counselors.

Statement of Problem

To paraphrase the words of author Colson Whitehead (2012) people never truly see people, just the monsters they make them out to be. In other words, we never see people for who they really are, but the way we perceive them. Wilhem Wundt, the German father of psychology, offered a definition of perception in his early works. Wundt defined perception as being created by a combination of elements, called sensations, together (Goldstein, 2009) to form a perception. Merriam-Webster (2011) defines perceptions as the way you think about or understand someone or something; the ability to understand or to notice something easily; the way you notice or understand something using one of your senses. In other words perceptions are not just objective, but also subjective beliefs based on one’s experiences.
Therefore, one can conclude that Whitehead’s opinion that one person’s ‘monster’ is another person’s ‘angel’ could be considered as a true statement. Since we know that perceptions are based on experiences it is reasonable to assume that when misperceptions occur one’s initial association with the experience may have been flawed. People make decisions based on flawed perceptions, which have consequences, sometimes extreme in nature, for their lives and the lives of others.

Consider the events of February 26, 2012, when one man’s perceptions influenced his actions, leading to a tragic outcome (Yancy & Jones, 2013). On this particular day, a 17 year-old, African American male named Trayvon Martin walked to the store through a suburban neighborhood to purchase a soft drink and candy. He left the store in Sanford, Florida with plans to return to his father’s home, but was killed by George Zimmerman before he could return. While the events that occurred that night may be unclear, what is clear, however, is that Zimmerman’s perceptions of Martin (and perhaps other young African American adolescents who wore hoodie-style sweatshirts) lead to him confronting and eventually fatally shooting Martin, who was unarmed at the time. Based on Zimmerman’s actions he appears to have developed a belief about Martin that he was not of good intentions. Zimmerman held strong beliefs that influenced his behaviors; however, his beliefs are not ones that he holds alone. His line of thinking developed based on his experiences, how he viewed the world, and the people in it. What happened to Trayvon Martin serves an example of the type of misperceptions about African American males many
people hold, even counselors. Next the research will address the long lasting impact of perceptions.

**Perceptions of African American Males**

It is sad, but true that America, the land of the free, has a deeply rooted history associated with distorted beliefs about African Americans and racial profiling (Crowe, 2003). African American males are often burdened with being the target of racial profiling more than any other race regardless of their level of education (Crowe, 2003; Delgado & Stefancic, 2012). Henry Louis Gates, Jr., for example, a highly accomplished professor at Harvard University was arrested at his home because a neighbor thought Gates was breaking into the home (The front porch, 2009). Even after explaining he was the owner of the home, the Harvard professor was still arrested. Another example of how perceptions influence behaviors is when another Harvard University professor, Allen Counter, was arrested in 2004 while walking across campus because he fit the profile of a robbery suspect (The front porch, 2009). Many African Americans are profiled because of their skin color (Moody, 2008). In fact, researchers, such as Wilhelm Wundt have attempted to establish an understanding of how perceptions are formed. His work in the field of psychology is credited for attempting to provide clarity regarding how perceptions are formed.

Other researchers such as Gestalt Psychologists have also worked to expand Wundt’s definition by identifying several principles of how perception is formed (Goldstein, 2009). According to Goldstein (2009) Gestaltens would say that the whole differs from the sum of its parts. This would imply that perceptions are made of different components, but to single
out one component could adversely impact how perception is formed. Croskerry (2013), a medical doctor recently discussed how clinicians’ perceptions could be misleading, causing inaccurate diagnosis, and improper treatment. Croskerry further stated that much of clinicians’ everyday thinking is flawed as a possible result of over 100 different cognitive biases. He explains that oftentimes, when flawed decisions are made or we fail in making a good decision, the situation is based on how our minds process information. Be it due to perceptions or flawed decision making major decisions such as what type of clients to serve are routinely made by clinicians. These types of perceptions Croskerry referenced in regards to clinicians occur in everyone. How these perceptions are formed and the influence they have become critically important concerns that have to be addressed when attempting to provide effective services to all people. However, this is not an easy task to combat when new incidents continue to perpetuate the images we hold in our minds about a particular thing, such as the rate of incarceration of African Americans. Everyday of the week the newspapers and news broadcasts report criminal acts occurring in the world. These reports continue to propagate stereotypes of not just the people who commit those crimes, but of those who look like them.

Let’s look at the facts as given by the Bureau of Justice regarding the people who are actually incarcerated for committing criminal acts. The Bureau of Justice Sentencing Project (2007) reported that per every 100,000 Americans nationally there are 412 White Americans incarcerated in comparison to 2,290 African Americans. In addition, the Sentencing Project reported that African Americans are almost 6 times more likely than Caucasian Americans to
be incarcerated and 1 in every 9 African Americans between the age of 25 and 29 are incarcerated. In fact, African Americans made up 900,000 of the 2.2 million people incarcerated. Statistics like these may influence how African American males are perceived and how people interact with this population. Alarming rates such as the number of African Americans incarcerated could negatively impact perceptions of the African American race and lead one to make generalizations about them that impact one’s desire to interact with the race. The number of African American males currently incarcerated is not typically on the nightly news, but pictures and descriptions of the people, who committed the crimes, when available are. These types of daily news reports influence the development of perceptions.

**Media Influence on Perception**

Daily television news broadcast, newspapers and online media are all sources of information about the behaviors of people in our community. Images depicted by media can impact how a portrait of a person can be painted. Ford (1997) in an article titled the *Effects of Stereotypical Portrayals of African Americans on Person Perceptions* indicated that the way African Americans are depicted on television has proven to influence the perceptions of African Americans. In many cases, media exposure has been the only connection people have with diverse populations, thus potentially creating inaccurate perceptions. Greenberg (1972) reflected that half of the White Americans in his study indicated that television has served as their primary resource regarding information about African Americans. Research has shown a connection to the images television has established about African Americans and how people view African Americans. Dixon (2008) indicated that viewing network
news supported stereotypes of African Americans as being poor and intimidating. Gilens (1999) summarizes that the depiction of African Americans as being poor on the news increases the beliefs non-African Americans have of them being lazy and undeserving of government assistance programs. Television characterizations of African Americans help to endorse a negative perspective of African Americans as evidenced by a Busselle & Crandall (2002) study. Their study reported that college students watching the news endorsed the idea that African Americans lacked jobs and did not want to work (Busselle & Crandall). Even more, Entman (1994) found that African Americans were largely represented as perpetrators or victims of crime and that African Americans were more likely than Whites to appear as a perpetrator in drug and violent crime stories on network news. Even in acting roles African Americans were negatively portrayed. Oftentimes, African Americans were given roles that portrayed them as criminals, comedians, con artists, or womanizers because those were the type of roles available for African Americans in the industry (Ford, 1997). These types of role portrayals have impacted the perceptions people have of African Americans even today. Federal reports, criminal acts, movies, news, and other forms of media have all helped to preserve an impression of African Americans. Impressions that consider African Americans as dangerous, criminals, or aggressive are difficult labels to stop being associated with African Americans, especially when they have historically been villainized and media continues to prime societal perceptions of them. This is in no way an attempt to proclaim that African Americans do not commit crimes, but it is my intent to understand how the typecast given to them as being aggressive has impacted clinicians and their service delivery.
Aggression

Engelhardt and Bartholow (2013) defined aggression as “any action that is intended to cause harm to another individual who is motivated to avoid being harmed. For this study the definition of aggression offered by Eagly and Steffen (1986) will be used. Aggression is defined as a behavior displayed with the purpose of causing harm to someone who does not want to be harmed. Aggression is considered to be physical or psychological. Engelhardt and Bartholow stated that the harm from aggression could range from verbal comments, non-verbal behaviors, to extreme violent acts. Most people have experienced some form of aggression. DeWall et al. (2006) reported, “violence and oppression have blackened every corner of the world” (p.6). Researchers have sought out to explain the root causes of aggression and have formed numerous reasons for the behavior, but the impact of aggression appears to have lasting effects. Equally important in understanding why acts of aggression occur is how people perceive acts of aggression and the impact it has on a person and their decision-making.

In the field of counseling, counselors typically have some type of decision-making when it comes to selecting a targeted population to serve. In this study, one point of interest was to understand if there were perceptions of African Americans as being aggressive and how that impacts counselor decisions to serve them. Granted that some of these perceptions are based on stereotypes and not fact, but stereotypes have significant effects nonetheless. For example, Weitz and Gordon (1993) reported in their study that a common thought about African American women was they were loud, talkative, and aggressive. Duncan (1976)
reported stereotypes of African Americans as being aggressive and likely to engage in criminal behaviors. These types of beliefs would lead people to make their own conclusions about the onset and variety of environments in which these behaviors are developed. According to a study by Harrison and Esqueda (1999), participants perceived African Americans to be more aggressive than White Americans. Therefore, there is evidence to support that perceptions of aggression can be skewed based on stereotypes of a race, by media and just a lack of knowledge. These types of occurrences serve as a formative component of the decision-making process to work with specific populations such as African Americans. Therefore, counselors’ decisions to work with aggressive African American males are heavily influenced by the counselors’ perspectives of aggression, client specific experiences, and level of multicultural training.

**The Need for Multicultural Competence**

Cross-cultural counseling competence has been a longstanding problem. Issues like oppression, discrimination, and a plain lack of knowledge about what is culturally different has helped to create this problem. In an early study, Sue (1977) indicated that 50% of minorities failed to return to counseling as a result of the lack of cross-cultural competence of the therapist. Moreover, early literature around the time of the development of the Sue, D.W., Bernier, J.B., Durran, M., Feinberg, L., Pedersen, P., Smith, E., & Vasquez-Nuttall, E. (1982) seminal work reflected myths about African Americans. These myths claimed that the issues minorities had in treatment was as a result of minorities being considered to be racially inferior. There has been a long-standing belief that minorities are genetically
different. Some people believed that people who were identified as culturally different were considered to be deficient (Sue et al., 1982). For an example, researchers in the late 1960s and early 1970s believed African Americans were genetically inferior. These same researchers believed that because minorities were thought to be inferior and less intelligent they should not reproduce (Sue et al., 1982). During that time social scientists interpreted their findings from their own personal and social value system (Sue et al., 1982). This would mean that instead of acknowledging their biases and ensuring they are not influencing their research they would analyze and make inferences from their personal worldview. As a result biases, racist attitudes, and narrow-minded perspectives negatively depicted minorities in journals as being psychotic and inferior (Sue et al., 1982). Erroneous facts have continuously influenced the way people see the world. For example, researchers like the British psychologist, who fabricated his research results, indicated that African Americans were inferior because they inherited inferior brains (Sue et al., 1982). During that time it was common to see racial minorities being depicted as genetically deficient. Sue et al. (1982) believed that the researchers who depicted minorities as being deficient were in fact being culturally biased and used inappropriate references about minorities as being culturally deprived or deficient. Sue et al. (1982) identified that these myths and misunderstandings were significantly related to the lack of progress in the field of cultural competence. Moreover, as a result of the lack of cross-cultural competence, African Americans were given more negative evaluations than White Americans and often received less desirable forms of treatment (Sue & Sue, 1990). These myths and stereotypes of minorities has
created a lack of personal knowledge and experience with minority populations and has caused a distance between cultures that would later take years to repair.

**Rationale for Study**

Through the use of qualitative methods this study explored the lived experiences of six licensed professional counselors (LPC) within the North Carolina Research Triangle (an area roughly defined by its proximity to North Carolina State, Duke, and University of Chapel Hill). The researcher conducted semi-structured interviews to obtain thick rich data from the participants. The purpose of this study was to examine if counselors’ perceptions of aggression in African American male clients influenced their desire to work with the population or has it lead them to refer out to what they perceived to be a more appropriately qualified counselor. This study-examines factors contributing to referring counselors’ perceptions of the population, experiences with the population, specific academic training, professional development and supervision related to working with African American males. Furthermore, this study strives to uncover what counselors believed they needed to prepare them to work with African American males.

**Research Questions**

This study explored the lived experiences of six LPCs who have served African American male clients. Two main questions were used to direct this study:

1. What are counselor perceptions of aggression in African American male clients?
2. How do counselor perceptions of aggression in African American male clients affect working with African American male clients?
Because the goal of the research was to understand the participants’ perception of their experiences and decisions in working with African American male clients, a qualitative methodology was identified as the most appropriate research method. Using a semi-structured interview format, factors that contributed to counselor perceptions of African American male clients were examined.
Definitions of Terms

1. **African American/Black**- is a term that is used to represent members of the US due to its “relationship to ethnicity, defined by cultural traditions and nationality.” (Grimmett & Locke, 2013).

2. **Aggression**- Aggression is defined as behaviors that are displayed with intent to cause harm or strongly influence someone or something (Eagly & Steffen, 1986; Hyde, 1984).

3. **Self-efficacy**- is a person’s beliefs about their abilities that will determine how they will react or engage in certain activities (Bandura, 1994).

4. **Culture**- “Values, attitudes, beliefs, customs, traditions, patterns of thinking norms, and mores. Learned behaviors ideas, and perceptions are passed down through generations.” (Cross, 1989).

5. **Cultural Diversity**- “The representation, in one social system, of people with distinctly different group affiliations of cultural significance.” (Cox, 1993).

6. **Perception**- Created by the combination of elements, called sensations, together” (Goldstein, 2009).
CHAPTER 2: LITERATURE REVIEW

Perceptions of Aggression

Individual perceptions are based on one’s own reality. What one thinks is what one believes, or at least it seems. Counselors are no different than any other person in this regard. They have personal beliefs that impact their judgments and actions. Over the course of a counselor’s life many different experiences can positively or negatively impact their choices, beliefs or what they perceive to be true. Socio-economic status, cultural influences, location, age, gender, media, and personal experiences are a few factors that help to formulate perceptions of others. A good or bad experience with a certain population could enhance or limit one’s ability to effectively engage that particular population at a later time. In the next section the researcher will review how perceptions are developed and examine the impact perceptions have had on counselors.

Perceptions. As previously mentioned in chapter one, Wilhem Wundt provided a definition of perception based on his early works. He states that perception is “created by combination of elements, called sensations, together (Goldstein, 2009).” Merriam-Webster (2011) defines perceptions as the way you think about or understand someone or something; the ability to understand or to notice something easily; the way you notice or understand something using one of your senses. In other words perceptions are subjective beliefs based on one’s experiences. Perception is but one factor that affects the therapeutic relationship between counselors and their clients; however, it can be a major influence.

Let us take Duncan’s (1979) study, which examined the perceptions that White Americans have of other White Americans and Black Americans when both performed an
identical task. In this study Duncan illustrates an example of how perceptions impact choices. In Duncan’s study, White male participants viewed four videotaped situations in which male actors portrayed a scenario where both a verbal and physical act of aggression took place. The actors in the video were either same race or opposite race of the observer. Each race had an opportunity to play both roles as the perpetrator and the victim of a physical act of aggression.

In Duncan’s (1979) study he found that 75% of the participants chose the violent behavior category when the videotaped exchange was between the Black perpetrator and a White victim while only 17% chose the same category when pairing a White perpetrator and Black victim. Sixty-nine percent of the participants selected the category indicating a violent behavior had occurred when both participants were Black males and only 13% when both participants were both White males. Duncan (1979) replicated the earlier research with Black males and Black females as the participants and found that 87% chose that a violent act occurred when the Black person portrayed both the perpetrator and the victim; however, 56% felt a violent act occurred when the perpetrator was Black and the victim was White. For the White-on-White violent act and the White perpetrator/Black victim scenarios, 13% of the participants rated them as violent acts. With that stated, it leads us to believe that White Americans’ perceptions of African Americans could be affected by their preconceived beliefs about African Americans. Furthermore, it is reasonable to assume that the judgment of White American professionals may be distorted as a result of preconceived biases toward this population. Triandis’ (1976) theory on subjective culture indicates that people from
different environments view the social environments differently. In fact, the distinct perspectives are results of the differing groups’ values and beliefs.

A similar study was conducted 12 years later. Phelps, Mera, Davis, and Patton (1991) studied 80 White graduate and undergraduate students and 80 Black graduate and undergraduate students all of whom ranged from 18 to 41 years of age. In this study, participants were asked to review two drawings and a short conversation between two roommates and then review the drawings again and complete three inventories. The drawings were of two females in four different combinations. In one combination both women are White, another they are both Black, and in the remaining two their roles are alternated.

The results indicated “White women gave significantly higher ratings of aggression than Black women” (Phelps et al., p. 348). White women in this research responded that the verbal exchange in the vignette was more aggressive than Black women regardless of the race identified of the aggressor. In this research, perceptions of aggressiveness may be slightly related to the race of the participant, aggressor, or target but not significant. This research also indicated the necessity for professionals to be aware of their own views of aggression and other biases and how they together impact one’s relationship with the aggressor. “A counselor’s perception of aggression can affect how he or she views the behavior, interprets the comments, or judges the intentions of a racially or ethnically different client” as well as how the client should change (Phelps et al., p. 349).

This study showed that the perception of aggression is not just based on the race of
the aggressor or of the person observing the aggression. It did demonstrate that other factors contributed to the perceptions reported by the White women. When observing both White and Black women in aggressive roles, White women could see the aggressiveness portrayed by both White and Black females much more than how the Black females viewed the same situations. This indicated some differences in interpretation of aggression, which could be justified by the different personal, social, and professional exposures to violence and/or aggressive behaviors. Phelps et al. (1991) reported that it is reasonable to assume that perceived differences between prospective clients and counselors could affect the therapeutic relationship between those clients and counselors. Historically, the relationship between Black and White Americans has often been viewed as hostile. This tension that has long existed between Black and White status groups may have implications for counseling as a result of how the persons in both groups have been socialized.

Based on the previous studies we can identify perceptions that are in fact subjectively developed and have tremendous implications in the field of counseling. Therapeutic relationships can be affected by the racial conflicts that have historically existed between potential counselors and clients of different races and genders. Family values, beliefs, and how the counselors and clients have been socialized will also play a part in how perceptions are developed and how each of them perceives aggression.

**Aggression**

**Definition of aggression.** Multiple researchers have defined aggression in the past. For an example, Baron and Richardson (1984) offered a brief definition of aggression as a
behavior that is intended to harm. Intending to harm someone is considered an aggressive act; however, this definition does not provide clarity about the various forms of aggression. Engelhardt and Bartholow (2013) also defined aggression as “any action that is intended to cause harm to another individual who is motivated to avoid being harmed.” For the purpose of the present study, the definition of aggression offered by Eagly and Steffen (1986) will be used. Aggression is defined as behaviors that are displayed with intent to cause harm or strongly influence someone or something (Eagly & Steffen; Hyde, 1984). Eagly and Steffen states that aggression can be manifested in different ways, such as nonverbal, verbal, or physical ways. Nonverbal aggression is an act that causes or intends to cause harm or persuasion without a verbal exchange, for example intimidating looks, balling of fists, or folding arms (Eagly & Steffen). Furthermore, nonverbal aggression can also be expressions of words or sounds that are used in various tones or intensity that cause a person or animal to feel threatened or intimidated (Eagly & Steffen). Aggression can also be physical in nature, such as acts that are targeted toward a person or thing to be physically harmed or to cause them to feel threatened (Eagly & Steffen). People can display aggression in multiple ways, such as in conversation, arguments, tone of voice, letters, email, body position, gestures, and looks to name a few. How one perceives and responds to aggression can be directly related to how they were socialized in their environment. For example, in the Phelps et al. (1991) study the researchers reported that White women perceptions of aggression were grossly different than those of Black women. Rogers’ (1983) research on interracial aggression led to the grouping of aggression into four components: personality and attitudinal factors of an
aggressor in minimal social situations; antecedent conditions that instigate aggression; factors whose presence inhibits aggression, but absence does not inhibit aggression; and variables that control aggression.

In this section the types of aggression have been reviewed and defined. In the following section another variable, media priming, that has influenced perceptions of ethnic minorities, will be explored in an effort to understand factors that impact counselor perceptions and multicultural competence.

**Media Priming.** The old cliché believe half of what you see and none of what you hear is good advice, but not always taken. This cliché is meant to encourage one to examine the full story and not just believe everything heard or seen. In today’s society oftentimes what is heard and seen is considered to be true, particularly if the media is involved. For example, if the news said it or if it is on the Internet it must be right. Media is a powerful tool used to disseminate information to the world, which can be good and bad (Zillman & Brosius, 2000). Even early in the 20th century researchers understood the role media had on its consumers. For example, Lippman (1922) reported that media develops artificial constructs that best describe reality. Pictures, radio broadcast, books, television, and other forms of media can re-enforce preconceived ideas of certain status groups. Ramasubramanian (2011) indicated that the history of media reports reflecting negative stereotypes of African Americans is nothing new and has been around for a long time. Research on character portrayals in the media also known as media priming began in the early 20th century (Appel, 2011; Harwood & Anderson, 2002). Media priming is defined as
“media influence more than just social judgments of ambiguous targets” (Ramasubramanian, 2011, p.498).

Television, news and other forms of media have been used for years to inform the masses about negative stereotypes. Harwood and Anderson (2002) reported that television is a main location where the connection between social groups, stereotypes, and group identity are displayed. Gibbs (1988) reported that Black males are largely portrayed in the media as being criminals (Dixon & Linz, 2000; Entman, 1992, 1994; Entman & Rojecki, 2000), dangerous, and dysfunctional. It is stereotypes such as this that can impact real world beliefs (Ramasubramanian, 2011). This means that this type of perception could negatively impact how non-African Americans develop a belief about African American males. This same type of belief could also influence White counselors to avoid counseling African American male clients who they perceived to be potentially aggressive based on what they have learned vicariously through media. Entman and Rojecki (2000) reported that the media activates a belief about African Americans among non-African Americans. As a result, White counselors may not be as successful with clients they perceived to be potentially aggressive. Furthermore, White counselors who make such determinations may not be able to connect with African American male clients and or provide them quality therapeutic experience. Appel (2011) stated even at the time of his study there was still evidence to suggest that media still has priming effects.

Givens and Monahan (2005) conducted a study to examine if perceptions of African Americans would be associated with them being angry or nurturing after being exposed to an
image of an African American woman. This study explored how portrayals of African American women impact judgment of them in social situations. The study consisted of 182 participants who observed a mammy, Jezebel or non-stereotype image followed by observing an African American woman or White American woman engaged in a mock job interview.

The findings of this study illustrated that African American woman interviewees were more often considered aggressive rather than sincere. For the participants who observed the stereotype images of African American woman related more negative terms to them versus more sincere terms. Surely it is possible that the perceptions noted in this study are associated with the images only; however, it is also plausible to consider that the perceptions were deeply connected to prior experiences. Based on the findings of this study the researcher suggested future research conducted on this topic should aim to understand influence images have on a person’s perception.

A Dixon and Alomar (2007) study examined the effects of viewing news long term has on the stereotyping of African Americans. The researchers conducted two experiments to identify the extent that news viewers perceive African Americans as having limitations to success, if they are in support of the death penalty, and to identify if culpability decisions are a result of over exposure to racial news over time. All participants were surveyed about their normal news viewing. The participants were exposed to a majority of African American and White suspects, unidentified suspects and non-crime news.

The findings from the first study indicated that the heavy news viewers who observed unidentified suspects were less likely than heavy news viewers who observed non-crime
stories to perceive African Americans as facing limitations to success. However, heavy news viewers who observed unidentified suspects were more in favor of the death penalty than the other group of viewers who observed the non-crime stories. In the second study, the heavy news viewers who observed a majority of African American suspects were more likely than the heavy news viewers who observed non-crime stories to find a race-unidentified suspect at fault for his offense.

In a Dixon and Alomar (2007) study, the news served as a viable source of information that impacted its viewers’ judgment. It is these same types of influence counselors have to be concerned about when working with clients. It is imperative that counselors understand their perceptions of potential clients prior to engaging in therapeutic relationships because it may cause various side effects. Side effects, as an example, could manifest as poor client-counselor rapport, lack of client progress, and early discharge or termination of services. As a counselor these types of side effects speak to greater issues within the counseling arena. Side effects such as these reflect deficits in counselor multicultural competence. Low levels of counselor’s multicultural competence could be associated with many factors such as lack of cross cultural training, lack of experience/exposure to culturally diverse groups as well as little interest in changing. Biases run deep and are difficult to let go of and could influence the decisions counselors’ make about the population they serve. However, counselors who desire to enhance their multicultural competence must be willing to explore some deeply rooted beliefs or biases that have previously shaped who they have become. Counselors who actively engage in ongoing
multicultural competence training are also working to dispel myths and misunderstanding about the culturally different.

In the next section, the counselor explored common myths about ethnic minorities and the influence it has on others interactions with that population.

**Myths.** The counselor’s viewpoint can play an integral part in the outcomes in any therapeutic relationship. Croskerry (2013) indicated that many of the views of clinicians could be inaccurate as a result of their biases. In fact, if counselors have some underlying issues or biases with a population, their ability to provide unconditional positive regard may be affected. As an example, consider what a Douglas (1993) report indicated about the perceptions Europeans have of African Americans. Douglas (1993) stated, “Europeans and European Americans have often compared the African American male to lower animals, described them as undisciplined buffoons, intellectual inferiors and as having a propensity for violence” (p. 4). Additionally, Douglas’ research reports that “African Americans are often stereotyped as not being psychologically minded as not being motivated for treatment and as not being articulate enough to successfully engage in talk therapy” (p. 5). Such negative stereotyping has withstood the test of time and has affected African American males of every age, social status, and geographical region (Crowe, 2003). This does not mean that everyone views African Americans as previously described; however, it indicates that people have their own impressions of different cultures and races of people.

As an example, Douglas (1993) conducted two case studies in which he examined how African American clients were misdiagnosed. In one of the case studies, Douglas
reported how the client’s race, size, and history of aggression were used to identify a diagnosis of schizophrenia by a White American clinician. Upon closer review, it was determined that the client was misdiagnosed and placed in the wrong environment for treatment based on the White American’s perceptions about African Americans. As reported in Douglas’ research the clinical impressions were that one client was aloof, quiet, and sullen. According to Douglas, in actuality this particular client did not like to engage in activities nor did he like speaking to people he did not know. He was subsequently diagnosed with major depression with psychotic features. As the client began to work with Douglas, he was able to make a connection because he too was an African American. The client would later inform Douglas that he would not talk with certain staff members unless they were African American as a result of his experiences when previously hospitalized. Having increased knowledge will help to invalidate stereotypes or opinions and can allow clinicians more latitude in their therapeutic relationships instead of risking being narrow minded due to their limited knowledge of populations of people that are different than they.

The results of Douglas’ study further reflected how the perceptions held by a White American clinician about African Americans impacted their judgment and clinical practice. This research study did not provide support as to the reasons why the participants’ perceptions were what they were, but rather it indicates that preconceived beliefs whether appropriately validated through experience or myth continue to impact choices and perceptions of others.

According to Bryson (1998), both professional and popular literature indicate that
individuals and groups have negative views of African Americans. *Ebony*, a popular magazine, identified the 10 greatest myths about Black men. “The myths are Black men are naturally gifted athletes, cannot sustain stable relationships, are sexually superior, lack business ability, have no talent for science, and are usually endowed physically, are lazy and shiftless, crave White women, and are prone to be violent, and are docile and subservient” (Bryson, p. 283). There is a long history of media reporting demeaning stereotypes of African Americans (Ramasubramanian, 2011). These myths developed out of ignorance and have circulated around the nation leaving an impression upon non-African Americans about African Americans.

In an effort to understand attitudes about Black males, Bryson (1998) conducted a study using a Likert scale entitled The Attitude Toward Black Males. The sample consisted of 630 undergraduate and graduate student participants who were social work majors and had been enrolled in a diversity course. The results of this research indicated that the majority of the participants had preconceived beliefs about Black Americans. The participants in this research were students who were being trained to work in the human services field. Their assumptions or biases about Black Americans, unless addressed, could have impacted their ability to provide services to African Americans.

Busselle and Crandall (2002) conducted a study with 139 participants regarding their perceptions of African American and White American success rates as well as factors associated with different socioeconomic status between the races. The researchers used a questionnaire to identify the number of hours the participants spent watching seven different
television programs.

The findings reported that viewing different types of shows influenced perceptions of African Americans level of education, success rates, and socioeconomic status. This report also indicated that the participants who viewed African Americans in comedic programs had an increase in perceptions of African American educational achievements.

In this section, I explored articles and research studies that reflected how media impacts perceptions of people as well as how myths/stereotypes of African Americans influence behaviors. In the next section, cultural competence is defined and a review of how counselor’s cultural competence is developed is presented.

**Foundation of cross-cultural competence.**

Seminal work by Sue et al. (1982) in the field of cross cultural competence/multicultural competence has served as a foundation in the counseling and psychology fields for decades. Sue et al. (1982) acknowledged that many factors contributed to counselors being culturally biased. In the Sue et al. (1982) position paper the researchers identified that ethnic and linguistic misunderstandings between cultures that have lead to isolation and created barriers in building a connection and trust. One of the main reasons for this was because of the culturally biased counseling practices of that time (Sue & Sue, 1999). There was a significant lack of knowledge about cultural differences. Research identifying the various types of ethnic groups was limited during this time (Sue et al., 1982). Sue (1998) acknowledged that cultural competence continued to be a pressing issue as a result of the overwhelming lack of sufficient services to minority cultures. Sue and Sue
(1999) indicated that many claims have been made about counseling theories and counseling practices not bearing significance to people who are not a part of the Euro-American culture. As a result of the lack solid research on cultural competence Sue reported that he was led to pursue this line of research on cross-cultural counseling competence (Sue, 1998).

**Suitable Services**

Sue et al. (1982) noted that since the early 1960s there has been a concern about whether or not the type of services provided to minorities was suitable. Therefore, in attempt to address the cross-cultural counseling competence needs in the field of counseling and psychology Sue et al. (1982) wrote a position paper where the researchers specifically identified and recommended competencies to be used as a standard for the field. In their paper three main areas were outlined. In their position paper they first wanted to examine common myths and misunderstandings that have challenged the development of suitable and significant counseling therapy competencies for people of diverse cultures. The second main point was to define cross-cultural counseling. Lastly, the third significant focus was to suggest implementation of specific cross-cultural counseling competencies to be used for the purposes of accreditation.

**Therapist background.** As part of Sue et al. (1982) seminal work they acknowledged the importance of therapists understanding themselves as part of their development. Sue et al. (1982) noted that little focus was given to a therapist’s own cultural background and biases. They believed it was wrong for therapists to believe that they were better able to work with minorities just from having a better understanding of their own
culture and biases. In order to effectively work as a clinician one has to be willing to accept that one lives in a multicultural environment and that it is unlikely one will not have experiences with people from culturally different backgrounds that are unlike their own. Like Sue (1982), Jackson (1995) believed that therapists could no longer provide one type of counseling for all clients. The one size fits all mentality was no longer appropriate. This would suggest that counselors had to learn effective tools, techniques, and other types of counseling to effectively serve people from diverse backgrounds. To be trained cross-culturally we have to go beyond just studying the culturally different in America, but to also seek to understand the challenges these cultures have experienced historically (Sue et al., 1982). It is not realistic for one to believe that studying just the differences between cultures would be enough to break through the deeply rooted historical connection to the oppression and the discrimination of that culture (Sue, 1981). There are deep emotions such as feeling powerless, anger, and rage that have to be addressed that have impacted cross-cultural relationships.

In the Sue et al. (1982) position paper the researchers defined cross-cultural counseling as “any counseling relationship in which two or more of the participants differ with respect to cultural background, values, and lifestyle” (p.47). During the time of this paper Sue et al. (1982) indicated that most often someone from a dominant culture filled the therapist role. However, cross-cultural counseling dynamics do not just have to be this way. In fact, cross-cultural relationships could be where both therapist and client are minorities, but from different ethnicities. They may also be ethnically and linguistically similar, but
belong to other cultures as a result of their gender, sexual orientation, socioeconomic, and age. Sue et al. (1982) believed that in every therapy client relationship there is to some degree cross-cultural issues. By having that understanding therapists have to acknowledge this as a strength and recognize the impact it has on the counseling relationship.

Problems with cross-cultural counseling

Cross-cultural counseling can produce many positive experiences, but there are also some major problems that can develop. As a result of the cultural differences in the therapist and client it can be difficult for the therapist to truly relate to the client and the issues they are dealing with. The therapist’s view of the world could also be impacted creating difficulties in being able to have empathy for the client. Furthermore, the ability to use culturally relevant tools to relate to the client could also be impacted. Sue (1981) believes that therapists can be most helpful when they can hold the same worldviews, which typically is a reflection of ones’ cultural background and experiences.

The Sue et al. (1982) position paper developed competencies to help counselors build cross-cultural counseling competency resulting from the lack of connection mental health providers had with minority populations. Sue et al. (1982) believed that professionals who treated minorities lacked understanding and insight about the values of the ethnic minorities. During the time when Sue et al. developed their position paper, professionals other than mental health providers began to recognize the absence of cross-cultural training. Prior to the development of the Sue et al. (1982) seminal work in cross-cultural counseling competence various conferences reported a lack of training dealing with racial, ethnic,
sexual, and economic issues. Cross-cultural concerns began to become a buzz topic in the field and as a result of the deficits in cross-cultural counseling training the American Psychological Association (APA) developed a board to address concerns with research, training, and service delivery. Based on the purposes of the board and the cross-cultural training needs of professionals who served minorities Sue et al. (1982) developed a list of general guidelines that would help develop competencies when working with people from culturally different backgrounds. These guidelines have been the primary basis of cross-cultural counseling competency since its inception. Sue et al. (1982) identified beliefs/attitudes, knowledge, and skills that have served as the core competency for cross-cultural counseling training.

**Client matching is the same as cross-cultural competence. Right?**

Even years after cross-cultural competencies were established and implemented there was still a lack of competence among professionals in the field. Cross-cultural competence was and is one of the most talked about topics for people interested in working with minorities (Sue, 1998). In order to be effective in working with people of diverse cultures or culturally different one has to be culturally competent (Sue, 1998). Sue believes that in order to effectively work with people from different cultural groups they must first learn how to appreciate their own culture (1998), but that is not enough.

In Sue’s (1998) article the researcher studied the problems in the mental health field while also attempting to examine cultural competence. During this process he sought to define the cultural competence and understand the upcoming policies developing from this
line of research. Sue (1998) agreed with other researchers who believed that one of the largest problems in the field of counseling at that time was the lack of effort to appropriately match patients and providers culturally and linguistically (Aponte, Rivers, & Wohl, 1995; Comas-Diaz & Griffith, 1988; Sue, Ivey & Pedersen, 1996). These types of problems in the field of mental health impacted national associations like the APA, which later lead the group to develop ethical guidelines for practitioners. The APA attempted to ensure practitioners in the field of mental health had guidelines to ensure ethical and appropriate service delivery to the culturally different.

Sue, Fujino, Hu, Takeuchi and Zane (1991) conducted a study on cultural matching. In this study the researchers wanted to explore aspects of cultural competence. Specifically, Sue et al. (1991) examined if treatment options were better for patients when the counselor and patient race are the same versus when the counselor and patient are not of the same race. The researchers explored if there was evidence that would confirm or suggest that ethnic patients benefit from receiving services from other ethnic providers. They also studied if there were indicators that reflected the need to match client and provider racially. Other questions such as do ethnic people receive better services from ethnic providers and if treatment was better for the patient when the patient and the clinician think in similar ways were also part of the main focus of this study.

In this study the researchers used a sample size of 1000 men who were African American, Asian American, Mexican American, and White American that were treated in Los Angeles county for mental health. The purpose of their study was to examine the length
of treatment, dropout rates, and treatment outcomes. In this study Sue et al. (1991) used the Global Assessment Scale for pre and posttest evaluations to specifically identify if clients being matched with providers based on race and linguistically impacted the number of sessions attended, lower dropout rates and better treatment outcomes. Both dropout rates and the length of treatment were explored in his study because of evidence he found in previous studies that identified them as being significant factors.

In this study, the therapists were assigned the task of scoring the clients subjectively on a 100-point scale regarding their level of functioning. The results of this research demonstrated that for the Asian Americans who were not acculturated did better with having more sessions when they were treated by a therapist who was ethnically and or linguistically matched to them. The Mexican Americans were similar to Asian Americans. For African Americans and White Americans being ethnically matched was a significant factor in both of them continuing treatment. However, African Americans and White Americans treatment outcomes were not found to be related to ethnic matching. Overall, the research findings indicated that White Americans were less likely to drop out of treatment early than African Americans when they were matched ethnically (Sue et al., 1991).

In this study, Sue et al. (1991) provided a excellent example of how ethnic and linguistic matching can impact outcomes of treatment. Sue et al. (1991) believed that when considering acculturation, ethnic matching can have a significant role in the outcomes of treatment. The findings in this study reported that when there was an ethnic and or linguistic match with the client the number of sessions completed was increased and the drop out rate
was lowered. The findings also indicated that ethnic and linguistic matching does not always work well for the client or even for managed care as it could increase the cost of treatment.

The Sue et al. (1991) support of racial and linguistic matching as well as supporting the idea of recruiting and training minorities to work with minorities, raised issues of segregation in their work. Researchers like Kramer (1984) believed that client matching was considered to be an example of segregating clients. Sue et al.’s (1991) focus was never to support racial divide; however, they recognized that client matching has had some benefits.

How is multicultural competence taught?

Pieterse, Evans, Risner-Butner, Collins, and Mason (2012) conducted a data analysis and syllabi review of multicultural counseling course syllabi from the Council for Accreditation of Counseling and Related Educational Programs (CACREP) and the American Counseling Association (ACA) accredited programs. The goal of the study was to develop a lens to evaluate and enhance the current styles of teaching courses in multicultural counseling and social justice trainings. Pieterse et al. limited the review of syllabi to courses that students are required to take in multicultural counseling in effort to gain clarity about the course content.

For the purposes of this study, the researchers targeted 200 schools with counseling and counseling psychology graduate programs in the United States identified by the APA and CACREP websites. However, 62 of the 200 schools responded providing a copy of their syllabi and only 54 of them met the criteria for the study. The syllabi used in the study came from all regions of the United States.
In the Pieterse et al. (2012) study the researchers found that a total of 47 textbooks were used in the 54 syllabi. Many of the syllabi used the same or similar texts. Forty-eight percent of the syllabi used a book by Sue and Sue and 41 of the 54 courses also used an additional text on diversity. Other texts were also used to address issues with power, oppression, race, gender, and sexual orientation. The researchers found that 96% of the 54 syllabi used a tripartite model (knowledge, awareness, and skills) of multicultural competence in the goal statement for the course. The tripartite model used was based on the competencies established by the Sue et al. (1982) position paper. The researchers also found that of the syllabi in the study 40% covered the same general topics, 81% discussed topics related to multicultural concepts, 87% reviewed aspects of racial identity, and 45% of the syllabi specifically targeted certain racial groups.

The researchers found that of the syllabi evaluated for this study significant consistency was found in larger content areas and wider range of variability in specific content. Multicultural competence has been identified as being a common goal for counseling psychology programs (Goodyear & Guzzardo, 2000). From this study the researchers found that multicultural instructors are adding social justice content to their courses. Many of the syllabi even listed social justice as an objective for the course. They also found an occasional focus on skill development in the syllabi. Even though many of the syllabi stated they placed specific attention to knowledge, awareness, skills, and social injustice the researchers found that not to be true. The researchers found that many of the
syllabi’s focus were more toward knowledge and awareness, which was considered to be more important than skill development.

Cross cultural or multicultural competence can be learned in different ways. The main way courses have taught cross-cultural counseling or multicultural counseling was through a single course. Researchers like Abreu et al. (2000) believe that even though the single course method continues to be the main approach used to teach multicultural counseling competence an infusion style of teaching multicultural counseling is most effective.

Since the inception of the Sue et al. (1982) position paper there have been constant changes to professional organizations standards, assessment tools, and educational requirements for persons studying to become a provider. Johannes and Erwin (2004) discussed that ongoing changes in ethics, practices, diagnostic, and assessment tools continue to change to reflect a multicultural viewpoint. Even the American Counseling Association has revised the guidelines for practice to reflect that counselors should adopt approaches that reflect multiculturalism. Furthermore, to practice counseling diverse populations without the right cross-cultural training would be considered unethical (Sue, 1981). Even though changes have occurred to advance the counseling and psychology fields the question remains how is multicultural competence developed.

Johannes and Erwin (2004) wrote an article where they explored the development of multicultural competence specifically regarding theory and practice. According to Johannes and Erwin, counselors should be aware of how their own cultural background affects how
they practice counseling. They suggested that counselors should question themselves about their beliefs about their qualifications to work with people from diverse cultures. Furthermore, Johannes and Erwin reported that there has been an increase in cultural diversity seminars, courses in multicultural counseling, and continuing education offered on multicultural theory. They also noted that many accrediting associations have required training in multiculturalism. Even though changes have been made and new requirements have been established it still does not mean all theories formed in the Euro-American culture will fit all cultures (Kazdin, 1986) nor should those that do not fit be discarded. Theories and practices of the past could be expanded to suit other cultures (Johannes & Erwin, 2004). Johannes and Erwin also discussed other practices such as racial matching to demonstrate multicultural competence. With racial matching it should not be assumed that it is always welcomed or warranted (Alladin, 2002). Sue, D. W., Ivey, A. E., & Pedersen, P. (1996) indicated that always matching clients to therapists based on ethnicity could create feelings in clients of being stereotyped. Client matching could be effective, but therapists are cautioned about doing this. Client matching could go awry when there is a lack of understanding of the client’s culture, level of assimilation, and lack of training in multiculturalism. Johannes and Erwin also cautioned therapists about imposing personal cultural values onto their client. Even though imposing values could create a problem within a client therapist relationship it is difficult to not impose some level of value onto your client as values are a major part of the physical, social and communicative framework of counseling (Johannes & Erwin, 2004).
In this next section, an example will be provided of other action steps taken to develop cultural competence.

**How is it developed?**

Streets (2011) discussed the steps she took to enhance her cultural competence in her auto-ethnography about her immersion experience. She believed that by immersing herself into a culture outside of what she calls her comfort zone would cause her to develop a higher degree of cross-cultural competence. DeRicco and Sciarra (2005) stated that engaging in cross cultural immersion experiences helps to confront racism. Streets reported that immersion programs allow a person to experience direct and valuable experiences with various parts of a culture in order to gain cross-cultural competence. Streets believed that biases run deep and until one immerses themselves into a culture they will not be able to truly understand the feelings associated with their biases. Streets believed that cultural competence occurs when one can recognize, own, and address the conscious and unconscious beliefs so they can better work with people from ethnic cultures. To achieve cultural competence Streets, a doctoral graduate student, decided to add an extra year of school to immerse herself in an area to gain insight and to develop a cultural competence with a population she intended to serve. Streets had extensive training in cross cultural counseling as she completed her doctoral work in psychology, but believed she needed to have a hands on experience that would allow her an opportunity to fully understand the cultural differences for the population she desired to work with.
Streets (2011) identified lessons learned from her immersion experience that helped to increase her cultural competence; however, as with many things, there were also complications she noted with immersion. Streets stated that from her experience she learned that one could immerse oneself, but still not value or embrace the culture around them; therefore, not truly gaining the experience that could grow them cross-culturally. She also warned that when using immersion to build cultural competence it has to be an intentional process in order to gain from the experience. Streets believed that multicultural competence is best gained through directly living in the culture. She reflected that one can best obtain multicultural competence through the emotional sharing that causes one to confront one’s beliefs about a people or a culture. Another complication Streets discussed about immersion was that it could cause deep reflection about one’s own interactions with others. Even though deep reflection can lead to discomfort, Streets believed that during that time one is being stretched and growing. Streets stated during her immersion that it would have been helpful to have a mentor and an immersion plan to guide her through her experience. From her experience Streets offered suggestions to educators. She supported the idea that educators work to develop opportunities for students to immerse themselves in different cultures to gain a beneficial multicultural experience. Streets believed that because beliefs are deeply ingrained it could be a difficult process to depart from them. As a result of Streets’ experience she believed she is better at doing her job and better able to address biases within and around her.
In this next article review, another example of how cultural competence was developed is reviewed. In the Sammons and Speight (2012) study they explained the need for counselors to be competent in multiculturalism. They acknowledge that professional organizations such as CACREP, APA, and ACA have established guidelines for multicultural competence. The researchers also supported the importance of mental health professionals to be trained in multicultural competence. According to Sammons and Speight it is the responsibility of training facilities to determine how they would increase their students’ multicultural competence. In the past, training programs have used single courses, seminars, conferences, supervision, internships, and workshops to name a few to address the multicultural competence needs of their students (Sammons & Speight). They also reported that the most common way multicultural competence was taught was through a single course.

In a previous study conducted by Ponterotto, Rieger, Barrett, and Sparks (1998) they indicated that no agreement was reached regarding the best way to teach students multicultural competence. Even though by 1990 reports indicated that 90% of counseling programs offered a course in multiculturalism (Hill & Strozer, 1992); however, the outcomes of the courses are not as well documented (Sammons & Speight).

Sammons and Speight (2012) stated that there is limited evidence of the influence training in multiculturalism has on how one becomes culturally competent. However, there have been many studies that have indicated that being trained in multiculturalism could affect awareness, knowledge, and how someone sees the world (Brown, Parham, & Yonker, 1996; Neville et al., 1996; Reynolds, 1997; Tomlinson-Clarke, 2000). Sammons and Speight stated
that one of the main points of being trained in multiculturalism was to change the counselor’s multicultural competence; however, one must be at a place where they want to change (Prochaska & DiClemente, 1983).

Sammons and Speight (2012) attempted to understand the changes graduate students experience personally based on a course in multicultural counseling. In their study the researchers had three primary questions they used to explore the changes students experienced from taking a multicultural counseling course, the links from the course to their change, and if there are differences in the types of changes and links to course experienced by White students and students from other ethnicities.

To address the first questions in the study, Sammons and Speight (2012) used a critical incident technique (CIT) to describe experiences and behaviors for this study. The main point of this technique was for the researcher to collect data about the participants’ personal experience. In this study the researchers used actual events to avoid overlooking relevant information. To answer the third research question the researchers conducted a quantitative analysis.

In this study Sammons and Speight (2012) had 124 participants, of which 82% were women and 18% were men. The mean age was 26 years old. White participants accounted for 71% of the sample, where 9% were African American, 8% Asian American, 6% multiethnic, 3% Latino, and 3% as Asian International students. Over 70% of the students were between the age of 23 and 30 years old. All of the students in the study were enrolled in an advance degree counseling or psychology related program. The sample also was
comprised of 78% women in doctoral programs compared to 22% men. Of the minorities
there were 26% enrolled in a master level program and 28% enrolled in a doctoral program.
Sixty-nine percent of the students in the study took one course in multiculturalism, 14% had
multicultural counseling issues in their coursework, and 13% had previously taken several
courses in multicultural counseling. The participants in the sample reported that 72% had a
prior experience in diverse communities, and 10% of them had prior work experience with
diverse populations.

The researchers performed a content analysis and also incorporated their reflective
journals in the study. When analyzing the data the researchers used a constant comparative
method. After analyzing the data the researchers coded the data and identified overarching
themes in the data.

The results of the Sammons and Speight study indicated that the participants
experienced personal change. The participants reported changes in the following four areas:
knowledge, self-awareness, attitudinal, and behavioral change. Seventy percent of the
participants in the study acknowledged that the change they experienced was based on the
increased knowledge and self-awareness themes. Few of the participants acknowledged
changes in their skills and behaviors as result of their experience. Based on the findings from
this study personal change in regards to multicultural counseling courses is as a result of
increase self-awareness and knowledge. The participants in this study who experienced
personal change also learned that change is not easy or pain free. Many of the participants
reported experiencing different feelings that were less than positive, disappointing, or eye
opening. Sammons and Speight discussed that the way multicultural counseling courses are taught does not reflect changes in behaviors and specific skills. They speculated that instructors anticipate skill development for students to occur while completing their practical experiences.

The participants stated that course elements were associated with personal changes. They indicated that the interactive course activities, didactic course activities, instructor influence, reflective activities, and overall how the course was taught impacted the participants’ personal change. In fact, of the elements used to teach multicultural counseling in the Sammons and Speight (2012) study journaling, a form of reflection, was the least effective activity that influenced personal change. Some researchers believed that in-class discussions allowed students an opportunity to practice addressing issues from the real world (Arredondo & Arciniega, 2001). It is through these types of difficult and uncomfortable discussions that promote personal change (Ramsey, 2000). In regards to racial and ethnic differences, Sammons and Speight did not find any significant personal changes linked to any particular race more than another. They reported that there might be differences between them; however, none were noted from this study. In fact, of all the participants who reported personal change all reported the similar types of change.

From the Sammons and Speight (2012) study it is noted that some students might need more than a single course in multicultural counseling. Having one course can be great and insightful, but for many students additional course work and practical experiences may be necessary to obtain the level of skill and multicultural competence needed to be effective
when working with diverse populations. The researchers also noted that educators might want to consider mixing the teaching modalities to help the students with increasing awareness and personal change.

An Owens, Bodenhorn, and Bryant (2010) study explored the relationship between school counselor’s level of self-efficacy and their perceived multicultural competence. Using a sample of 157 school counselors, a multivariate regression analysis was conducted. The authors report two goals of this research. One of the goals was to examine the relationship between school counselor self-efficacy and multicultural counselor self-efficacy. The second goal was to explore the differences between respondents’ levels of multicultural self-efficacy based on gender, number of years as a school counselor, age, and work setting.

In this article the researchers sought to explore the relationship between school counselor self-efficacy by using the five School Counselor Self-Efficacy (SCSE) scales. After a multivariate regression analysis was conducted, the results reported that one of the subscales of the SCSE (cultural acceptance) was a predictor of all three of the MCCTS-R subscales. The researchers also compared their findings to previous findings by other researchers. The findings of this research were consistent with a study conducted in a prior study that found racist attitudes among counselors were significant variables in counselors’ reported levels of multicultural competence. In addition, the findings indicated no significant findings related to counselor multicultural competence levels by gender, age, and work setting. The findings reflect that counselors’ years of work experience were statistically
significant predictor of all MCCTS-R subscales. According to the researchers they also found this to be consistent with previously conducted research.

Owens et al. (2010) suggest that the school counselors’ ability to address the needs of culturally diverse students is a major challenge facing the field of school counseling. Another concern the authors reported was that the interventions currently being used in school settings have not been empirically tested to determine their effectiveness with diverse populations.

West-Olatunji, Goodman, and Shure (2011) examined the impact that multicultural supervision had on three practicing, K-12 school counselors. The sample for this research consisted of two White (one male and one female) and one Latino American female school counselors. Their ages ranged from 30–52, and their years of experience ranged from 0–26 years. Two of the three participants were master’s-level counselors and one was enrolled in a doctoral counseling program. All three participants worked at a campus-based, developmental laboratory school affiliated with a research-intensive university located in the southern United States. The laboratory school served approximately 1,150 students in kindergarten through twelfth grade.

The results suggested that supervision increased awareness of school counselors’ biases and provided counselors with an opportunity to engage in discussions regarding the implementation of culturally appropriate interventions. Results of the qualitative analysis produced four themes: awareness/interest, knowledge, commitment, and feelings of being stressed/overwhelmed. These findings relate back to the original research question that
asked, “What are the cultural competence outcomes when practicing school counselors engage in weekly multicultural supervision sessions?” The researchers found that counselors were able to have conversations about multicultural counseling issues and, thus, increased their cultural awareness regarding counseling responses. This coincides with the research conducted by Constantine (2001) that indicated a counselor’s increased multicultural competency helps them feel more self-efficacious about addressing mental health concerns. West-Olatunji et al. (2011) concluded that participation in the weekly sessions appeared to be beneficial in enhancing their multicultural counseling skill set. The findings were also discussed in relation to previous research. Specifically, the researchers noted prior research has shown that resistance to multicultural training negatively impacts counselor effectiveness.

**How is it measured?**

Ponterotto, Reiger, Barrett, and Sparks (1994) reported that the results of their research on effectiveness of four different instruments in measuring multicultural counseling competence indicated that the Multicultural Counseling Inventory (MCI) results for the participants rose significantly after one course in multiculturalism. Ponterotto et al. questioned what type of course would alter the MCI results, whether it is a course over a semester, a week or a few hours. The research did not discuss the style of the course being offered (e.g., lecture) and if that would impact the outcomes of the course.

According to Ponterotto et al. (1994) there was not a clear consensus as to what constituted a good multicultural training program and how the effects of such training are to
be assessed. Prior to the development of multiculturalism in the counseling field there was no framework to work within or standards required by CACREP. As time went on more emphasis has been placed on the development of multicultural training in academic settings. Various instruments have been developed to measure counselor cultural competence; however, a recipe for success for developing cultural specific competence has not. Currently, graduate students in counseling programs that are accredited by CACREP are required to complete a course in diversity, but this requirement only addresses the knowledge one has about different populations. It appears this standard is to help increase awareness; however, changing how beliefs impact practice will require insight that can be addressed in ongoing training and supervision. Gladding (2000) reports that providers who are not attending professional development workshops, attending conferences, and staying current with professional publications will fall behind in their skills quickly. Ponterotto et al. (1994) also reported that much of the attention placed on multiculturalism has been focused on awareness and knowledge, but little attention has been placed on actual skill development and evaluation or beliefs. Therefore, it seems necessary that counselors undergo constant supervision as they develop to ensure they have someone who can guide them and assist them in developing skills they have not yet acquired while recognizing and addressing biases that could impact the therapeutic relationship such as preconceived beliefs about a population. Constantine (2001) believed that supervision with a multicultural focus improves counseling supervisee’s self-efficacy for multicultural counseling. By engaging in supervision it is believed that counselors can increase awareness of their personal biases of
different status groups and the effects this may cause within the counseling relationship.

According to Constantine and Ladany (2001) it is important for counselors to become more culturally competent as a result of the United States becoming more diverse. As a result they acknowledge the work of researchers and educators in the field of counseling in establishing multicultural competence in working with diverse cultures. In previous studies, researchers like Ridley, C. R., Mendoza, D. W., & Kanitz, B. E. (1994) suggested that multicultural training should be based on a core foundation followed by a narrower focus. Constantine and Ladany acknowledged that some of the struggles in assessing multicultural competence were based on the tools used to measure the construct.

Constantine and Ladany identified and discussed several contemporary methods used to evaluate multicultural competence, such as self-report measures used to assess multicultural counseling competence. They reflected that the basis of many of the self-report measures was based on the seminal work in the Sue et al. (1982) position paper. The following instruments discussed are based on the competencies identified by Sue et al.’s (1982) work, which are as follows: Multicultural Awareness/Knowledge/Skills Survey (MAKSS), Multicultural Counseling Inventory (MCI), and Multicultural Counseling Knowledge and Awareness Scale (MCKAS). The scales previously identified are considered to be a good first step in examining multicultural competence (Constantine & Ladany, 2001).

The first instrument discussed is the MAKSS. The MAKSS (D’Andrea, M., Daniels, J., & Heck, R., 1991) is a self-report scale that consists of 60 items that are used to assess the effectiveness of cultural counseling training. The MAKSS has three subscales that measure
awareness, knowledge, and skills. The Awareness subscale examines people’s attitudes about people of color. The Knowledge subscale assesses the knowledge one has about a people of color. The Skills subscale examines the communication skills across cultures. This survey is scored on a 4-point range per question. The lowest possible score for this survey is 60 and the maximum amount is 240.

The second self-report survey reviewed is the MCI. The MCI (Sodowsky, G. R., Taffe, R. C., Gutkin, T. B., & Wise, S. L., 1994) is another type of self-report scale. This scale is a 40-item inventory that is also scored on a 4-point range per question. This inventory measures four different areas to assess multicultural competence. This self-report survey uses four subscales to examine Multicultural Counseling Awareness, Multicultural Counseling Knowledge, Multicultural Counseling Skills and Multicultural Counseling Relationship. The survey scores range from 40 to 160. The first subscale is Awareness, which examines multicultural sensitivity, multicultural interactions and experiences, understanding of the culture as well as advocating for the culture. The next subscale is Knowledge, which is where the ability to case conceptualize, strategic treatment planning, and information about the culture is examined. In the Skills subscale, multicultural and general counseling skills are assessed. The last subscale is Relationship, which examines counselor’s interpersonal skills with diverse populations.

The final survey reviewed is the MCKAS. The MCKAS (Ponterotto, Gretchen, et al., 2000) survey is based on a seven point Likert scale. This survey has 32 items that measure
general knowledge about multicultural counseling as well as Eurocentric worldview biases. The scores from this survey range from 32 to 224.

Constantine and Ladany identified limitations to these self-report scales. Researchers like Pope-Davis and Dings (1995), and Sue (1996) believe that these types of scales speak to the anticipated behaviors instead of actual behaviors or attitudes. They also indicated a need to have more evidence of validity with these scales even though each of the scales have been found to be valid instruments. Pope-Davis and Ding believed that these instruments fall short and need to have additional information regarding the instruments’ validity. They also noted that the scales are not uniform in regards to what they actually assess. Social desirability has also been noted as a limitation of self-report multicultural competence scales. Constantine and Ladany identified that even though the self-report surveys discussed state that they measure the ability to work with people from diverse groups, in actuality they measure the perceived competence to do so.

**Multidimensional Cultural Competence Model**

Next is an extensive review of the Multidimensional Cultural Competence model developed by Derald Wing Sue in 2001. This model was used as the standard in which the participants in this study were compared to in regards to how the participants developed their multicultural competence. The MDCC model provides a framework that allows multicultural competence to be arranged in three separate dimensions. The three dimensions are:

Dimension 1: Specific racial/cultural group,

Dimension 2: Components of cultural competence,
Dimension 3: Foci of cultural competence.

In the first dimension, Sue (2001) discussed how personal identity impacts multicultural competence. He explains that in this dimension there are three different levels of personal identity. The three levels are identified as universal, group, and individual. In the universal level Sue (2001) believed that all people have some similarities because they are human beings. The belief is that people share a group of commonalities such as biological and physical characteristics, life experiences, self-awareness, and they all use some form of symbolism to communicate. The universal is similar to psychology in the way that psychology has traditionally been used to seek universal facts principles and laws in describing human behavior.

The next level identified in this dimension is the group level. In this group level of identity Sue (2001) states that all people are like other people. He believes that in the group level all people inherit culture, beliefs, values, rules, and social practices. Sue (2001) indicated that there are some group identifiers that do not change such as race, gender, disability and age. However, there are other identifiers that are considered to be non-fixed such as education, socioeconomic status, marital status, and location. Members of these groups may in fact have similar experiences and characteristics as others. Persons within these groups may also belong to other cultural groups as well. Researching and understanding personal identity from the group level has generally been overlooked because of socio-political and normative reasons. Another reason why identity is not studied at the group level is because historically the differences between race/ethnicity have been viewed
from a deficit point of view and often times is considered to be unusual. Groups typically have their own perspectives about what is real and how they view the world. These perspectives influence how they understand the people, conditions, what is considered normal or even abnormal.

In the individual level of identity Sue (2001) shares that it is believed that “all individuals are, in some respects, like no other individuals” (p. 794). In other words people may be similar, but no two people are exactly the same. People may share similar experiences, but can have very different vantage points and experiences. Sue (2001) shares that in the American culture autonomy, uniqueness, and independence have historically been valued. Sue (2001) believes that in order to understand the totality of personal identity one must consider all facets of personal identity such as: individual, group, and universal. Sue (2001) shares that problems occur in research and practice when researchers do not identify that there are multiple levels of personal identity. Sue (2001) reported that there are not any clear boundaries within these levels and that they may overlap.

Sue (2001) noted that in Dimension one the race/ethnicity of the therapist impacts how the therapist sees the world. He also adds that the therapeutic approach can influence their perspectives of the world.

The second dimension is the Components of Cultural Competence. Sue (2001) reflects that historically there have been difficulties with identifying a universal definition for cultural competence. In the seminal work done by Sue et al. (1982) cultural competencies were divided into three areas, which are: attitudes/beliefs component, knowledge component,
and skill component. Attitudes/beliefs was identified as being when a person has insight about their own cultural conditioning that influence their beliefs, values, and attitudes. The knowledge component reflects the knowledge and understanding one has about how others see individuals and groups that are culturally different. The skill component is identified as being when one uses interventions that are deemed suitable for the culture. As a result of the development of these three areas 31 different competencies were developed.

For the purposes of this study I used the definition of multiculturalism offered by Sue (2001), as “Cultural competence is the ability to engage in actions or create conditions that maximize the optimal development of client and client systems. Multicultural counseling competence is defined as the counselor’s acquisition of awareness, knowledge, and skills needed to function effectively in a pluralistic democratic society (ability to communicate, interact, negotiate, and intervene on behalf of clients from diverse backgrounds), and on an organizational/societal level advocating effectively to develop new theories, practices, policies and organizational structures that are more responsive to all groups. In simpler words, the main point of cultural competence in the mental health field is to provide treatment to all people” (p. 802).

The third dimension is the focus of cultural competence, which is more of an analysis of the individual versus organizational levels. Historically the research on cultural competence has typically focused on the individual. The main focus in training clinicians has been to increase their awareness, for them to gain insight about cultures and the experiences of minorities and to help them develop culturally appropriate skills. However
this effort is not enough. Sue (2001) shares that in order to develop culturally competent practitioners we must address issues at the organizational level. It does not help practitioners to become more culturally competent professionals if they have to adhere to a monoculture perspective from their employers. If the clinician is admonished for using their acquired cultural competence it does not help them to develop their skills, but to continue to perpetuate the ignorance of a monoculture perspective. Sue (2001) suggested that to achieve cultural competence four main foci have to be explored, which are: individual, professional, organizational, and societal levels. These levels are considered to be the obstacles that have to be hurdled in order to move toward cultural competence.

In the individual level the biggest challenges are the biases, prejudices, and misinformation acquired through being discriminated. Sue (2001) stated no one was born with the plan to be biased or to discriminate. He further stated that misinformation about culturally different groups is acquired through a process and that people learn to fear and hate groups that are not similar to them. Fear, hatred, and/or biases are often times unintended and at an unconscious level (Dovidio & Garner, 1999). Sue (2001) states that people are often taught to be culturally incompetent. He identified four main barriers to achieve personal cultural competence.

1 The acknowledgement of personal biases (Sue, 1999). This is difficult because people do not want to see themselves as being unmoral, indecent, and unfair people (Sue, 2001).
It is better to be polite and lie about the truth versus confronting and analyzing or even to discuss the uncomfortable topics such as stereotyping and discriminating (President’s Initiative on Race, 1997).

Personal cultural competence requires ownership for ones actions or lack thereof that may impact injustices (Sue, 2001). This requires the person to explore how their own actions and biases impact injustices (Sue, 2001). Hiding is no longer an option.

Eliminating biases. This requires exploring deeply rooted beliefs, fears, anger, etc., based on previous racial interactions (President’s Initiative on Race, 1997).

Ponterotto and Pedersen (1993) stated that it is possible for people to change. At the same time, they have to be willing to unlearn their biases. Change could be a difficult process. MacIntosh (1989) states that in order for people to change they must let go of the biased misinformation and the negative emotions associated with racial issues. They also have to acknowledge their role in causing pain to others (Ridley, 1995). This process requires the person to learn accurate information about a culture to become competent and to have new experiences (Sue, 2001). This would also mean that the sources of information have to be reconsidered. Although the main way people learn about other cultures is through media, family, friends and educational texts; these sources are not always the most accurate (Sue, 2001). In fact, these types of sources of information could be full of stereotypes and misinformation (Sue, 1999).
To gain individual cultural competence Sue (1999) suggested the following four principles be followed:

1. People must have good experiences and learn from as many different people as possible in hopes to ensure the viewpoints, opinions, and/or assumptions are valid.

2. People should identify healthy and strong people within the culture and invest their time with them.

3. People must enhance their factual knowledge with their experienced based knowledge.

4. People have to constantly work at identifying how biases exhibit within themselves as well as others.

**The professional level.** The profession of psychology has been scrutinized by people who have studied multiculturalism over the years for having a Eurocentric viewpoint, which is considered to unsuitable for ethnic minorities (White & Parham, 1990). White and Parham indicated that some believe that psychology predates the work of Wundt and stems from African civilization where the focus was examining the soul and spirit of a person, which is very different than the Eurocentric perspective that has been adopted. The Eurocentric perspective tends to focus more on knowledge, the mind, and behavior (Sue, 2001). In Asian cultures human behavior is examined based on common perspectives based on collectivism, which is different than the individualism of the Eurocentric perspectives of Western
psychology. Sue (2001) states that most criteria used to meditate healthy behaviors are based out of individualism, which means they can be independent and stand-alone. Moreover, Asian cultures consider interdependence and group success valuable. In regards to professional multicultural competence Sue (2001) believes that the meaning of the term psychology should be reexamined and the code of ethics should be based on multiculturalism. He further believes that failing to understand the multicultural competencies in practice will further lead to more cultural incompetence.

The organizational level. Sue (2001) believes that in order to appreciate multiculturalism we must change the way businesses, institutions, and organizations treat their patrons. Thomas (1990) states that organizations that appreciate multiculturalism are more likely to prevent problems that are normal for typical monocultural businesses. These types of companies are more prepared to provide diverse services to their clientele (Lewis, J. A., Lewis, M. D., Daniels, J. A., & D’Andrea, M. J., 1998). In order to make change at the organizational level it is imperative that the culture of the organization is understood in order to develop a multicultural atmosphere as well as what has prevented it from doing so previously (Sue, 2001). Sue (1991) explains that there are three different types of organizations that move toward multiculturalism, which are monocultural organizations, nondiscriminatory organizations, and multicultural organizations.

According to Sue (2001), the monocultural organizations are the agencies that have Eurocentric or Afro-centric perspectives. These types of organizations conduct business based on the following beliefs:
a. “There is an implicit and explicit exclusion of racial minorities women and other marginalized groups;
b. They are structured to the advantage of the Euro-American majority;
c. There is only one best way to deliver healthcare manage, teach, or administrate;
d. Culture is believed to have a minimal impact on management, mental health or education;
e. Clients, workers, or students should assimilate;
f. Culture-specific ways of doing things are neither recognized nor valued;
g. Everyone should be treated the same;
h. There is a strong belief in the melting pot concept” (Sue, 2001, p. 807).

**Nondiscriminatory organization.** As businesses begin to evolve and become more culturally aware and focused they enter into the nondiscriminatory state. Sue (2001) shared that this type of organization tends to exhibit the following characteristics:

a. “They possess inconsistent policies and practices regarding multicultural issues.”

Some staff are more sensitive to the cultural concerns of others, but as a whole the organization is not quite focused on that as a goal.

b. The leadership may recognize that things need to change regarding prejudices and biases, but do not have a formal process of making the change happen.

c. Superficial attempts to make change that is not longstanding, but due so as a result of public relations.
d. Equal employment hiring practices such as affirmative action are enforced under duress” (Sue, 2001, p. 807).

**Multicultural organization.** As a business develops into being more multicultural they begin to appreciate diversity and work to support ongoing cultural change. Sue (2001) indicated that a multicultural organization values:

a. Being “in the process of working on a vision that reflects multiculturalism

b. Reflects the contributions of diverse cultural and social groups in mission operations products and services

c. Values multiculturalism and view it as an asset

d. Actively engage in visioning, planning, and problem solving activities that allow for equal access and opportunities

e. Realize that equal access and opportunities are not equal treatment

f. Work to diversify the environment” (Sue, 2001, p. 807).

Lewis (1998) states that in order for an organization to reach cultural competence they must change the people in power to avoid discrimination. This may require for the following to occur:

a. Having minorities involved in the decision making process

b. Constructing multicultural programs and practices with the same economic and maintenance priorities as other values aspects of the organization.
Organization will have to work to develop programs that target biases, stereotypes, and prejudices within the organization. Organizations also have to increase their awareness so they are informed about how their practices impact business, clients, and employees.

**Societal level.** On the societal level racism is still a problem in America. Based on research conducted by the Race advisory board (1997) it reported that bigotry and racism are prevalent forces in society. In addition, the board concluded the following:

a. “the need to address race issues had never been more relevant;
b. most citizens were ill equipped to handle race issues;
c. Racial legacies of the past continue to affect current polices and practices;
d. Inequities are so ingrained that they are hard to identify;
e. And that construct discussion about race needs to occur in America” (Sue, 2001, p.808).

To improve the societal cultural competence the board recommended examining the issues in America through the eyes of the marginalized, searching for common values and goals shared by all groups and developing and institutionalizing promising practices that would allow for equal access and opportunity. The report encourages all people to become culturally competent. Sue (2001) identifies that in our society there are three major obstacles to developing cultural competency, which are: “the invisibility of ethnocentric monoculturalism, the power to define reality from a singular perspective, and a biased historical legacy that glorifies the contributions of one group over another” (Sue, 2001, p. 808).
Ethnocentric monoculturalism is the unequal status relationship or power within groups that determines this (Jones, 1997). In the invisibility of ethnocentric monoculturalism there is a strong belief about one’s cultural group. “The group norms and values are seen positively” (Sue, 2001, p. 808). Sue (2001) indicated that members of this group might believe their way is the best way to do things. Members also believe in this group that members of other groups fear them. Members of these groups may look upon the other groups as being less civilized. Another belief is that the dominant group has the power and influence on other less dominant groups. Many groups feel pride about their group, but unless they hold the dominant status they can never oppress other groups. Fourth, the beliefs of the ethnocentric are seen in the policies, practices, and institutions of that culture. Fifth, all people are culturally conditioned as a result all people assume universality.

**The power to define reality.** In ethnocentric monoculturalism it is damaging when one group has the power to define reality from its singular perspective. The United States was founded on democratic principles and their citizens are led to believe that equality, fairness, and social justice are basic ideals that formed this country. However, too often in history has there been examples that go against that very thought (Barongan, C., Bernal, G., Comas-Diaz, L., Hall, C. C. I., Hall, G. C. N., LaDue, R. A., Parham, T. A., & Root, M. P., 1997). In fact some would say that people are influenced to accept the values, attitudes, and beliefs of cultural superiority (Ponterotto & Pedersen, 1993). When one cannot see how this has occurred in society is what is called cultural racism (Jones, 1997). Jones indicated that
this is where the individual and institutional expression of superiority of ones groups cultural heritage over another.

**A biased historical legacy.** Sue’s (1999) research addressed a question asked by author Robert Guthrie, Who owns history? Sue (2001) shared that this is clear in our society. Until we begin to “value the untold stories of the marginalized, stop neglecting and distorting the stories of the various ethnic groups, stop glorifying the contributions of one group and stop making children socialize and educate them to accept and believe in the historical legacy that dominant society then we set up conditions that contribute to ethnocentric monoculturalism and impose a reality” (Sue & Sue, 1999, p. 810) that has major implications.

It is a huge task to overcome ethnocentric monoculturalism in our society (Sue, 2001). We would have to work to tear down erroneous opinions that have saturated our society (Sue, 2001). Sue (2001) indicated that professionals in the psychology field could no longer hide from their responsibilities to actively work toward improving the circumstances for the people of our society.

In this literature review, an examination was conducted of how counselors’ perceptions of aggression and media priming influences behaviors, and how cultural competence training impacts outcomes. Preconceived differences between counselors and clients are traditionally based on their individualized socializations. Research indicated that both African Americans and White Americans could have preconceived beliefs of aggression that impacts their ability to be nonjudgmental. Based on the research presented in this literature review African
Americans were more likely than White Americans to be perceived as being aggressive by White Americans than African Americans. Preconceived beliefs about different status groups, such as stereotypes can also impact a counselor’s ability to effectively engage a client, who is perceived as being aggressive, in talk therapy. There are factors that contribute to a person’s impression of others such as prior experience, limited exposure to a group or situation where people of different status groups displayed aggressive behaviors as well as multicultural competence. Therefore, it is reasonable to assume that additional multicultural coursework and exposure to various ethnic minority groups and situations could enhance a counselor’s perceptions and impact the outcomes with those groups.

This research demonstrated how the lack of exposure and experience has negatively affected perceptions of others. Research has proven it necessary for counselors to continue to focus on enhancing their skills by ongoing training especially as it relates to cultural diversity. Neville et al. (1996) reported that completing multiculturalism courses help to increase trainees perceived multicultural counseling competence. Client specific diversity training will greatly assist counselors in their development by increasing their understanding of a particular group’s customs, behaviors, and beliefs. Constantine (2001) reported that as counselors in training increase their knowledge about multiculturalism they are more comfortable in addressing mental health needs with diverse clients. Furthermore, counselors who lack skills may not be able to accurately judge their own skills. Therefore, counselors should continuously seek culturally enriching opportunities throughout their training and professional career.
Pilot Study

I previously conducted a qualitative pilot study for my thesis equivalency where I explored the lived experiences of a counselor and his perceptions of aggression in African American male clients. I sought to perceive how his perceptions of African American male clients influenced his work with the population.

There were two main purposes in this study. The first purpose was to identify if his perceptions of African American males impacted his desire to work with the population or if it had influenced him to refer clients out to other counselors that he perceived to be better qualified to serve them. Another purpose of the study was to explore if the counselor felt a high level efficacy when working with the African American males. Two main questions were used to direct this study:

1. What types of academic training or professional development have you had to prepare you to work with African American male clients?
2. In what way have your experiences with African American male clients impacted your decision to work with the population?

I examined the factors that contributed to the counselor’s perceptions of the population, experiences with the population, specific academic training, professional development/training, and supervision targeted toward the populations. The results of this research provided significant insight to the participant’s barriers that have influenced his desire to work with African American male clients as well as factors that impacted the counselor’s self-efficacy with this population.
Albert Bandura’s Self-Efficacy Theory (1994) provided a widely used definition of self-efficacy and how a person’s beliefs about their abilities to perform at a level of proficiency are developed. Self-Efficacy Theory was chosen because it provided a rationale for the reasons professional counselors make their decisions when deciding to work with certain populations.

The basic assumption of Bandura’s theory of self-efficacy explains that the belief people have about their abilities to perform at a certain level is based on the successes and failures they have experienced. Self-efficacy, as defined by Bandura (1994), is one’s beliefs or perceptions about their ability to perform a task. It is because of the person’s beliefs that they make decisions to engage or not engage in certain activities. The belief in the person’s ability is not if he can perform a task, but how well he believes he can perform the task. Bandura states the beliefs people have of their self-efficacy determine how they feel, think, motivate themselves and behave. From these beliefs four major processes were identified. The four processes are cognitive, motivational, affective, and selection processes. These four processes helped to explain how self-efficacy is developed. Following is an explanation of the four processes.

The first process is the cognitive processes, which is a reflection of ones thoughts about one’s self. Cognitive processes explain the thoughts people have behind the actions they take toward a desired goal. According to Bandura (1994), most courses of action are initially organized in thought. Bandura further states that goals are established based on a reflection of ones belief about their capabilities. In the cognitive process there is a level of
motivation or desired goal that lays the foundation for the thoughts and the action steps taken by a person.

The second process is the motivational process. Motivational process is affected by ones self-efficacy and cognitively generated. Bandura (1994) states that people motivate themselves and guide their actions anticipatorily by the exercises of forethoughts. This would indicate that the thoughts people have impact choices people make. These same thoughts help people predict their outcomes in a particular area. Bandura states there are three different cognitive motivators: causal attributions, outcome expectancies, and cognized goals. Causal attributions are impacted by self-efficacy. People with high self-efficacy would believe their success in an area is a reflection of the effort they displayed. Motivational processes are also affected by outcome expectations, meaning that people have confidence that a given action will result in predicted outcomes. Bandura states that there are many options people do not pursue because they believe they lack the ability for it. Self-influence is another factor that contributes to motivational processes. Self-influence is established by the goals one establishes for one self. The thought behind self-influence is if a person’s goals are challenging enough their motivation increases.

Another process is the affective process, which is based on a person’s belief in their coping skills and how it will affect their reaction to stress and depression when experiencing strenuous situations. People with high self-efficacy tend not to have high levels of anxiety versus those persons who have low self-efficacy who tend to experience high levels of anxiety and focus more on their deficiencies. A person’s low confidence in their ability to
cope will lead to their increase avoidance to the stress inducing activity. It is a person’s perceived ability to control their thoughts and their perceived ability to cope that helps them reduce their level of stress. Bandura (1994) states that it is through mastery experience that is the principal means of personality change. He also states that mastery experiences are structured in ways to build coping skills and instill beliefs that one can exercise control over potential threats.

The fourth process is the selection process, which indicates that the course a person takes in life is dependent on their level of self-efficacy. In the selection process it further suggests that people actively engage in activities within environments that reflect their personal self-efficacy. This component states that people select activities that they feel more efficacious about even if the activity is considered challenging.

This theory served as a good theoretical foundation for exploring the decision the clinician made when deciding to work with African American male clients as well as his level of confidence in his skill set to do so. The self-efficacy theory was used to provide clarity to cloudy issues in the field of counseling, such as the reluctance counselors experience to work with certain populations. Counselors come from different cultural backgrounds and experiences, which help to make them who they are. These experiences often influence their decision-making regarding career choices, challenging tasks, and social networking to name a few. With the use of this theory, factors that contribute to counselor’s self-efficacy when working with client specific populations such as African American males can be further explored.
Through purposive sampling and semi-structured interview techniques one LPC was examined to gain deeper clarity regarding his perspectives about self-efficacy when working with African American male clients, as well as how his experience influenced his desire to work with the population. I identified a Caucasian American Licensed Professional Counselor in Durham, North Carolina using a purposive sampling technique. The participant has a Master’s degree in counseling from a school that was accredited by the Council for Accreditation of Counseling and Related Educational Programs (CACREP). The selected participant met the demographic and diversity criteria of this research in order to participate in the study. The researcher’s affiliation with the participant was of a professional nature only. Additional demographic information about the participant is noted below.

**Jeffery.** At the time of the study Jeffery was a 35-year-old, single, Caucasian American male from North Carolina. Jeffery currently lives in Durham, North Carolina and works as a counselor for a community mental health agency. Jeffery has worked as a Licensed Professional Counselor for the past three years. Jeffery attended graduate school at a predominantly white institution in North Carolina. While in graduate school, Jeffery enrolled in a cultural awareness class that focused specifically on African American males as part of the course.

The two major findings were organized by each research question. Question #1-What types of academic training or professional development have you had as a counselor to prepare you to work with African American male clients? Based on the analysis of the data collected themes were identified. The first theme that emerged was that knowledge is power.
The results indicated that knowledge was a necessary component to effectively work with cross-cultural issues. During the interview, Jeffery did not speak highly of the educational experience he received while in school, citing that the institution broadly prepared him to work with any population and provided him with general knowledge of different cultural groups. However, Jeffery felt his educational experiences served as a good foundation for his understanding of what he believed was necessary to gain the openness, knowledge, and awareness of any population he desired to work with. Research supports Jeffery’s perspective about having specific training from well-informed trainers and supervisors. The participant indicated training and supervision from knowledgeable people was invaluable; however, the largest part of his training occurred outside of the typical classroom as he learned the most about African Americans from the people he interned with and the supervision he received during his licensure process. While in an internship the participant was technically still a student, but the hands on experience substantially increased his knowledge of African Americans and his self-efficacy. Jeffery’s academic training required he complete a course in cultural diversity; however, it did not provide him the first hand knowledge from people who either worked with African Americans or who were African American. It was not until he intentionally sought out environments that would offer him the opportunity to work with his population of interest, and to receive guidance, feedback, and supervision from people he would consider experts with the population. Daniels and Larson’s (2001) study reports that counselors who received positive feedback reported significant increase in their self-efficacy.
Question #2-In what way have your experiences with African American male clients impacted your decision to work with the population? The participant’s experiences have helped him gain positive outcomes with the population and have helped him develop a high level of self-efficacy when working with African Americans. A Neville et al. (2006) study suggested that White trainees cultural awareness increases as they continue to receive more cultural awareness training. This would suggest that non-African Americans who are working with African Americans should receive professional development opportunities to enhance their skill set. In this study, the participant believed he was confident in his ability to work effectively with African Americans because he had such positive experiences during his training and his pre-licensure work. According to the participant his experiences have not caused him to avoid working with African Americans, but has allowed him a chance to gain the exposure necessary to gain skills and confidence in his abilities with this population. This is also in accordance with Bandura (1994) in that self-efficacy is developed through mastery experiences. Sheu and Lent (2007) reported that mastery experiences are the most effective way to develop self-efficacy.

In this pilot study, the lived experiences of a counselor and his perceptions of aggression in African American male clients were explored. The two main focal points of this study were to: (a) understand if the participant’s perceptions of African American males influenced his desire to serve the population; and (b) identify if the participant identified high self-efficacy when working with the population. Through the use semi-structured interviewing techniques I identified two major findings in this study.
The findings are represented by the themes. The first theme *Knowledge is Power* represents the additional effort the participant underwent to secure insight about the African American male population. The participant stated that increasing knowledge and awareness were instrumental in understanding and relating to the culture. However, the participant in this study recognized that knowledge without experience did not make him better prepared to serve African American male clients. In the second theme, *Experience is Essential*, reflects the growth the participant underwent during his process to work with African American male clients.

In this study the participant believed he had a high level of self-efficacy when working with African American male clients, however, how his self-efficacy increased was by improving his cultural competence. Based on the findings in this pilot study, the factors that influence one’s desire to work with African American male clients seemed to be more related to culturally competence than self-efficacy. In fact it is because of the cultural competence he acquired he was able to improve his self-efficacy. Because the participant acknowledged that he increased his knowledge, awareness, and skills, in effort to better prepare him, it further clarified that the Albert Bandura’s model on Self-Efficacy did not offer the most explanatory value of the phenomenon under study. Moreover, because of the action steps taken by the participant it persuaded me to explore cultural competence of practitioners working with African American male clients. Therefore, in the current study is focused uses multicultural competence as its theoretical foundation.
CHAPTER 3: METHOD

The purpose of this qualitative research was to examine if counselor perception of aggression in African American male clients impacted the counselor’s desire to work with the population, or if it lead them to refer African American male clients to other counselors whom they perceived to be a more appropriately qualified. Two main questions were used to direct this study:

1. What are counselor perceptions of aggression in African American male clients?
2. How do counselor perceptions of aggression in African American male clients affect working with African American male clients?

Because the goal of the research was to understand the participants’ perception of their experiences and decisions in working with an African American male client a qualitative methodology was deemed most appropriate. Using a semi-structured interview format, factors that contributed to counselor perceptions of African American male clients were examined. The study also examined if the counselors experiences with this population, specific academic training, professional development/training, and supervision targeted toward the population contributed to their interest and perceived ability in working with the population, or contributed to referrals for this population to what they consider to be a more qualified counselor.

In the present study, six Licensed Professional Counselors (LPCs) were purposefully sampled and interviewed to gain deeper understanding regarding their perspectives about working with African American male clients. One of the main concepts behind purposeful
sampling in qualitative research is to intentionally select the participants that have the best
certainty to competently address the research questions. Using information rich cases
(i.e., participants) provides insights and in depth understanding of a particular phenomenon
(Patton, 2002). This sampling technique was selected because it is believed that the
participants professional, personal, and educational backgrounds offered insight that could
best address the research questions.

Research Design

This research study provided clarity about the impact of counselor’s perceptions of
aggression in African American male clients has had on their therapeutic relationships with
African American male clients. Specifically, this study fostered greater understanding of
what counselors believed has helped them better prepare themselves to work with African
American male clients, especially those they considered aggressive.

Qualitative Research

Qualitative research utilizes a variety of methods in order to explore complex
phenomena experienced by individuals (Denzin and Lincoln, 2000). Case studies, personal
experiences, introspections, life stories, interviews, and observations are all tools in the
qualitative researcher’s toolbox. Even though there are a variety of qualitative research
methods, they all share a common goal. The goal is to gain clarity about participants’ core
beliefs about a particular phenomenon from people who have lived the experience (Creswell,
2009; Denzin and Lincoln, 2000; Vaismoradi, 2013). Therefore, thoughtful selectivity was
required to choose the research method based on what was believed to be the best method to answer their research questions (Streubert, Speziale, & Carpenter, 2007).

Cronbach (1975) reports that quantitative research is not able to fully account for interactions in social settings. However, Hoepfl (1997) states that qualitative analysis is able to accept the difficult and unique qualities of social interactions. Qualitative research can also provide a more accurate description or interpretation of a situation. Qualitative research methods can help to better understand any phenomenon that lacks clarity (Strauss & Corbin, 1990) by listening to the voices of the participants. Lincoln and Guba (1985) stated, “If you want people to understand better than they otherwise might, provide them information in the form in which they usually experience it” (p. 120). This means that the best way people can gain an understanding about something is from an experience. Furthermore, Stake (1978) indicates qualitative research is normally filled with insightful and rich details about the lived experiences of the participants. It was important, therefore, for this study to use qualitative research methods in order to gain clarity about counselor perceptions of aggression in African American male clients and the impact that the perceptions have on counselors working with this population.

**Semi-structured interviews.** In this study, semi-structured interviews were used to collect the data (See Appendix D for interview questions). This process allowed the researcher to gain an understanding of the perspectives and experiences of the participants in the study. Gaining the perspectives of the participants was significant in order to understand the factors that contributed to the counselor decision-making process when selecting clients
to serve. Interviewing is considered to be one of the most significant components to qualitative research (Qu & Dumay, 2011). Qu and Dumay (2011) recognized interviewing as “an asymmetry of power of which the researcher is in charge of questioning a more or less voluntary or naïve interviewee” (p. 239). This process allowed the researcher to gain an understanding about the experiences of others. Interviewing required skills such as note taking, planning, listening, and preparation (Qu & Dumay, 2011). The interviews were not conducted haphazardly as the results could have been less than desired if the researcher did not adequately prepare or was not skilled at interviewing. In semi-structured interviews the researcher does not follow a strict list of questions, but rather follows the direction of the interview with the intent to make the interviewee feel more relaxed (Hannabuss, 1996). For the current study, a list of questions was developed and the participants also guided the process and were allowed to change directions if it was believed that the change would provide clarity about the factors that contribute to their decisions to work with African American male clients (See Table 1). The purpose behind using semi-structured interviewing was to gain clarity about how the interviewee sees the world (Greene, 1998).
Table 1  \textit{Research and Interview Questions}

<table>
<thead>
<tr>
<th>Literature</th>
<th>Research Questions</th>
<th>Interview Questions</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>How are African American males portrayed as aggressive?</td>
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<tr>
<td></td>
<td></td>
<td>What are some of the messages you have received from your friends and family about African American males?</td>
</tr>
<tr>
<td></td>
<td>How do counselor perceptions of aggression in African American male clients affect working with African American clients?</td>
<td>How do media portrayals of African American males affect the therapeutic relationship?</td>
</tr>
<tr>
<td></td>
<td></td>
<td>With the African American clients that you have worked with, how have these media portrayals affected your work?</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Tell me about a time you worked with African American clients.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Given the messages you received from media, family, recent incidents, or current events, how do you work with African American male clients?</td>
</tr>
<tr>
<td></td>
<td></td>
<td>What has influenced your work with this population?</td>
</tr>
<tr>
<td></td>
<td></td>
<td>What has helped you be more effective?</td>
</tr>
</tbody>
</table>
| | | What types of training, exposure, or supervision would you recommend to counseling work with African American males?
In this study I intentionally chose semi-structured interviews to gain a clearer perspective regarding the lived experiences of counselors who have made the decision to work with African American male clients, or to refer them out to other providers.

**Participants and Context**

Sample size in qualitative research is related to the purpose and goals of the study. The sampling technique used in this study was purposeful sampling. *Purposeful sampling* is an intentional selection of information rich cases (i.e., participants with experiences relevant to the phenomena of study) to explore more in depth (Patton, 2002). These types of cases offer significant information regarding the purpose of the research (Patton, 2002). Purposeful sampling requires access to key informants in the field who can help in identifying information-rich cases (Suri, 2011). Participants were selected based on known relevant variables about each of the participants. Each of the participants have publicly identified themselves as someone who primarily services the African American male population. Specifically, professional counseling experiences with African American male clients were obtained through a demographic questionnaire (See Appendix B), prior to selecting participants for the study.

**Participants**

The participants for this study were six Licensed Professional Counselors who lived and worked in the Triangle region of North Carolina. All participants had a minimum of a Master’s degree in the field of counseling from a Council for Accreditation of Counseling and Related Educational Programs (CACREP) accredited school and prior counseling experience with African American male clients. Of the six participants, four identified as male and two as female. Three of the participants were employed as a counselor in a community mental health agency and the other three participants were self-employed
providers. The counselors in this study had between three and 15 years of counseling experience. See Table 2 for a concise description of the participants.

Table 2  
*Participants Description*

<table>
<thead>
<tr>
<th>Participants</th>
<th>Age</th>
<th>Gender</th>
<th>Race*</th>
<th>Years of experience</th>
<th>Level of Education</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rusty</td>
<td>28</td>
<td>Male</td>
<td>B/AA</td>
<td>3 years</td>
<td>Master’s Degree</td>
</tr>
<tr>
<td>Andre</td>
<td>41</td>
<td>Male</td>
<td>AA</td>
<td>8 years</td>
<td>Master’s Degree</td>
</tr>
<tr>
<td>Katherine</td>
<td>37</td>
<td>Female</td>
<td>WA</td>
<td>9 years</td>
<td>Master’s Degree</td>
</tr>
<tr>
<td>Tina</td>
<td>34</td>
<td>Female</td>
<td>AA</td>
<td>3 years</td>
<td>Master’s Degree</td>
</tr>
<tr>
<td>Terrence</td>
<td>35</td>
<td>Male</td>
<td>AA</td>
<td>3 years</td>
<td>Master’s Degree</td>
</tr>
<tr>
<td>Randolph</td>
<td>63</td>
<td>Male</td>
<td>WA</td>
<td>15 years</td>
<td>Master’s Degree</td>
</tr>
</tbody>
</table>

*WA=White American, AA=African American, B=Biracial

*Rusty*. Rusty was a 28 year-old biracial male from New York. Rusty self identifies as an African American; however, he acknowledged that his biological mother is an African American and his biological father is a White American. Rusty graduated from a CACREP accredited graduate counseling program in New York. He is a LPC and works as a counselor in a community mental health agency in the Triangle area. Rusty has been fully licensed for three years and has worked with African American male clients since he has been licensed.
Andre. Andre was a 41 year-old African American male from North Carolina. Andre earned his graduate degree from a CACREP accredited graduate counseling program in South Carolina in 2002. Andre is a LPC who works in private practice as a counselor in the Triangle area. He has been a LPC for the past eight years and has worked with African American male clients for eight years.

Katherine. Katherine was a 37 year-old White American female from West Virginia. She graduated in 2003 from a CACREP accredited graduate counseling program in Georgia. She has been licensed since 2005 and has nine years of experience working with African American male clients. She is an LPC and working as a counselor in the Triangle area in a private practice.

Tina. Tina was a 34 year-old African American female from Virginia. She graduated in 2009 with her Master’s degree from a CACREP accredited counseling program. She has been an LPC since 2011 and is working as a counselor in a community mental health agency in the Triangle area. Tina reported that she has been working with African American male clients since 2011.

Terrence. Terrence was a 35 year-old African American male from North Carolina. Terrence graduated from a CACREP accredited graduate counseling program in 2009. He has been fully licensed as an LPC since 2011. Terrence reported that he has worked with African American male clients since 2009. Terrence is employed as a counselor at a private practice in the Triangle area.
**Randolph.** Randolph was a 63 year-old White American male from Wyoming. He reported that he graduated from a CACREP accredited counseling program in 1995 in North Carolina. Randolph has worked as an LPC for the past 15 years and has been working with African American male clients for 15 years. He is employed as a counselor in a community mental health agency in the Triangle area.

**Context**

In the Triangle area, there are at least three universities with CACREP accredited programs. There is large representation of African American people in the area, which is one of the reasons it was chosen for this study. In addition, the area contains a historical and cultural richness of African Americans. Durham, North Carolina, for example, was once known as the Black Wall Street, and has a large quantity of African American citizens (Weare, 1993). Durham is located in the heart of North Carolina. According to the US Census Bureau (2010) report, the total population of Durham was 269,974 residents in 2010. Durham’s racial makeup is 53.1% White, 39.7% African American/Black, 13.5% Hispanic, 4.8% Asian, 2.3% two or more races, 1.0% American Indian, and 0.1% Pacific Islander. Based on the 2010 census report 18.0% of the population in Durham live below the poverty line. In Raleigh, North Carolina the demographics are slightly different. Raleigh, North Carolina is the capital city of the state. This city neighbors Durham and is also located in the heart of North Carolina. According to Raleigh’s Growth and Development report (2009) the city’s population is 354,188 residents. The city of Raleigh has the following racial makeup: 57.7% White, 30.0% African American, 0.3% American Indian and Alaska Native, 4.3%
Asian, and 6.7% Hispanic. In Raleigh, North Carolina 11.1% of the residents live below the poverty line (US Census Report, 2010). In Chapel Hill, North Carolina, the third city in the Triangle area, there are a total of 57,253 residents according to the US Census Report (2010). In Chapel Hill the following information reflects the city’s racial demographics: 72.8% White, 9.7% African American/Black, 0.3% American Indian, 11.9% Asian, 2.7% two or more races, 6.4% Hispanic. In Chapel Hill 22.7% of the residents live below the poverty line. These statistics make the Triangle area an appropriate and relevant source of data for the present study.

**Data Collection**

For this study, which was approved by the North Carolina State University Internal Review Board, demographic questionnaires and facilitated semi-structured interviews were used to collect data from all participants (See Appendix B for demographic questionnaires and interview questions). The interviews were conducted in person and by telephone. Four interviews were conducted in-person and two were completed by telephone. Both methods of interviewing are within the guidelines identified as acceptable forms for data collection. In fact, one on one interviews, telephone interviews and group interviews are all considered appropriate types of data collection tools (Draper & Swift, 2010; Wang, 2008; Evan et al., 2007; Whitehead, 2007; Creswell, 1994). During the interview, the participants were given the opportunity to ask questions, as well as room to navigate away from the topic, and time to process their thoughts about the questions. Participants were also provided the opportunity to
explore their thoughts and memories that emerged from their experiences in hopes that it would offer greater insights to the participants’ views of the world.

**Demographic Questionnaire**

According to Collingridge & Gantt (2008) research participant selection should have a clear purpose related to the research questions. A demographic questionnaire was completed by all research participants to confirm established criteria for participation in the study (See Appendix “A”). The questions on the questionnaire included the following:

- What is your name, address, contact telephone/cellular number:
- Are you a licensed counselor?
- Was your graduate program CACREP accredited?
- What is your gender and race?
- What is your current age?
- What is your highest level of education?
- What specialty training have you received?
- What types of certifications or licenses do you hold or have held?
- How long have you practiced as a Licensed Professional Counselor?
- Are you currently employed as a Licensed Professional Counselor?
- Are you self-employed?

For in-person interviews completed, the participants were provided and completed the informed consent form and demographic questionnaire and provided it to the researcher. For those conducted via telephone, informed consent was provided verbally and the
questionnaires were read to the participants and their responses were documented by the researcher. The signed demographic questionnaires and signed informed consent forms (See Appendix C) from the participants who were interviewed by telephone were mailed back to the researcher through the US mail delivery system.

**Semi-Structured Interviews**

Participants were first contacted via telephone to discuss their participation in the research study. While communicating with the participants, the goals of the study were explained and their participation was requested. Next the participants were provided demographic questionnaires to complete. The participants who were interviewed by telephone also received their demographic questionnaire via email. The telephone interviewers returned their questionnaire via US mail. After the participants completed the demographic questionnaire, I confirmed the participants met the criteria of the study prior to moving forward with scheduling their interviews. In order to make the scheduling process more convenient for the participants, a variety of interview options was offered including telephonic, or in-person. The participants were advised that the interviews were not expected to exceed an hour in length. The participants were also informed of the process in which the research was to be undertaken to ensure confidentiality was maintained throughout the study and after the study has ended. Participants’ interviews were audio recorded. All audio files were downloaded onto the researchers password-protected computer and to an external password protected hard-drive located in a locked file cabinet in the researcher’s home. All printed transcriptions and demographic questionnaires were also stored in the locked file
cabinet in the researcher’s home, and did not contain any directly identifying information (pseudonyms only).

All interviews began with a review and signing of the *Informed Consent form* (Appendix C) and a brief description of the overall study. For those interviews that were conducted via telephone participants were recorded giving verbal consent and the *Informed Consent* documentation with their signature was later mailed to the researcher. During the discussion about informed consent, the researcher coordinated the pick up of participant signed documents and the mailing of documents to the researcher.

The interview process with the participants went smoothly. Each of the participants offered valuable insights regarding their experience; however, the participants did not all communicate the same way. In the four in person interviews conducted in this study I could visually see the facial grimaces or nonverbal communications the participants would make or the physical reaction to each question. For the telephone interviews, I was not able to read the nonverbal messages as communicated with the face-to-face interviews. As a result of conducting telephone interviews, even though appropriate for this study, it may have limited my ability to fully grasp the essence of what and how the participants responded to the research questions during telephone interviews.

**Semi-structured interview protocol (See Appendix D).** The interview questions reviewed topics related to counselor perceptions of aggression in African American male clients and if their perceptions of aggression of African Americans affected them working with the population. Other questions asked of the participants were: how do media portray
African American males? How are African American males portrayed as aggressive? What are some of the messages you have received from your friends and family about African American males? The participants were then asked to discuss an experience when working with African American male clients and to explain if they believed media or if other sources have influenced their work with this population. Participants also answered questions about what has helped them to better serve African American male clients. All participants were advised not to utilize names of third parties, such as clients, or other counselors. When third party information was disclosed, it was removed or masked in the research. Interviews were only audio-recorded and no other individuals, besides the researcher and participant, were present. At the end of each interview, each participant was asked to provide any additional information they wished to add to the study. The average time of each interview was 45 minutes.

Data Analysis

Researchers have often debated over the idea of saturation, which is considered to be a significant component when identifying appropriate sample size in qualitative research (Mason, 2010). For the purpose of this research, saturation was defined as the point when the data collection process failed to yield new or significant data (Dworkin, 2012). In this study, after completing six interviews saturation was reached.

Table 3    Data Analysis Overview
**Thematic Analysis**

To analyze the lived experiences and perceptions of the participants in this study, I used a data analysis method called thematic analysis. Thematic analysis is a process of identifying and evaluating patterns in qualitative data sets (Clarke and Braun, 2013; Braun & Clarke, 2006). Clarke and Braun (2013) referred to thematic analysis as an analytic method and not a methodology because of the flexibility within thematic analysis. Bergman (2011) reported that thematic analysis was not just the process of identifying themes in the data, but also understanding the relevance of the data, the questions, the context, and the theoretical framework. In fact, Bergman offered the following steps to identify themes in the data: Top-down coding process, which is where the researcher imposes their coding scheme on non-

<table>
<thead>
<tr>
<th>Thematic Analysis</th>
<th>Trustworthiness and Credibility</th>
<th>I/C Paradigm</th>
<th>MDCC Model</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Familiarization with data</td>
<td>• Member checking</td>
<td>• Applied to understand the experience and worldview of participants.</td>
<td>• Dimension I- Personal Identity</td>
</tr>
<tr>
<td>• Coding</td>
<td>• Rich and Thick Descriptions</td>
<td>• Applied to understand the meaning of the participants’ experiences</td>
<td>• Dimension II- Components of Competence</td>
</tr>
<tr>
<td>• Searching for themes</td>
<td>• Reflexivity Strategy</td>
<td></td>
<td>• Dimension II- Foci of Cultural Competence</td>
</tr>
<tr>
<td>• Reviewing themes</td>
<td>• Subjectivity Statement</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Defining and naming themes</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Writing up</td>
<td></td>
<td></td>
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</tbody>
</table>
numerical data; Bottom-up coding is where researchers use inductive techniques to identify relevant themes; and Iterative coding where the researcher codes the data repeatedly through the top-down and bottom-up coding process. According to Bergman the researcher may have to further analyze the data by exploring the relations between themes, conditions of the themes, the shifting of themes, and any sub-themes that emerge. After this analysis is completed and the relevant data to the study has been identified the researcher will conduct a dimensional analysis (Bergman, 2011; Johnson, Asmaro, Suefeld & Gushin, 2012).

Dimensional analysis is conducted to understand the structures and patterns or differences of the themes. In some cases the researcher may want to continue to explore the structures and patterns further by connecting them to the source material in an attempt to interpret the themes in the data (Bergman, 2011). Even though Bergman attempted to provide clarity about the process to conduct thematic analysis he did not offer explicit instructions on implementing this technique. However, Braun and Clark (2006) offered more clarity in their research on conducting thematic analysis.

Braun and Clarke (2006) assert that at the time of their research there was no clear agreement or process to conduct thematic analysis. They further reported that in past studies researchers have often used thematic analysis, but the technique was not labeled as such within their research. To further explain, Braun and Clarke (2006) offered two ways for researchers to conduct thematic analysis, which were either a theory driven approach or an inductive approach to code data. On one hand, in the theory driven approach the researcher typically would have questions related to a particular theory related to their topic. This
approach would be guided by the researchers’ theoretical and analytical goals. Braun and Clarke reported that the theory driven approach to thematic analysis is not as rich in data description, but could be quite detailed in specific areas of the research (2006). Conversely, with the inductive approach to thematic analysis the data directs the path of the research. On this path the researcher codes the data bottom-up without trying to force the data into previously generated codes (Braun & Clarke, 2006). Braun and Clarke (2006) created a six-step process to conduct thematic content analysis. Using this six-step process as listed below I was able to code the data sets and identify themes within the data:

1) “Familiarization with the data: this is where the researcher submerged himself in the research and became closely familiar with the data set. During this process the researcher read, reread and listened to audio recordings while maintaining notes about my initial observations. This process helped me to become thoroughly familiar with the data. I made notes about the first thoughts that came to mind about what the participant stated.

2) Coding: this is where the researcher created concise labels for significant areas of the data relevant to the larger research questions directing the analysis. This process required the researcher to analyze the data. The coding process required the researcher to analyze the data set not just reduce the data. In this step the researcher coded all of the data collected and begin to assemble the codes. After I established the codes I then grouped the codes together that were similar.
3) Searching for themes: Themes are coherent and significant patterns in the data set relevant to the larger research question. In this step the researcher searched for the similarities within the data. Identifying themes was an involved process that required the researcher to construct the themes from the data. At the end of this step the researcher collated all of the coded data relevant to each theme. In this step I examined the messages that remained consistent based on the responses of the participants and was able to identify themes from the viewpoints of the participants. I searched based on the consistent responses from the participants. I was then able to create themes that represented the coded data.

4) Reviewing themes: In this step the researcher had to confirm that the themes told a convincing, compelling, and reflective narrative about the data. Each theme started to establish meaning while also creating clarity about the interaction between themes. This is where the researcher decided to join themes and eliminated themes. I eliminated themes that were redundant to avoid duplication.

5) Defining and naming themes: In this step the researcher was expected to perform and write a comprehensive analysis of the themes. The researcher took time to identify the real meaning of each theme and created a clear, effective, and descriptive term for each theme. At this stage of the analysis I
was able to distinguish the themes from each other. This process allowed the me to establish boundaries or descriptors that shaped each theme.

6) Writing up: The write up is an essential component of the entire analytical process. During this step this was where the researcher pulled the analyzed narrative and the graphic data extracts together to reflect a clear, comprehensible, and convincing story about the data while drawing connections to current literature.

Braun and Clarke (2006) advised researchers to not just view this process as a linear model, but as one that can be used repeatedly even if the prior steps are not completed correctly.

In this study, thematic analysis is considered an appropriate method to analyze the data in order to further understand the lived experiences and perceptions of the participants in this study. Clarke and Braun (2013) indicated that thematic analysis is suited for this type of research because it explores a wide range of research questions, even that which explores experiences of others. This method can be used on both small and large sets of data and data from different sources, such as interviews. In this study the thematic analysis process occurred while the data was searched and grouped into similar codes that led to identifying the major themes in the research. This study collected data using semi-structured interviews that were transcribed and evaluated with an inductive thematic analysis approach.

Trustworthiness and Credibility

Gibbs (2008) stated that qualitative validity, also known as trustworthiness or credibility, refers to the process of verifying the accuracy of the findings by following a
certain process. According to Creswell (2009) this process includes checking transcriptions to ensure the accuracy of the information transcribed. In completing this process the researcher verified that the code definitions remained the same throughout the study by constantly reviewing the data. Typically, time is needed to discuss the analysis with other coders; however, in this study the researcher was the only coder. While coding I continuously checked to ensure I followed the coding process. Morrow (2005) reflected that credibility in qualitative research is parallel to internal validity in quantitative research. Credibility also speaks to the internal consistency of the research (Morrow, 2005). This is where the researcher demonstrates the rigor in their research and how they ensured the rigor of the research (Gasson, 2004). Qualitative reliability is the process to ensure consistency throughout the study. Creswell (2009) reports that it is important that several steps be taken to ensure validity and reviewed 8 different strategies as possible options to check validity, which are as follows:

1. Triangulation
2. Member Checking
3. Rich, Thick Descriptions
4. Clarifying the Bias
5. Present Negative or Discrepant Information
6. Spend Prolong Time in the Fields
7. Peer Debriefing
8. Use of External Auditor
However, for this study three strategies were used to confirm the validity of the results. The researcher used member checking, rich and thick description, and reflexivity strategies.

**Member checking.** Member checking is the process of taking the final report or descriptions of themes back to the participants for accuracy verification (Creswell, 2009; Lincoln & Guba, 1985). Lincoln and Guba (1985) indicated that checking with the members of the research is the most significant strategy in developing credibility in the research. During this study, the researcher used member checking, as the participants were asked follow up questions and to review segments of the findings to confirm understanding. For accuracy the participants were asked to look at parts of a refined product based on their transcribed interview (Bloor, 1997; Rodwell, 1998; Creswell, 2009). This process offered them the opportunity to provide feedback to the researcher regarding the findings before any additional steps were taken. By allowing the members to check the data the validity of the findings was more certain, as the data were not based on the perspectives of the researcher only, but of all parties involved in the study.

**Rich and thick description.** Merriam (1998) reflects that generalizability is not a focus point of qualitative research, as it is more of an analysis of events. In the process of interpreting events, a reader may be able to transfer a particular context to another context in a process referred to as transferability (Lincoln & Guba, 1985). In this research, the researcher utilized a rich and thick description strategy, which provided detailed descriptions of an environment or theme. By providing thick, rich, and detailed descriptions of the participants and their lived experiences it helps readers gain a more realistic perspective
about the participants experiences while also adding to the validity of the study. In this study the researcher provided detail descriptions of the lived experiences of the participants (See Chapter 4).

**Reflexivity strategy.** The reflexivity strategy was also utilized to substantiate the validity of this study. Davies, B., Browne, J., Gannon, S., Honan, E., Laws. C., Mueller-Rockstroh, B., & Petersen, E. B. (2004) research indicated reflexivity is a tiring, but needed process to develop understanding. During this process I questioned myself about my own understanding of the data, while fully aware of my position, culture, education, experiences and exposures. Koch and Harrington (1998) explained that during a qualitative research study the researcher should continuously engage in the process of self-analysis to gain clarity about how his or her experiences impact the direction of the study; however, it is important to acknowledge the emotions that develop during the study about the research. According to Etherington (2004) researchers must understand that being reflexive requires the researcher to function on different levels. For example, in this study I collected, coded, and analyzed the data from the study. By performing these roles my personal experience could have impacted the direction of the research if my biases were not acknowledged throughout the process. Lamb and Huttlinger (1989) reported that reflexivity requires the researcher to have a level of self-awareness of their role as the researcher as well as the environment. This would mean the researcher does not just have great insight to their own biases, the position they hold within the study, and how these areas can influence their research, but they should also have an increased awareness about the environment. Having an increased awareness of
the environment demonstrates the researcher’s understanding of the boundaries and rules of the setting in which they are facilitating their study. In this study it was imperative that I understood my roles in the study, as well as how these positions could impact the outcomes of the study. Therefore, I had to utilize tools such as checking my biases to avoid misrepresenting the findings based on my personal perspectives. Gouldner (1971) shared that reflexivity is viewed as the researcher’s analytic role in the study. As part of using the reflexivity strategy I had to be fully aware of my biases and subjectivity. In the next section, I have acknowledged my position in my subjectivity statement, where I have shared my experiences, thoughts and biases.

**Subjectivity Statement**

According to Denzin and Lincoln (1988) qualitative research is a process that requires collaboration between the research and the study participants, and for the researcher to always beware of their “personal history, biography, gender, social class, race and ethnicity and those of the people in the setting” (p.4). As an African American male LPC, I have received numerous referrals from other licensed and provisionally licensed counselors who believed I was better able to provided services for their African American male clients. It is this personal connection to the topic that drives this research. Moreover, as a result of my personal experiences I have chosen to explore this area because I believe race and gender were factors related to the referral of African American male clients made to me by non-African American providers.
My personal, educational, and professional views have contributed to my desire to conduct this study. I am a 42 year-old, married, African American father to four children. I was raised in a low-income, single-mother home in North Carolina 500 miles away from my father. Both of my parents guided my development, but in different ways. My mother supported my progression in life by helping understand the role of a man and provided other strong African American male figures for me to secure guidance and direction (e.g., uncles, grandfather). My father taught me to be responsible for my choices. He gave me my first understanding of what an African American male looks like and how I should and should not be as a man. He set the bar for me about what I expected of other African American males. I observed my father work two, sometimes three jobs to provide for his family. He made me understand that I must work hard to achieve my goals. This representation of an African American male was not the only experience I encountered. As a young African American male I had a variety of experiences with other African American males. At the age of seven I experienced my first physical altercations with an African American male and witnessed my brother being bullied by an African American male. In fact, when I was 15 years old my brother was shot and killed by another African American male. These experiences definitely impacted my perspective, however, it never made me afraid to be around other African American males.

At 14 years old, I received my first real job and began working 4 hours every day after school and on most weekends. At the age of 18, I graduated from a predominantly African American high school and was nominated for a merit scholarship in chemistry.
During high school I observed many African American students excelling in their academics and athletic abilities as well as those who did not maximize their potential. Here is where I began to really understand my own value. I began to understand that I could not expect more or less of a person because of their skin tone or of their physical abilities.

After high school I completed my bachelor degree in Criminal Justice from North Carolina Central University in less than four years while working full time and raising a family. After gaining work experience with African American adolescent males in the Criminal Justice system I decided to study counseling in attempt to focus my abilities on helping youth make better choices to avoid incarceration. During my graduate program I learned about cultural sensitivity and ways to approach people from diverse cultures. My academic training did not offer me enough experience or information about how to work with diverse populations to prepare me to work with them. Therefore, I began to seek experiences with people from diverse cultural backgrounds in order to gain greater clarity about the traditions, belief systems, customs, and values of the people I desired to serve.

After graduation and obtaining my license I began working as a counselor. While working as a counselor I served mostly African American males within low-income communities. Also during this time I began to receive a number of referrals for counseling services for African American adolescent males. Many of the referring sources indicated that they referred these clients to me because I was an African American male and I would better relate to the client. The referral sources were both non-clinical human services workers and clinically trained mental health practitioners. After receiving a number of referrals over the
years from clinically trained, non-African American mental health practitioners, I began to wonder what clinical skills I possessed that would make other counselors refer clients to me. I wondered if my race was the only factor for the referral, or was there something the referring clinician lacked that made them feel they were less capable of providing the client with the best care. I understand that many factors play a role in the decisions counselors make when deciding what population to serve. As a result, I wanted to explore the lived experiences of both African American and non-African American counselors that may contribute to referral decisions with African American male clients.

I have strong beliefs about how counselors should be trained, supervised, and the type of experiences they should have prior to working with certain populations. These beliefs are primarily based on my personal, educational, and professional experiences as a Licensed Professional Counselor serving African American male clients. I am able to appreciate that my expectations of Licensed Professional Counselors may not correlate with the participants in my study. I was diligent about monitoring any of my biases, or beliefs by bracketing and journaling throughout the study. I constantly pursued efforts to maintain an open mind to experiences of participants that were different than mine. I captured the stories of each participant from a neutral position as much as possible without my personal influence.

Theoretical Lens

Interpretivist-Constructivist Paradigm

This qualitative study methodology was directed by an interpretivist-constructivist paradigm. The main purpose of using this paradigm was to understand the worldview of the
participants based on their personal experience (Cohen & Manion, 1994) not to explain them. This method explores how participants in a study have constructed their own world based on their social interactions (Silverman, 2001; Mertens, 2005) while simultaneously understanding what those social interactions meant to them (Silverman, 2001). Given that reality is based on social experiences (Mertens, 2005) this approach allowed the researcher to utilized the lived experiences and worldviews of the participants (Creswell, 2003) to gain clarity as it relates to their perceptions of African American males, cultural competence, and experiences with the population.

Using the inductive interpretivist method and in-depth interviews has afforded the researcher an opportunity to understand the meaning the participants attributed to their connections with their perceptions of African American male clients and its influence over their choice to serve them. This required the researcher to explore the participants’ social interactions as well as explore other influences of which they were exposed. Another factor of this paradigm is the constructivism. As a constructivist, according to Creswell (2003), the researcher typically uses qualitative data collection and analysis strategies. Moreover, in this method constructivists do not initially identify theories to guide their research, but allow one to develop based on patterns that develop or through the use of inductive methods (Mackenzie & Knipe, 2006). It is the knowledge the researcher gained from the participants experience with African American male clients that has helped to guide this process.

This paradigm is comprised of two components of qualitative research that when used together have allowed the researcher to use a lens that acknowledges the researcher and
participants’ interactions while also undertaking different interpretations of those interactions. Based on this paradigm the researcher was able to identify a theory-based model that reflects how cultural competence is developed as well as how it impacts the participant’s worldviews and their decisions to work with certain populations.

**Multidimensional Cultural Competence Model**

Understanding the essence of cultural competence in a number of settings is one of the most significant components of cross-cultural counseling (Chiu, Lonner, Matsumoto & Ward, 2013). This model was chosen because of its focus on increasing insight about attitudes, beliefs, and stereotype about various races (Sue, 2001). There have been numerous calls to develop a cultural competence model over the past three decades (Sue et al, 1998; Arredondo et al, 1996; Sue et al, 1992; Sue et al 1982). Researchers began to understand that additional studies on cultural diversity were needed as a result of the application limitations of Euro-American based theories and concepts of cultural diversity. Sue & Sue (1999) acknowledged that unless changes are made to the perspectives of American psychology to a multicultural view, it is at risk of no longer being culturally relevant. Many researchers and theorists agreed that guidelines related to establishing cultural competence were needed, but many problems prevented that from occurring including the various ways cultural competence has been defined (Sue, 2001) and the lack of clarity regarding the multidimensional framework (Atkinson, Morten and Sue, 1998). Cultural competence has been studied from various vantage points, such as Euro-American, African American, Asian American, and Hispanic American; however, a consistent framework was not able to be
identified until Derald Wing Sue developed the Multiple Dimensions of Cultural Competence (MDCC). Sue’s model offered a framework for understanding the three primary dimensions of multicultural competence. According to Sue (2001), the three dimensions of multicultural competence are as follows: (1) specific racial/cultural group perspectives, (2) components of cultural competence and (3) foci of cultural competence. Through this model the researcher examined the participants’ lived experiences and their perspectives about how they developed their multicultural competence.

**Summary**

In this chapter the methodologies used in this study were presented, which included information about the research design, the participants, as well as the procedures followed to collect, code and analyze data in this study. Also discussed in this chapter are the details regarding the steps taken to minimize biases by utilizing techniques such as member checking, rich thick descriptions, and reflexivity. In the next chapter, the process undertaken to code and analyze the data collected is presented in a narrative format. This format allowed the researcher to present the findings of the study that best represented the lived experiences of the participants.
CHAPTER 4: RESULTS

The purpose of this qualitative research study was to explore how counselor perceived aggression in African American male clients influences their decision to provide counseling services to African American male clients or to refer these clients to a different provider. In this study, I interviewed six licensed professional counselors to explore what they believed contributed to their perceptions of African American males, such as experiences with the population, specific academic training, professional development, and the influence these perceptions have had on their professional experience with African American male clients. Two main questions were used to guide this study:

1. What are counselor perceptions of aggression in African American male clients?

2. How do counselor perceptions of aggression in African American male clients affect working with African American male clients?

Findings from interviews conducted with the participants are presented in this chapter. A thematic analysis of the interview data, resulted in seven themes (See Table 3):

1. Media Influences Perceptions.


3. Move with Caution.

4. Media Sets the Stage.

5. Experience is the Best Teacher.

6. Training and Exposure.

7. Experience is Essential.
Table 4  
*Research Questions and Themes*

<table>
<thead>
<tr>
<th>Research Question</th>
<th>Themes</th>
<th>Data Example</th>
</tr>
</thead>
<tbody>
<tr>
<td>What are counselor perceptions of aggression in African American male clients?</td>
<td>Media Influences Perceptions</td>
<td>Quite often movies, videos and news clippings promote the image of African American males as criminals and noncontributing citizens.</td>
</tr>
<tr>
<td></td>
<td>Violent Drug Addicted Criminals</td>
<td>…they are depicted as gangbangers, as violent, rapists, in a lot of domestic violence situations and drug lords and not positive models for society.</td>
</tr>
<tr>
<td></td>
<td>Move with Caution</td>
<td>I have actually been verbally told African American males are more aggressive than other males (i.e., Caucasian) by my friends, definitely requiring effort and due caution</td>
</tr>
<tr>
<td>How do counselor perceptions of aggression in African American male clients affect working with African American clients?</td>
<td>Media Sets the Stage</td>
<td>I think that by the negative reflection from media that African American males are aggressive increases barriers to treatment, as African American males are already resistant to mental health services as a whole.</td>
</tr>
<tr>
<td></td>
<td>Experience is the Best Teacher</td>
<td>I work with African American males of all ages and I have learned that being judged can make them feel defensive and lead them to shut down</td>
</tr>
<tr>
<td></td>
<td>Training and Exposure</td>
<td>I would say my training in grad school and my client outcomes are the two biggest factors that have made me believe I am effective with African American males.</td>
</tr>
<tr>
<td></td>
<td>Experience is Essential</td>
<td>I would recommend that all clinicians expose themselves in positive activities that African American interact in to learn their culture.</td>
</tr>
</tbody>
</table>
An interpretivist-constructivist theoretical lens was used to analyze the themes that emerged from participant interview data. The purpose of an interpretivist-constructivist lens is to capture the lived experiences of the participants and to better understand their view of the world, as it relates to African American male clients and the influence it had on their decisions to serve the population. Findings from this research study are presented as themes that emerged from participant interviews and are organized by the interview questions.

**How Do Media Portray African American Males?**

**Theme 1: Media Influences Perceptions**

This theme is defined as viewpoints that consistently reflected how media created images and messages influence perceptions of African American males.

First, participants were asked, how does the media portray African American males?

The portrayal of African American males, unfortunately even today in the media, promotes stereotypes. Stereotypes such as laziness, lack of empathy, ignorance, and a lack of self-control leading to violence are still circulating. Quite often movies, videos and news clippings promote the image of African American males as criminals and noncontributing citizens.

—**Tina.**

Tina’s perspectives about how media portrays African American males were not hers alone. All of the participants expressed similar responses about how media represents African American males to the world. For the most part each of the participants believed that the media depicts African American males negatively. Like Tina, Andre supported that the
media does not reflect African Americans in a positive light. Andre stated the following in regards to how he feels media portrays African American males, “Media portrays African American males rather negatively. I do not think they give good examples of not necessarily educated black males, but positive or professional black male role models.”

Participant Rusty, a biracial male who grew up in the suburbs of New York, was also able to recognize the negative images of African Americans in the media. Rusty stated, “They are portrayed as over sexualized and aggressive. They are often placed in contexts to appear intimidating, even as children in the school environments.”

Even though there seemed to be a common thread with respect to how the media represents African American males to the world, participant Katherine also held a somewhat neutral perspective, initially. She noted the following regarding how media portrays African American males:

At present, the media that I engage in seems cautious to not portray African American males in any way. Looking back to Trayvon Martin and the reporting on his murder, I do remember hearing that he smoked pot and got into trouble in high school, a few times.

As Katherine spoke of her experiences with the media, she became more aware of how the media has shaped worldviews. She was able to identify that the news in fact reported irrelevant information about Trayvon Martin in attempt to paint a picture of him as a problematic teen and not just as a victim of a crime. Katherine shared the following comments:
I think the climate is different today than 10 or 20 years ago. There is a blatant difference with Fox News reporting vs. MSNBC, which is known to be more liberal. Whatever the agenda is that is being pushed will spin the news on any race.

Each of the participants have viewed the news and attested to similar experiences and perspectives regarding negative images and portrayals of African American males by the media. These participants have indicated that the media is distorting the images of African Americans males. The participants believe that the media is shaping the perceptions of its audience by continuing to perpetuate negative stereotypes about African American males.

**How are African American males portrayed as aggressive?**

**Theme 2: Violent Drug Addicted Criminals**

This theme is defined as viewpoints that reflected specific depictions of the behavior of African American males that included violence, criminality, and drug use or trafficking.

Next, the participants were all asked, how are African American males portrayed as aggressive? The reflections were detailed and lengthy. Each participant spoke freely about what the media has done to represent African American males as aggressive. Several participant viewpoints are presented to convey consistency in the impressions they received from media about African American males. Andre shared the following:

African American males are portrayed as aggressive in many ways, such as in movies where they are depicted as gangbangers, as violent, rapists, in a lot of domestic violence situations and drug lords and not positive models for society. For example, recently in the news there was a portrayal of a Black male, which they called an
institutional model. There was a second guy in the news that was portrayed as a prison model. Both men were males and were criminals. These men were talked about in the news as if they were famous all because they were thought to be good-looking Black males while being labeled as prison models. They did not have any White males or Chinese males up there. It seem like they were exploiting them like the masters who were selling bucks. Back then they would accentuate their features to sell them. Today, the headline in the news stated ‘Model prisoner, handsome prisoner picture goes viral.’ And that is something newsworthy? As if this is something to be admired.

In Rusty’s interview, he also supported that commonly shared belief that African American males are reflected negatively in media. Rusty shared the following regarding how African American males are portrayed in the media:

It is often the context they are placed in: football team, jail, military, urban environment as either dirty police, criminal, or drug addicts. Rarely are they placed in hospitals as a doctor, in research centers, the halls of government, or corporate boardrooms.

Similarly, Terrence shared the following, “African American males are often portrayed to be aggressive by characterizing them to be more offenders of violent crimes and highly confrontational.”

Katherine also supported the theme in her interview. She shared the following about how African American males were portrayed to be aggressive:
The hood mentality that African American males are living in the streets, killing for power, selling drugs, corrupting the neighborhoods, etc. When I think of African American males as aggressive, I can only picture young males, for example, O-Dogg from *Menace II Society*.

**Messages About African American Males From Family and Friends**

**Theme 3: Move with Caution**

This theme is defined as viewpoints from significant people in the participant’s life that warned them to be careful, watchful, and concerned about their safety when around African American males.

The participants were next asked to talk about the messages they received about African American males.

“I have actually been verbally told African American males are more aggressive than other males (i.e. Caucasian) by my friends, definitely requiring effort and due caution.”

—Tina.

The participants in this study were asked to reflect and share the experiences they have had with friends and family regarding the types of messages they received about African American males. Tina also shared the following comments:

From family I have taken the message to be that African American males can be strong, loyal to family, and territorial with their woman. The biggest piece I have taken from my family about African American males, people in general is that
demonstration/signs of aggression are usually indications of self-preservation. Most of the messages that I receive from fellow colleagues, peers, and family are that African American males are uneducated, confrontational, are dependent on governmental funds, have poor parenting skills, have multiple children out of wedlock, and are a part of gangs and have been incarcerated in the past. Tina talked about her experiences from a dual perspective. On one hand she mentioned that her friends warned her about African American males being aggressive and to be careful. On the other hand, her family supported the aggressive actions of African American males and associated them as being an example of their dedication, love and concern for their family. Tina stated that her take away from her family is that demonstrations of aggression are based in fear and are a reflection of self-preservation. Several of the participants expressed some form of caution or warning when referencing the messages they have received about African American males. For example, Rusty shared that he received mixed messages as well from his parents. Being mixed I received different messages from my white father than I did from my black mother. My mother was quick to discuss how children of color struggle in their surroundings, which were different from mine in the suburbs, and that there were complex factors at play when it came to the reasons for some of the things that happen daily in an urban/black community. My father would not attempt to explain them, only saying something that boiled down to “learn from that and don’t let it happen to you or yours”.
His mother, who was African American, took time to explore racial tensions in the world that he was not privy to have due to the environment he was raised. However, his White American father would simply caution him about his choices. As vague as the advice given to Rusty by his father was, it still informed him about the path he should take when dealing with African American males.

Other examples like Katherine’s experience continue to demonstrate that one must be ever watchful about how they interact with African American males. Katherine discussed that her parents were not known to be racist, but they expressed concerns about choices she could make that would impact her forever. Even though she never witnessed her parents making any disparaging remarks about any race, she acknowledges that her parents both held strong beliefs about African American males. She shared the following:

The comments I have heard would portray African American males as less trustworthy and not as intelligent and that it’s good to be friends, but don’t date African American males. My parents have never said a racist comment that I am aware of and this was the mentality. My parents didn’t meet a black person until my dad went into the Army. The rules never implied that dating an Italian or middle eastern man would be unacceptable.

While Katherine’s parents never displayed any overt behaviors that would suggest racism or that they believed stereotypes about African American males, they were sure to express specifications about what path she should and should not take. Katherine’s parents learned this message and believed it was valuable knowledge that needed to be shared with
their daughter. It is not clear where the messages Katherine received stemmed from, but it left a lasting impression on her.

Move with caution seemed to be the most consistent message the participants received. The advice the participants’ received to move with caution was not based on them having the same type of experiences with African Americans or beliefs about them, but the conclusions seemed similar with the exception of Andre. Andre was not able to think of messages that he has received from family and friends, but he could identify what messages he heard through the media about African Americans. He shared the following:

Well I do not know so much about messages from my friends and family. But when I look on the news to places like Ferguson and other places they are telling Black males they should be submissive to police. This tells me that Black males are not viewed positive anywhere in our country. It tells me that Black lives don’t matter. This also tells me that Black males have to always be careful or they are at risk.

Andre was candid about his thoughts of the messages that are shared with the world about African American males. His comments did not reflect what he has gained from personal exchanges, but what seemed to have a large influence on him are the messages expressed in the media regarding African American males. He to seemed to express familiarity with the idea that African American males have to be cautious or they may suffer at the risk of failing to do so or even if they are cautious.
Media Portrayals of African American Males and The Therapeutic Relationship

**Theme 4: Media Sets the Stage**

This theme is defined as viewpoints that reflect the impact media has had on the participants.

“I think that by the negative reflection from media that African American males are aggressive increases barriers to treatment, as African American males are already resistant to mental health services as a whole.”

—Andre.

When the participants were asked to share their experiences and perspectives about how media portrayals of African American males affect the therapeutic relationship, several similar responses were provided. Andre believed that the media reinforces the negative stereotypes held about African American males about them not reaching out for help.

Randolph provided another example of how the depiction of African American males by the media impacts therapeutic outcomes. Randolph shared the following about his experiences:

I have been challenged with an African American male who was being prosecuted for a number of very serious crimes who eventually ended up in Federal prison for many, many years. The legal proceedings were about a block away and I could not get away from it every day. I knew the client was going to prison, probably for the rest of his life, but I saw him not as Black or White, but as a Soldier with a damaged soul who needed help. The information I was getting from his lawyer in addition to the media did have an affect on me because of the nature of his crimes against children and
women over years. I think I had more sessions with him than anyone else perhaps because I felt like I wanted to be there for this client in his time of need. The client and I did connect very well. So, maybe the media did affect the therapeutic relationship in a small way. I think it was more the relationship between the two of us that made the most difference.

Tina provided a reflection that described the media’s role in the development and ongoing reinforcement of negative beliefs about of African American males. Tina shared the following:

I personally feel media portrayal is the first line of conceptual knowledge and perception of the unknown. It’s the mass means of communication, globally. What the media portrays, under the assumption of informing the public, translates to the ‘norm’ in our society. This norm informs therapist of what to expect when encountering African American males, it colors the therapeutic relationship with assumed bias.

Consistently, each participant responded to this question from a personal or vicarious experience that demonstrated the media does impact therapeutic relationships. In these experiences the participants appeared to share similar views that media does impact therapeutic relationships related to counselor perceptions of aggression in African American males.

When participants were asked about media portrayals affecting their work with African Americans they were not all able to see the connection initially. However, in
responding to the questions, two of the participants had a moment of clarity and could see how they were impacted by such stereotypes in their practice. For example, Randolph talked about not seeing race when he sees a client, but was later able to see that media directly impacted how he viewed his client. Randolph initially responded to the question by saying media does not impact him, but that was not exactly his truth. Randolph shared the following experience:

I do not pay any attention to the media, because I know that is just all they are the media. I have been challenged with a client who was an African American male who committed several very serious crimes causing him to go to Federal prison for many, many years. The case was being tried about a block away and I could not get away from it. I knew the client was going to prison, probably for the rest of his life, but I saw him not as Black or White, but as a person who needed help. The information I was getting through the news about my client did have an affect on me because the nature of his crimes was against children and women. I think I had more sessions with him than anyone else perhaps because I felt like I wanted to be there for this client in his time of need. The client and I did connect very well. So, maybe the media did affect the therapeutic relationship in a small way. Although, I think it was more the relationship between the two of us that made the most difference.

Katherine is another example of how difficult it was for the participants to recognize that media has influenced her. In Katherine’s first response to this question she was simply unaware of how media has influenced her, “this is hard because I don’t feel influenced from
media when it comes to viewing people.”

Andre and Rusty both indicated that they believe the media have impacted their service delivery. Andre stated that due to the negative images reported by the media he believes he has to work to dispel the myths about African American males to people in our society as well as with the clients he serves. Andre reported the following:

I believe I have to serve as a spokesperson or role model for African American males. With all that media projects about African American males I believe I have to step up and be an advocate for them/us. I believe there are not enough advocates for African American males and because of that they get the short end of the stick. Therefore, if I can be a positive influence with my African American male clients and serve as an ambassador I believe I can help to breakdown stereotypes and barriers to treatment.

Rusty also talked about the influence media has had on his practice with African American males. He reported that he has used the images in media as a teaching tool to help informed his clients of worldviews about African Americans. Rusty also shared the following information:

I often use media to discuss topics because teenagers and children have a considerable awareness of celebrities, social media, etc. I consider staying current on such things as essential to my effectiveness as a professional working with youth.

Whether intentional or not, all of the participants reflected their clinical services with African American males have been impacted by media’s depiction of them.
Experience Working with African American Clients

Theme 5: Experience is the Best Teacher

This theme is defined as viewpoints that represent what the participants have learned from their professional experiences that has shaped how they work with the African American population.

“I believe that what I’ve learned from my clients about my clients has helped me better relate to my clients.”

—Andre.

Andre expressed that his experiences have impacted him and his work. When asked to talk about an experience with African American males he stated:

I have had lots of experiences with them and learned a lot along the way from working with them that has definitely helped me to be a better therapist. I have primarily worked with African American Males for several years in different environments. Some of the most difficult experiences I have had with African American male clients would’ve been when I worked with them in group homes. Whew! They can be very difficult, but I enjoyed working with them. Most of them had both a behavioral problem and a mental health diagnosis. I remember that I always had to work on building a level of trust beyond being cordial before they can truly open up. It’s almost like they wanted me to prove something to them. Like they wanted to see that I wasn’t just some shirt and tie trying to act like I’m concerned or that I can relate to them.
Andre explained how he has learned from his experiences and is now better for having had the opportunity to work with African American male clients. Andre was able to see the benefit from working with people who are culturally different. Even though Andre is African American he recognized that he still learned from his experiences in order to be better at his job.

Rusty provides another example of experience being a good teacher. Rusty’s experience offered him an opportunity to see that despite ones circumstances, change can occur. Rusty provided the following as and illustration of what he has learned:

I am currently working with a vibrant, smart, talented, athletic, 18 year old who had dropped out of school 2 years ago and had been drinking alcohol to the point of intoxication almost every day since. Sixty-three days ago he blacked out and decided to make significant changes in his life, which included quitting drinking alcohol and seeing a therapist. He was convinced of this by the mother of his girlfriend who is very close to him. He has not had a drop in 55 days and has consistently attended every appointment. He has moved forward in the ways we have discussed in session and defies every stereotype about young Black men. He lives in a home with 3 adults with mental illnesses. His grandmother has dementia. His mother has Bipolar I Disorder and his stepfather has a total of 6 children, only one for whom he pays child support. He’s also an alcoholic and has both given alcohol to and stolen alcohol from his stepson. He claims he is not abused or neglected, but I feel otherwise. He’s 18 and says he would leave if he had anywhere he could go. Right now he is signed up
to start working toward his associates degree this spring. He received his GED shortly after dropping out. He wants to work and go to school so he can move out of his current location to a place where he does not have to navigate around drunk people and alcohol daily.

Rusty shared that he has learned that his experience working with African Americans has taught him valuable lessons. Rusty learned from his experience that because African Americans have had struggles does not mean they cannot become successful. Rusty further reflects that positive change in the midst of confusion is likely to be the result of other influences.

Terrence also provided responses that supported his work with African American males has informed him as a counselor. He too did not share the background experiences of his clients, but has grown more as a counselor from what he has experienced. Terrence offered the following response regarding what he has learned:

Being an African American male, I aim to treat them all the same, but every case is different. Until I develop a relationship with my African American male clients I am cautious with the types of questions I ask. I am cautious because I do not want them to associate my questions with my beliefs or judgments or as if I am looking down on them. I work with African American males of all ages and I have learned that being judged can make them feel defensive and lead them to shut down. When I first started working with them I was not very successful. From my experience I have learned that I can better reach them if I do the things I mentioned earlier.
Terrence spends significant time building rapport with his clients without being confrontational with them. He attempts to build a zone conducive for positive exchange, while recognizing the risks of negatively impacting the therapeutic relationship by making his clients feel defensive and cornered. Terrence shared that his technique has helped him to have better rapport and outcomes with his clients.

**Working Effectively with African American Male Clients**

**Theme 6: Training and Exposure**

This theme is defined as viewpoints from formal and continuing education, as well as personal experiences that have prepared them to work with the African American male population.

Next, the participants were asked to discuss what they believed has helped them be effective with African American male clients. The participants’ responses all reflected that training and personal experiences have helped them to be better. Andre stated that because of his academic training, cultural sensitivity training, and positive experiences he believes he has become more effective. Andre shared the following response to what has caused him to be more effective with African American male clients:

The training I received in school helped me to be a counselor and the continuing education training required to keep my license has also helped remind me of the tools needed to work with people of all races and cultures. I also believe I am better able to work with African American males because of the positive experiences I have had with them.
Rusty believes that at the core he is better equipped to serve African American males because of his graduate training and the outcomes he experienced with his clients. Rusty shared the following remarks:

I would say my training in grad school and my client outcomes are the two biggest factors that have made me believe I am effective with African American males. I have learned that being consistent with my clients is directly related to receiving positive feedback from my clients. Some young black males have never experienced consistency from an adult in their life before. I have found that they initially test it, buck it, then follow it like a moth to a flame. Being consistent in not only what I do and say, but how I say it helps the messages I send sink in better according to client reports.

Rusty appears to know strategies to help him succeed with African American male clients. Having had the education and the experience with his clients has helped to build his confidence with them as well.

Terrence also supported that education and experience has served him well with being effective as a counselor with African American male clients. Terrence reported:

Experience interacting with African American males, reading material on how society negatively affect the entire population, attending training seminars, and interacting with fellow colleagues have assisted me in becoming more prepared and a better clinician.
While experience with African American males has had a significant effect on the Terrence, he fully acknowledges that ongoing training plays a significant role in gaining knowledge about the population.

**Recommended Training, Exposures, and Supervision**

**Theme 7: Experience is Essential**

This theme represents common viewpoints that reflect the specific training, exposure, and supervision opportunities participants believed would help others who desire to work with African American male clients.

“Y’all need to take your asses straight to the ghetto to see what it is like.”—Andre

For the last interview question all participants were asked to talk about the types of training, exposures, or supervision they would recommend to counselors who want to work with African American males. Andre was very candid about what he believed a counselor needs to work with African American males. Andre shared the following:

More cultural awareness for individuals who seek to work with African American males. They should volunteer and seek experiences where they have to relate to the African American males in their own natural habitat to gain a clear understanding of the Black perspective.

Andre believes that having counselors engage with intentionally structured experiences will help the counselor to be better prepared to work with this population, because according to Andre “nothing beats experience.” Andre believes that knowledge is powerful, but he recognized that experience has been his best teacher. Andre shared these
final thoughts, “You can have all the book knowledge in the world, but until you have the first hand experience you will not have the perspective of what it is actually like to work with African American males.”

Randolph also believed that experience with the population would serve a counselor well with their skill development. Randolph shared that he would make the following recommendations to help a counselor who desires to work with African American males, “I think maybe a longer internship time specifically with this population. Maybe in a jail or prison, methadone clinic, hospital emergency room.”

A similar perspective was found in the responses provided by Katherine. She expressed a comparable response to other participant views on what counselors needed to do to be better prepared to work with African American males. Katherine shared the following recommendations:

I would recommend that all clinicians expose themselves [to] positive activities that African American interact in to learn their culture. I recommend that all clinicians become better involved in the community. There are many training opportunities that will assist clinicians in dealing with many dynamics of this population. One exposure experiment is to have supervisees watch the study about the blue-eyed versus brown-eyed children. This is a great study to relate to current media reporting. Supervision is key to opening minds and gaining insight into our discriminatory thinking patterns.

In Tina’s final remarks she supported comments made by Katherine. She believed that experience, training, and supervision are integral components to what a counselors needs
in order to be successful with African American male clients. Tina shared her personal experience and offered the following advice:

As a beginning professional I found myself having a clinical cycle of training to be extremely affirming in exploring client populations I was unfamiliar or uncomfortable with. I would recommend that all new professionals identify and strive to ensure exposure to as many populations of clients as possible, especially those that they are highly likely to serve. I would suggest for clinicians like myself to embrace engaging in supervision or consultation when working with new client populations at minimum.

The recommendations made by the participants suggested that having factual knowledge and experience with African American culture would greatly enhance one’s effectiveness with the African American male clients.

Summary

This chapter, using thematic analysis in combination with an Interpretivist-constructivist paradigm, presented the research findings. Seven themes were identified as a result of the analysis of the interviews conducted with the participants. These seven themes were used to answer the two research questions in this study. Thick rich descriptions were used to magnify the voice of the participant while attempting to understand the factors that impacted their work with African American male clients. Media influences, personal perceptions, experiences, and training have all been identified as factors that have impacted the participant’s clinical practice with African American male clients.
In the next chapter, the meanings of the research findings are discussed using Multidimensional Cultural Competence Model. Next, the implications of the study for counselors in training, provisionally licensed counselors, fully licensed counselors, and counselor education training programs are presented. Lastly, limitations related to this study and future research recommendations are discussed.
CHAPTER 5: DISCUSSION

Summary of Research Study and Findings

The purpose of this research study was to examine if counselor perceptions of aggression in African American male clients impacted their desire to work with the population or led them to refer African American male clients to other counselors whom they perceived to be more appropriately qualified. Two main questions were used to direct this study:

1. What are counselor perceptions of aggression in African American male clients?
2. How do counselor perceptions of aggression in African American male clients affect working with African American male clients?

Using a thematic analysis I was able to analyze the data to identify emerging themes. In addition, an interpretivist-constructivist paradigm was employed to understand how counselors’ perception of aggression in African American males developed and if their perceptions influence their counseling practice. The purpose of the interpretivist-constructivist theoretical lens used in this study was to gain clarity about the worldviews held by six experienced licensed professional counselors. By using this paradigm I was able to explore how counselors developed their multicultural competence. The Interpretivist-constructivist lens allowed me to identify emerging themes from participant responses that demonstrated the need for counselors to have awareness, knowledge, and skills to work with African American male clients. The participants provided thick rich descriptions of their perceptions of African American males, how these perceptions developed, and the impact of
their worldviews on providing counseling to African American male clients. From their life and professional experiences with African American males, as well as formal multicultural training in counselor education, the participants discussed how their awareness, knowledge, and skills have developed about this population.

For this study, a list of open-ended questions were developed to guide the interview process and explore participant perceptions about African American males, how they developed, as well as the influence these perceptions have on them as practitioners. At the core of this study it explored participant awareness, knowledge, and skills related to African American male clients and assessed what they have done to enhance their development.

Participants’ interviews lasted on average 45 minutes and were audio recorded and transcribed by the researcher. Next, I analyzed the data and identified codes. While analyzing the data, new codes emerged and were added to the list of codes. From the interviews the following seven themes emerged:

1. Media Influences Perceptions.
3. Move with Caution.
4. Media Sets the Stage.
5. Experience is the Best Teacher.
6. Training and Exposure.
7. Experience is Essential.
While these findings complement existing research on multicultural counseling competence with specific client populations, the themes that emerged also contribute meaningful information about fully licensed professional counselors working specifically with African American male clients. The researcher hopes that the counselor educators, clinical supervisors, and licensed professional counselors obtain insight from the experiences and worldviews of the participants in this study regarding the awareness, knowledge, and skills needed to work effectively with African American male clients. The findings are discussed in the next section, organized by the research questions that guided this study.

**Discussion of Findings**

This section summarizes and discusses the major findings for each of the two main research questions that guided this study.

**Research Question 1: What are Counselor Perceptions of Aggression in African American Male Clients?**

**Media influences perception.** The findings reflect that the participants overall have similar reports as to how African American males are presented by media, family and friends, as well as how they perceive them. The participants also discussed how these perceptions have developed and continue to influence society. In this study, all of the participants identified factors that have contributed to how African American males are negatively depicted in society.

Early 20th century researchers like Lippman (1922) indicated, more often than not, how people are viewed by others is largely based on the viewers indirect sources and not
likely to be based on actual personal observations or experiences. Factors such as media influences are significant contributors to how people in our society view African American males. For most people, news media is the indirect primary sources of information (Van Doorn, 2015). The participants believed that media is a significant factor because it appears to distort the image of African American males and depicts them negatively. Research indicated that news programming is related to the perceptions of African Americans as lacking intelligence and low income (Dixon, 2008).

Isaksen (2012) reported that in media African Americans have been frequently demeaned by White Americans on national news broadcasts. This further supports an ingrained belief about how media influences the view of its observers. Not only do participants in this study hold similar beliefs to each other, research also indicates the same is true for many people in the world.

Gilens (1999) research reported that network news images of African Americans living in poverty might contribute to the negative perspectives about African Americans being lazy and undeserving of welfare. African Americans in news stories related to Welfare are often identified as being able to work, but yet unemployed (Van Doorn, 2015). New stories like this continue to perpetuate stereotypes that African Americans are lazy and have caused some White Americans to infer that Welfare is being given to people who do not deserve it (Gilens, 1999; Doorn, 2015). Historically, minorities have been negatively depicted in the media and these images have strengthened the stereotypes of them (Lippman,
1922; Dates, 1980; Gilens, 1999; Van Doorn, 2015). These types of depictions have been commonly shared in media and literature for many years.

Not all of the media distorts the image and culture of African Americans, but it is apparent that media contributes to perception when people from different backgrounds, similar educational training, and common professional experiences, all have similar impressions of media reports of African American males. Research shows that different forms of media such as radio, television, and news have endorsed preconceived beliefs of certain status groups (Lippman, 1922).

**Violent drug addicted criminals.** Participants consistently reflected that African American males were portrayed as aggressive in various forms of media. Examples of reoccurring negative images and stereotypes of African American males in media identify them as “The Brute/ The Nat/ The Criminal/ The Coon/ The Sambo/ and The Tom” (Smith, 2013, p. #). Overall, the participants in this study described African American males as being portrayed as violent, aggressive or affiliated with drugs, jail, gangs, violence, and criminal behaviors. Entman (1994) found that African American males were commonly characterized as perpetrators or victims of crimes. Entman also reported that White Americans were less likely than African Americans to be highlighted in a drug or violent crime related story on the news. Furthermore, African American males have for many years been characterized in various forms of media, including cinema, as criminals and dangerous (Gibbs, 1988; Dixon & Linz, 2000; Entman, 1992, 1994; Entman & Rojecki, 2000; Van Doorn, 2015; Isaksen, 2012; Smith, 2013). Movies that have left a lasting impression on
Katherine, like *Menace II Society*, continues to set the tone for how people see African American males today.

Many years ago African American were not allowed access to the types of occupations that have been made available to them now (Ford, 1997). The types of roles African Americans were initially given when offered acting opportunities in the movie industry is an example. In these types of roles African Americans were offered to play the part of criminals, comedians, con artists, and womanizers because that is what the movie business wanted (Ford, 1997).

Media continues to serve communities in many ways (Zillman & Brosius, 2000). For example, radio media its purpose was to entertain, inform, and to generate money; however, over the years, radio media has been used like a bridge to open up and connect people together who are culturally far apart from each other (Isaksen, 2012). Isaksen explains that media plays many roles in society as it is used to inform the world of current events that are impacting or that have impacted society. In the example Andre referenced regarding model prisoners, appeared to reinforce an negative idea about African American males. Although the media did not explicitly state a position about African American males, the message resonated with Andre and likely other members of society. These types of messages have been rooted in media throughout time.

In media, for example, Amos and Andy from the 1920s to 1930s continued to perpetuate stereotypes of African Americans to their viewers (Isaksen, 2012). Many years later the stereotypes that have permeated our society continue to live on. Greenberg’s (1972)
study reflected that of the White children sampled, over half of them identified the news as being the main way they have been informed about African Americans. He further stated in his study that the participants who were exposed to viewing a large amount of African Americans on television were more likely to trust the image representing African Americans as closely matching who African Americans really are in rest of the world. Such research confirms historical messages that have been disseminated through media about African Americans that continue to influence perceptions. These perceptions, in turn, reinforce erroneous information about African American males that ultimately affect counselors and the mental health services they provide to African American males.

**Move with caution.** When the participants were asked to reflect on the messages they have received from family and friends about African American males, they provided similar responses that corresponded to the images depicted by media. Overall, the messages they received from their experiences suggested that they needed to be cautious about how they engaged African American males. Other messages learned were that African American males are not trustworthy. These messages received from family, along with negative images and stereotypes of African American males in media have helped to develop the participants’ personal perspective about African American males.

None of the participants expressed agreement with how media represented African American males or that family influences have guided their decisions when engaging African American males. However, the participants did suggest awareness of how images they have seen in media continues to influence how they measure aggression in African American
males. Even more, the warnings participants have been given about African American males have suggested that they should be considered dangerous and boundaries should be established and maintained when working with them. Messages passed along like the ones Katherine’s parents passed on to her exemplify how societal messages continue to cultivate negative beliefs about African American males. Media, then, is a vehicle that connects the world to cultural groups, stereotypes, and group identity, with problematic messages that reinforce unfounded beliefs (Harwood & Anderson, 2002).

**Research Question 2: How do counselor perceptions of aggression in African American male clients affect working with African American male clients?**

Findings from this study suggest that the participants have learned effective ways to work with African American male clients from prior experiences, instead of allowing media, family, or other influences to guide their practice as counselors. The participants have provided descriptions of personal experiences to reflect how they engage African American male clients. The participants’ experience with the population, training, and internal desire are what has guided the practices of the participants with African American males.

**Media sets the stage.** Researchers have indicated that racism may be predicted based on being exposed to media (Dixon, 2008). Stereotypes established through media continue to predicate negative images of diverse groups to the world that negatively impact relationships. “A counselor’s perception of aggression can affect how he or she views the behavior, interprets the comments, or judges the intentions of a racially or ethnically different client as well as how the client should change” (Phelps et al., 1991, p. 349).
In Randolph’s case he did not recognize the subtle impacts media had on him. He did not report that his interaction with media caused him to develop biased opinions toward African American males. His response does, however, indicate a lack awareness of how his actions can be impacted by the media. Media is an influential tool used to spread information either good or bad to the world around us (Zillman & Brosius, 2000). Like Randolph, at first Katherine could not see how media impacted her view of the world. When asked to discuss how media affected her, she was unable to make the connection to her earlier comments, where she stated she was forever affected by watching Roots. Katherine shared that the experience of watching Roots has affected her interactions with all people, as she has a disdain for injustices.

**Experience is the best teacher.** The results of this question also provide guidance to practitioners who desire to work with African American males, graduate training programs, provisionally licensed clinicians, and clinically trained supervisors. The participants offer insights to what has helped them to develop cultural competence with African American males. The participants offered suggestions on the types of experiences and educational opportunities others may experience to help them increase their multicultural competence with African American males.

In this study Andre was able to see the benefit from working with people who are culturally different. Lent, R. W., Hoffman, M., Hill, C. E., Treistman, D., Mount, M., & Singley, D. (2006) stated that as counselors acquire more clinical experiences with specific types of clients they begin to see themselves as being more effective. Andre, an African
American male, learned from his experiences working with African American male clients in order to be better at his job. Rusty shared that he has also learned that his experiences working with African American males clients has taught him valuable lessons. Specifically, Rusty learned while African American males have had struggles, it does not mean they cannot become successful. Rusty he shared that his mother explained to him about the struggles other African Americans experience, but it was not until he had an opportunity to encounter this very example that he was able to gain clarity. He shared that his experience offered clarity that would allow him to understand more about the challenges African American males experience. Sheu and Lent (2007) research stated that beyond education and background it is important for counselor trainees to have direct client contact.

Terrence also provided feedback that continued to reinforce that his work with African American male clients has informed his work as a counselor. He too did not share the background experiences of his clients, but has grown more as a clinician from what he has experienced. In Douglas’ (1993) research he indicated that it is helpful to have knowledge of the community and background of one’s clients culture as well as general problems associated with that population of people or their environment in order to better understand the influences that may impact their behaviors. Terrence spends significant time building rapport with his clients without being confrontational with them. He attempts to build a zone conducive for positive exchange, while recognizing the risks of negatively impacting the therapeutic relationship by making his clients feel defensive and cornered.
Terrence shared that his technique has helped him to have better rapport and outcomes with his clients.

**Training and exposure.** The participants’ responses all reflected that training and personal experiences have helped them to be better. Andre stated that because of his academic training, cultural sensitivity training, and positive experiences he believes he has become more effective. Andre shared that the training he received helped him learn how to be a counselor, but it is the continuing education that has also had a significant impact on his effectiveness with African American male clients. Gladding (2000) stated that for counselors to not lose their skills they have to continuously attend workshops and conferences to stay current. Research studies indicate that counselor perceived abilities would evolve as they receive more training (Sheu & Lent, 2007). Increase multicultural counseling training and positive experiences helps to build confidence in ones abilities (Sheu & Lent, 2007). Rusty believes that at the core he is better equipped to serve African American males because of his graduate training and the outcomes he experienced with his clients. Research shows that most of the empirical studies on multicultural competence have mainly focused on the influence of education and training on predicting self-reports of multicultural competence (Constantine, 2001).

Terrence also supported that education and experience has served him well with being effective as a counselor with African American males. Completing a course in multicultural counseling has proven to positively impact self-reports of multicultural competence (Neville et al., 1996). Even though experience with African American male clients has meaningfully
affected him, Terence fully acknowledges that ongoing training plays a significant role in gaining knowledge about the population. To be trained cross-culturally, counselors have to look past what is different in others, but also understand the difficulties these other cultures have had historically (Sue et al., 1982; Sue, 2001).

**Experience is essential.** When the participants were asked to provide recommendations about how to increase multicultural competence with African American male clients, hands on experience was the most commonly offered suggestion. According to Andre be believes people need to immerse themselves in the African American male community. Immersing oneself can cause deep reflection about one’s personal experiences (Streets, 2011). Biases run deep and until engrossed into a culture they are biased towards they will not be able to understand the feelings associated with the biases (Streets, 2011). Andre believes that having counselors to do these things will help the counselor to be better prepared to work with this population because according to Andre “nothing beats experience.” Immersing oneself into an environment or culture that is outside of ones comfort zone will enhance their cultural competence (Streets, 2011). Andre strongly recommended first hand experience for anyone who wants to work with African American male clients. Submerging into a culture provides an invaluable experience to gain cross-cultural competence (Streets, 2011).

Randolph also believed that experience with the population would serve a counselor well with improving their skills. Immersing into a culture will increase awareness about the personal, racial, and cultural beliefs of that culture (Tomlinson-Clarke & Clarke, 2010).
Randolph shared that counselors have to be careful about the type of experiences they have to gain perspectives about a culture. Sue (1999) stated that people have to have good experiences with different people and environments in order to ensure the messages they are learning about a culture are valid. Streets (2011) advised that immersing oneself is a good experience, but counselors have to be intentional about the process to gain from it.

Lastly, this question provides an understanding about how experiences shape how the participants perceive African American males. Some participants believed it was necessary for them to serve as an advocate for African American males in effort to dispel myths people hold about African American male clients. Whereas others believed that in spite of how African American males are portrayed, they have learned how to work with them effectively. These participants have learned to deconstruct negative media portrayals and family messaging regarding African American males and do not refer these clients to other counselors. Some participants expressed that while they did not have prior reference points before working with African American males, from their experiences they have gained an awareness that has informed there current work with African American males clients today. As a whole, participant personal and professional experiences have had more of an influence on their continuing work with African American male clients, than media and family influences.

**Application of the Multidimensional Cultural Competence Model to Findings**

In the Multidimensional Cultural Competence Model Sue (2001) provided a framework to explain how multicultural competence is developed. In this model Sue has
identified three dimensions that demonstrate the process counselors pursue to develop their cultural competence. In this section, I will discuss the participants fit with this model in developing multicultural competence.

**First Dimension**

In the first dimension of the Multidimensional Cultural Competence Model, Sue explains how personal identity is developed on a universal, group, and individual level. In the participants’ interview responses they all described how their individual personal identity was developed. Randolph talked about how his experience as a military dependent living in different places and being immersed in different cultures helped him to develop his openness to work with people of diverse backgrounds. Being immersed into a culture provides opportunities for growth because of the lived personal experiences (Canfield, Low & Hovestadt, 2009). For Randolph, being made to live in environments beyond his control has exposed him to a variety of cultures, which have strongly influenced his actions as a counselor. Katherine’s story, another example, also demonstrated that her personal identity was guided by dynamics that were outside of her control. Per Katherine, her parents, as well as a personal experience with an African American male friend in her community, impacted her cultural competence the most. Katherine talked about how the exposure and experiences to injustices have informed her clinical practice as a clinician. These are two examples that support Sue’s model regarding how personal identity is developed. Even more, although Andre, Terrence, and Rusty are African American males, their cultural experiences were different than what they learned through media and from their clients. The knowledge they
had of the African American culture from their individual personal perspective was broadened by the knowledge they acquired from their professional clinical experience. Their professional experience helped them to increase their cultural competence more than their personal experiences, which also coincides with Sue’s model about individual cultural competence. It is the personal identity that serves as a foundation for the development of cultural competence.

**Second Dimension**

In the second dimension Sue (2001) explains how the components of cultural competence—beliefs, knowledge, and skills (Sue et al., 1982) influence cultural competence. The participants provided examples of how their perceptions, knowledge and skills influenced their work with African American male clients. Andre serves as a good example. Andre’s responses reflected his intimate insight as to how African American males are perceived by others. He stated that he uses the negative reports and perceptions of African American males as a platform to educate others about African American males and to dispel myths. According to second dimension of Sue’s model the participants matched the framework of cultural competence, however, they were each at different stages, based on their life and professional experiences. All of the participants expressed common beliefs shared in society about how others view African American males. Each of the participants also discussed what they have done to increase their knowledge about African Americans. Also, the participants shared that successful experiences with African American male clients
has helped them to improve their skill sets. Again, the reports of the participants all mirrored what Sue illustrates as the framework to develop cultural competence.

**Third Dimension**

In the third dimension of Sue’s model counselors are encouraged to work toward increasing cultural competence on an individual level as well as on an organizational level. Andre, Terrence, and Rusty, discussed gaining an increased awareness of the culture of their clients from their actual experiences with their clients. Lived experiences served as the best guide for their future interactions with African American male clients. Based on Sue’s model, good, valid experiences are needed to help develop individual cultural competence. Unlike the other participants Andre is also an example of what Sue suggested being done to address cultural competence on an organizational level. For example, Andre talked about advocating for African American males. His desire is to serve as an ambassador for African American males so people can see African Americans in a positive light instead of the negative images that are painted in media.

The MDCC model serves as a framework for developing cultural competence and with that there are several directions counselors can pursue. Therefore, it is important to emphasize that all strategies identified by Sue were not required for participants to develop cultural competence. However, the participants in this study all seem to validate the standards or suggested protocols offered by Sue’s model.

The participants shared that training and experience has helped them to increase their knowledge and skills when working with African American males. None of the participants
shared that their personal experience alone was enough of an experience for them to know how to work with African American males. The participants in this study agreed that having direct experience with African American males has increased their multicultural competence.

Counselors have to have an understanding of how their culture influences the way they practice (Johannes & Erwin, 2004).

**Implications for Counselors**

The results of this study reflect the awareness, knowledge, and skill level of six licensed professional counselors who have worked with African American male clients. The results indicate that although the participants completed a course in multicultural counseling while in graduate school, some still lacked awareness, knowledge and skills with the African American male population. The participants suggested that their awareness of the African American male experience, knowledge about the African American culture, and skills related to working with this population, all developed through their clinical experience with African American males.

The findings indicated that having experience with the African American male clients is essential in developing positive outcomes with the population. The participants discussed that after having positive interactions with their African American male clients they felt higher levels of competence. The participants were in support of increasing knowledge through coursework and professional development activities. However, they also encouraged counselors to engage African American males within African American communities. The participants believed that by immersing oneself within African American cultural
experiences counselors would be allowed to gain insight about African American males that textbooks cannot provide. The participants suggested in vivo experiences, which offer counselors first hand learning opportunities, experience that would help develop their multicultural competence.

The participants were able to identify that several factors have helped to support negative stereotypes of African American males and how these beliefs have impacted their work with African American males. The results of this study would suggest that counselors have to learn to deconstruct negative messaging and stereotypes in order to effectively service African American male clients.

**Implications for Graduate Training Programs and Supervisors**

The result of this study are not just relevant for counselors, but for training programs and supervisors who guide the development of counselors. The implications for graduate counseling programs and supervisors are directly associated with providing effective ways to embrace the African American culture and African American male clients. The implications for graduate counseling programs and supervisors are that a lack of exposure and experience with African American male populations will foster low levels of multicultural competence in counselors.

The findings suggested that licensed counselors who work with African American male clients can benefit from having professional development opportunities to help increase awareness and to improve skill levels with African Americans males. The findings also suggest that counselors who work with African American males have awareness that African
American males are perceived to be aggressive. With this insight educators and supervisors have to work to acknowledge the potential biases in counselors and assist them in addressing any individual deficits regarding how their perceptions impact their clinical work with African Americans.

Finally, the results also emphasized that exposure to African American male clients has helped the participants to increase their awareness, knowledge, and skill levels. Working with African American males has increased the participants’ confidence and is what the participants recommend to other counselors. Having the opportunity to gain more experience with African American males allows counselors to gain clarity about their worldviews of African American males. The results of this study are consistent with research on multicultural counseling competence that suggests that awareness of client worldviews is essential to building multicultural competence.

**Strengths and Limitations of the Study**

Although this study was purposive there still were limitations to the study. This study provided new information regarding counselor perceptions of aggression in African American males and how those perceptions influence their mental health service delivery to African American male clients. This study served to increase awareness of the influence negative perceptions of African American males have on the counseling services even when trained in multicultural counseling. This study helps to increase the knowledge of what counselors need to do to increase their skill when working with African American male clients.
The first limitation is that the researcher targeted counselors who have successfully worked with African American male clients in the past. The findings may have been more comprehensive by also including counselors who have limited experience and/or success working with African American males.

Secondly, the researcher in this study specifically examined the perceptions held by counselors regarding aggression in African American males; thereby excluding how perceptions of African American babies, boys, girls, and women impact their clinical practices. By narrowly focusing on perception of aggression in African American males, critical information may have been missed related to general perceptions of aggression in African American individuals, which may have implication for working with African American males.

The third limitation of this study is that each of the participants did not have the same multicultural counseling course nor was there any representation from any of the graduate counseling programs the participants completed to support the types of educational opportunities the counselors received.

The last limitation identified in this study may be the sampling technique used. A purposive technique was used to gain insight to the lived experiences of six licensed professional counselors who have successfully worked with African Americans. This information was known prior to the study as a result of professional experiences with the participants. It was found to be helpful, because the participants had a willingness to participate and provide insight to their experiences with African American male clients.
However, this population does not offer insight to negative experiences with African American male clients that may have influence their clinical practice.

**Future Research and Recommendations**

Future research on counselor perceptions of aggression in African American male clients should continue to be explored. Specifically, future research should explore specific factors that influence counselor perceptions of African American males and how their perceptions guide their clinical practice with African American male clients. In addition, future research should also explore the perspectives from counselor trainees, provisionally licensed, and licensed professional counselors regarding their experiences with African American male clients. This level of research would provide much needed data for academic training programs that are attempting to develop culturally competent programs, counselor trainees who are preparing for work in the field of counseling with this population, and counselor supervisors whose guidance will help to prepare other counselors to work with African American male clients. While this research is limited to the voice of six licensed professional counselors, it may be relevant to hear the voice of African Americans males who are receiving counseling from both African American counselors and non-African American counselors. This insight may also provide an awareness to what they believe are cultural barriers as well as what will help counselors improve their rapport with the population.
Bearing in mind the implications from this study, the following recommendations are provided for counselor trainees, provisionally licensed counselors, licensed professional counselors, graduate training programs, and clinical supervisors:

1. Counselor trainees should seek guidance about the types of cultural experiences they should receive during practicum, internship, and pre-licensure experiences. Having this input could help trainees gain valuable and necessary experiences related to their growth and development as a counselor as well as their multicultural competence.

2. Provisionally licensed and licensed professional counselors should seek exposure opportunities with African American males in their community. This will increase their knowledge about the African American worldview.

The following recommendations, based on the results of this study, are offered to graduate training programs:

1. Counselor trainees should have guidance and direction when identifying practicum and internship sites. This would allow the training program to be directly involved in the opportunities the trainee would experience while providing the trainee the best chance to grow and develop professionally and culturally. This is important for counselors in training who lack exposure and experiences with certain populations.

2. Academic training programs that lack hands on experience within their cultural diversity course can adversely impact counselors’ multicultural competence.

The following recommendations are made to counselor supervisors:
1. Supervisors should discuss the cultural diversity. Such discussions can serve as models for the counselor trainee the ability to develop the skills necessary to broach this topic with clients when needed.

2. Counselor supervisors should be aware of their cultural competence and provide supervision within their capacity. Supervisors’ knowledge has a direct impact on the counselor trainee and provisionally licensed counselor development.

**Conclusion**

The findings from this research study suggest that experience with African American male clients and training were the most influential aspects on counselors’ multicultural competence. The interviews revealed that the participants’ awareness, knowledge, and skills developed more as they gained more insight about the African American male population. The participants’ awareness about African American males was also demonstrated in their responses on common myths and or how the media depict African American males, as well as their personal experiences with them. The participants reflected that the training they received in graduate school and from personal experiences with their clients has helped them increase their knowledge about African American males. Finally, participants reported that they perceive themselves to be culturally competent with African American male clients and as a result their confidence in their skill levels have increased because of past successes with the population.
REFERENCES


APPENDICES
Appendix A

Demographic Questionnaire
Demographic Questionnaire

ALL ABOUT YOU

• Your Name:

• Address:

• Contact Telephone/Cellular Number:

• Are you a licensed counselor?
  o ____ Yes
  o ____ No

• Was your graduate program CACREP?
  o ____ Yes
  o ____ No

• Gender:
  o ____ Female
  o ____ Male

• Race:
  o ____ African-American
  o ____ Asian
  o ____ Caucasian (non-Hispanic)
  o ____ Hispanic
  o ____ Native American
  o ____ Other (please list _____________________________)
• What is your current age? ___________________

• What is your highest level of education?
____________________________________________

• What specialty training have you received?
__________________________________________

• What types of certifications or licenses do you hold or have held?
_________________________

• How long have your practiced as a Licensed Professional Counselor?
__________________________

• Are you currently employed as a Licensed Professional Counselor?
  o  ____Yes
  o  _____No

• Are you self-employed?
  o  ____Yes
  o  _____No
Appendix B

Recruitment Flyer
An invitation to mental health counselors to participate in research about...

Counselor’s perceptions and experiences with African American male clients

About the Study
The purpose of this study is to understand factors that influence counselors’ perceptions and experiences of their work with African American male clients. In particular, perceptions of client aggressiveness and the desirability to engage or refer to others will be explored.

Criteria for Participation
All participants must be:
• A Licensed Professional Counselor (LPC) with a minimum of a master’s degree in the field of counseling from a CACREP accredited program
• Currently employed as a counselor

Time Commitments
Participants can expect to spend 1 hour completing the demographic questionnaire and the semi-structured interview

Study Times & Location
All interviews will be conducted at mutually agreed upon times and locations. Please consider adding your voice to this important work!

About the Researcher
Hello, I am Delton DeVoe, a Licensed Professional Counselor and doctoral student at North Carolina State University in the Counselor Education program. In my 15 years of experience, I have received numerous referrals of African American male clients from others counselors who felt unprepared to work with the population. I am interested in understanding counselors’ experiences and perceptions of this population in an effort to better serve the client. For more information contact me at (919) 937-5486 or ddevoeasl@aol.com.
Appendix C

Informed Consent Form for Research
North Carolina State University
INFORMED CONSENT FORM for RESEARCH (Semi-Structured Interview)

Title of Study: Perceived aggression in African American males and counseling outcomes with Licensed Professional Counselors.
Principal Investigator: Delton De Vose
Faculty Sponsor (if applicable): Dr. Marc A. Grimmett

What are some general things you should know about research studies? Participants are being asked to take part in a research study. Participation in this study is voluntary. All participants have the right to be a part of this study, to choose not to participate or to stop participating at any time without penalty. The purpose of research studies is to gain a better understanding of a certain topic or issue. Participants are not guaranteed any personal benefits from being in a study. Research studies also may pose risks to those that participate. In this consent form participants will find specific details about the research in which participants are being asked to participate. If participants do not understand something in this form it is their right to ask the researcher for clarification or more information. A copy of this consent form will be provided to all participants. If at any time participants have questions about participation, do not hesitate to contact the researcher(s) named above.

What is the purpose of this study? The purpose of this research is to examine counselors’ perceptions and experiences of working with African American male clients. The researcher would like to examine what factors contribute to their perceptions of the population, experiences with the population, specific academic training, professional development/training and supervision targeted toward the populations. The results of this research will provide significant insight to counselors, supervisors and universities who train counselors who work with African American male clients.

What will happen if you take part in the study? If you agree to participate in this study, you will be asked to participate in 1 semi-structured interview. Interviews will be scheduled at a location that is convenient to the participant. The interview will require an approximate time commitment of 1 hour and will be audio-recorded in order to have a complete record of our discussion.

Risks
There are risks identifiable with this line of research. Risks include the unveiling of certain biases toward certain populations. All subjects included in this research will be given a
pseudonym to be used throughout the research and any following presentations. All audio files will be kept secured on the researcher’s password-protected computer and a back up copy stored on an external password protected hard drive, which will be kept secured in a locked file cabinet in the researcher’s home.

Participants may learn they are biased and may question their effectiveness when working with diverse populations. They may also learn that they were inadequately trained and/or exposed to diverse populations. Some participants may feel anxious or experience self-doubt about their skills when working with diverse persons. Should this occur participants would be informed they could contact Dr. Marc Grimmett at (919/515-6358) for debriefing or assistance in locating a licensed professional counselor supervisor for additional supervision.

Benefits

The participants in this study may benefit by from the enhanced awareness of themselves as well as their biases. The participants will become more insightful of how their biases have impacts their desire to provide services to diverse populations. Participants may be able to see the benefit of maintaining supervision throughout their professional career and while working with diverse groups. This research may also help trainers and educators understand the various factors that contribute to counselor’s self-efficacy and what are healthy experiences for counselors in training.

Confidentiality

The information in the study records will be kept confidential to the full extent allowed by law. Data files will be stored on the researchers password-protected computer and backed up on a portable hard drive, which is stored securely in the researchers home. Audio files will be kept for 7 years after the completion of the project. No reference will be made in oral or written reports, which could link participants to the study. Pseudonyms will be used in every instance.

Compensation

Subjects will not receive any compensation.

What if you have questions about this study?

If you have questions at any time about the study or the procedures, you may contact the researcher, Delton De Vose, at (919) 937-5486.
What if you have questions about your rights as a research participant?
If a participant feels they have not been treated according to the descriptions in this form, or their rights as a participant in research have been violated during the course of this project, they may contact Deb Paxton, Regulatory Compliance Administrator, Box 7514, NCSU Campus (919/515-4514).

**Consent To Participate**

“I have read and understand the above information. I have received a copy of this form. I agree to participate in this study with the understanding that I may choose not to participate or to stop participating at any time without penalty or loss of benefits to which I am otherwise entitled.”

Subject's signature_______________________________________  Date

_________________________________________________________

Investigator's signature_______________________________________  Date

_________________________________________________________
Appendix D

Semi-Structured Interview Protocol
Semi-Structured Interview Protocol

First, let me say thank you for taking time out of your very busy schedule to talk with me today. I value your effort and promise not to go over the allotted time.

My name is Delton De Vose and I am a graduate student at NCSU. As you know, I am conducting research on counselor’s perceptions of working with African American male clients. Specifically, I am interested in learning about counselors’ multicultural competence when working with African American males.

Before we begin, I would like to tell you that:

- Your participation in this study is voluntary. You have the right to be a part of this study, to choose not to participate, or to stop participating at any time.

- The interview will be audio recorded in order to have a complete record of our discussion. The discussion will be kept completely confidential; any information obtained from you that can identify you will be disclosed only with your permission. You will be assigned a pseudonym and your real name will not appear in any of the research.

- The interview will last approximately 1 hour.

Again, thank you so much for your time today. Your responses will provide critical information for my research and help to inform the larger body of research in this area.

1. I. **Research Questions**
   a. R1: What are counselor perceptions of aggression in African American male clients?
      i. How do the media portray African American males?
      ii. How are African American males portrayed as aggressive?
      iii. What are some of the messages you have received from your friends and family about African American males?

   b. R2: How do counselor perceptions of aggression in African American male clients affect working with African American male clients?
i. How do media portrayals of African American males affect the therapeutic relationship?

ii. With the African American clients that you have worked with, how have these media portrayals affected your work?

iii. Tell me about a time you worked with African American clients.

iv. Given the messages you received from media, family, recent incidents, or current events, how do you work with African American male clients?

v. What has influenced your work with this population?

vi. What has helped you be more effective?

vii. What types of training, exposure, or supervision would you recommend to counseling work with African American males?

**CLOSING QUESTION**

1. Is there anything more you would like to share with me?

**THANK YOU**

I would like to thank you for your participation. Your comments will be very helpful to the research. I also want to mention again that what you have shared with me is confidential. Again, your name will be replaced with a pseudonym in the final product and in other papers or presentations that come from this research. Thank you again for participating in today's discussion. I appreciate you taking the time and sharing your perspective with me!