

## Asian-American Acculturation, Counselor Ethnicity and Cultural Sensitivity, and Ratings of Counselors

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Examined the effects of counselor ethnicity and cultural sensitivity and participant sex and acculturation on perceptions of counselor credibility and cultural competence. Asian Americans attending a major west coast university listened to a tape recorded counseling session in which the counselor was described as either Asian-American or Caucasian-American and portrayed as either culture-sensitive or culture-blind. The counselor was rated as more credible and culturally competent under the culture-sensitive portrayal than under the culture-blind portrayal and when introduced as Asian-American than when introduced as Caucasian-American. Although no main effect was found for participant sex or level of acculturation, both variables contributed to several significant interactions. Possible explanations and implications of these results are discussed.

In recent years there has been an increase in research examining mental health issues among Asian Americans. Leong (1986) reviewed the research on counseling and psychotherapy with Asian Americans and found that this population underuses mental health services, despite evidence that their need for services is high. Further, a study by Sue and McKinney (1975) found that up to 50% of the Asian clients failed to return to a mental health clinic after the initial contact, as compared to 30% of the Caucasian clients.

One explanation for Asian Americans' underuse of mental health services and their high dropout rate is the lack of ethnically or racially similar counselors. A study by Wu and Windle (1980) examining the use rates of community mental health centers by Asian Americans found that there was a direct relationship between the number of Asian-American staff members and the number of Asian-American clients. Asian Americans may not perceive non-Asian Americans as credible sources of help. Atkinson, Maruyama, and Matsui (1978) reported two studies in which preferences for counselor ethnicity were examined among Asian Americans. One study involving members of a university Asian-American "rap" group revealed that an ethnically similar counselor was rated as being more credible than the Caucasian-American counselor. However, a second study involving Japanese-American members of the Young Buddhist Association found no evidence that the Asian-American counselor was rated differently from the Caucasian-American counselor. These mixed findings suggest there are other factors that affect Asian Americans' perceptions of counselor credibility.

A second factor that may account for underuse and high dropout rates is conflict between Asian-American culture

and the values associated with the counseling process. Sue et al. (1976) found that Asian Americans were more likely than Caucasian Americans to believe that mental illness is caused by organic factors. Their results also suggest that many Asian Americans feel they can control their mental health by avoiding morbid thoughts. Beliefs like these may lead many traditional Asian Americans to avoid counseling and its emphasis on self-disclosure. To the extent that traditional Asian-American beliefs conflict with the values inherent in the counseling process, it can be hypothesized that highly acculturated Asian Americans will view counselors as a more credible source of help than will less acculturated Asian Americans. Atkinson and Gim (1989) found support for this hypothesis; highly acculturated Asian-American students indicated greater willingness to recognize the need for psychological help and more tolerance for stigma associated with seeking professional help than did less acculturated students. In a subsequent study, Gim, Atkinson, and Whiteley (in press) examined the relationship between level of acculturation and the type and severity of problems experienced by Asian-American students. A significant acculturation effect was observed in which less acculturated students were most concerned about financial problems whereas more acculturated students were most concerned about academic and career problems. In addition, less acculturated students indicated more problems as well as higher severity ratings for their problems than did the more acculturated students. These findings suggest that acculturation level is an important factor in the study of Asian-American mental health.

A third variable that could account for mental health underuse among Asian Americans is lack of cultural sensitivity on the part of counselors. Sue and Morishima (1982) suggest that lack of sensitivity to Asian-American culture could result in misdiagnosis and treatment errors on the part of the therapist. Furthermore, Asian American clients may avoid or not return to a counselor who is not sensitive to their culture. Some evidence has been found that Black students perceive a culturally sensitive counselor as more culturally competent than a counselor who ignores cultural aspects of a client's problem. Pomaies, Claiborn, and LaFromboise (1986)

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examined the relationship between racial identity of Black students and their rating of White counselors who were either culture-sensitive or culture-blind. Although counselor ratings were not found to be related to racial identity development, the culture-sensitive counselors were rated as being more culturally competent than were the culture-blind counselors.

The purpose of our study was to examine the effects of counselor cultural sensitivity, counselor ethnicity, participant acculturation and participant gender on perceptions of counselor credibility and cultural competence. We hypothesized that participant gender would not effect ratings of counselor credibility or cultural competence, but that an Asian-American counselor would receive more positive ratings on these variables than would a Caucasian-American counselor, and that a culture-sensitive counselor would be rated more favorably than a culture-blind counselor. Furthermore, on the basis of assumptions that the ethnic similarity and cultural sensitivity of the counselor would be more important to low-accultured Asian Americans than to high-accultured Asian Americans, we hypothesized that low-accultured Asian-American participants would give their highest ratings to a culture-sensitive Asian-American counselor but that high-accultured Asian-American participants would give their highest rating to the culture-blind Caucasian counselor.

## Method

### Participants

Participants in the study were 56 female and 48 male Asian American university students. The mean age of the 104 participants was 20.3, with a range of 19 to 29. Most of the participants were drawn from the freshmen and junior classes (30 each), followed by the senior class (24), and sophomore class (20). The ethnic breakdown was as follows: 36 Chinese Americans, 24 Japanese Americans, 22 Filipino Americans, 14 Korean Americans, and 8 Southeast Asian Americans.

### Independent Variables

This analog study used a  $2 \times 2 \times 2 \times 2$  factorial design with two levels of acculturation (high and low acculturation), two levels of cultural sensitivity (culture-sensitive and culture-blind), two levels of counselor ethnicity (Asian American and Caucasian), and two levels of gender.

**Acculturation.** The Suinn-Lew Asian Self-Identity Acculturation Scale (SL-ASIA; Suinn, Richard-Figueroa, Lew, & Vigil, 1987) was used to measure level of acculturation. The SL-ASIA consists of 21 multiple-choice items that assess language (four questions), identity (four questions), friendship choice (four questions), behaviors (five questions), generation-geographic history (three questions), and attitudes (one question). All 21 items are rated on a scale of 1 (low acculturation) to 5 (high acculturation) and when summed, generate a total score range from 21 to 105. Suinn et al. (1987) refer to low, medium, and high scores on the SL-ASIA as, respectively, Asian Identified, Bicultural, and Western Identified. They report an alpha coefficient of .88 for the 21 items. Suinn et al. also used three individual items on the SL-ASIA as criteria for validating the overall instrument and reported a direct relationship between scores on the SL-ASIA and (a) generation since immigration of respondent, (b) length of residence in the United States of respondent, and (c) self-ratings of cultural identity.

**Cultural sensitivity.** Two versions of a 10-minute audiotape of a mock counseling session between a female counselor and a female client were produced. The presenting issues of the client were feelings of alienation and isolation, difficulty in an academic area where Asian Americans typically excel, and a resulting conflict with parents over a choice of major. One version portrayed a culture-sensitive counselor and the other a culture-blind counselor. The scripts for the two tapes were identical except for nine counselor responses that were systematically varied. For these nine responses, the culture-sensitive counselor was appropriately empathic and acknowledged the importance of ethnicity and cultural values in the client's experience. In the culture-blind responses the counselor was also appropriately empathic, but did not acknowledge the role of ethnicity and culture in the client's experience. Thus, the culture-sensitive responses were generated by adding to the culture-blind responses a statement recognizing the influence of ethnic and cultural values. In each version, the client response was the same for both the culture-sensitive and culture-blind counselor statements. An excerpt of the script is presented here to demonstrate the two different counselor responses (that part of the response included only on the culture-sensitive version is enclosed in brackets).

- Client: But, you know, more than anything else, I feel really different from everybody. I grew up in a big city with a lot of Asians and other minority groups. My high school was pretty mixed; but here, I feel out of place, I miss my friends a lot.
- Counselor: Yes, it's hard to leave behind a familiar place and start all over in a new place. [But it also sounds like you're feeling alienated because there aren't many people here who share your cultural background.]
- Client: Yeah, it's really hard on me sometimes. I wish there were more Asians here.
- Counselor: I can see that this situation is affecting you a great deal. [In addition to the usual difficulties of adjusting to a new place you also feel culturally isolated.]

To further document the differences between the two counselor response sets, ten counselor trainees at a California university read a typed script containing both the culture-blind and culture-sensitive responses and were asked to indicate which of the counselor responses were culture-sensitive. All ten of the raters (five minority raters and five Caucasian raters) correctly identified the culture-sensitive responses.

**Counselor ethnicity.** Counselor ethnicity was manipulated by changing the last name of the counselor and her country of origin in the introductory statement of the study. Chris Ho was the name used for the Asian-American counselor and Chris Wilson for the Caucasian-American counselor. Chris Ho was described as a second generation American whose parents immigrated from Asia and Chris Wilson a second generation American whose parents immigrated from Canada. Except for these variations, the descriptions of the counselors were identical.

### Dependent Variables

**Cross-Cultural Counseling Inventory (CCCI).** The original version of the CCCI was developed by Hernandez and LaFromboise (1983) and later revised by LaFromboise, Coleman, and Hernandez (1989). The purpose of the CCCI is to assess respondents' perceptions of a counselor's cross-cultural competence. The revised version used for the current study contains 20 items that focus on counselor interview behavior, such as "Counselor values and respects cultural differences" and "Counselor demonstrates knowledge about client's culture." Respondents react to each item on a 6-point Likert scale (1

= strongly disagree; 6 = strongly agree). The alpha reliability coefficient estimate for the revised instrument is .95. The instrument is judged to have content validity because the items directly reflect the cross-cultural counseling competencies outlined by D. W. Sue (1982) and have a high degree of item-objective congruence (LaFromboise et al., 1989).

**Counselor Effectiveness Rating Scale (CERS).** The CERS is based on earlier works in social and counseling psychology and measures three dimensions of expertness, trustworthiness, and attractiveness as suggested by Hovland, Janis, and Kelley (1953) and Strong (1968). In addition to the three dimensions, a fourth dimension ("Someone I would see for counseling") is included as a direct measure of willingness to see a counselor. The instrument is structured as a semantic differential questionnaire (Osgood, Suci, & Tannenbaum, 1957) and responses are recorded on a bipolar scale (i.e., 1 = bad, 7 = good).

Atkinson and Wampold (1982) report the reliability coefficient for the CERS as being .90. They compared the CERS with the Counselor Rating Form (Barak & LaCrosse, 1975), an instrument that is also designed to measure the dimensions of counselor expertness, trustworthiness, and attractiveness. The concurrent validity as indicated by the correlation of scores on the CRF with the scores on the CERS (minus the willingness to see a counselor item) was found to be .80 (Atkinson & Wampold, 1982; Ponterotto & Furlong, 1985).

**Procedure**

As part of a larger survey conducted about 6 months before the current study, Asian-American college students were asked to complete the SL-ASIA (Suinn et al., 1987). These studies were classified into low and high acculturation categories on the basis of their SL-ASIA scores (the bottom two-fifths and the top two-fifths were used, respectively, for the low and high categories). Subjects for the current study were randomly selected from these low- and high-acculturation groups.

Letters of invitation were sent out initially to 120 students selected at random (blocking for gender) from the low- and high-acculturation groups. Students were informed that their involvement was voluntary and that they would receive \$5.00 for participating in a study of the counseling process. Only 77 students responded to this letter, so additional participants were selected at random from the low- and high-acculturation groups and recruited by telephone. The combined effort resulted in 104 total participants out of 180 who were contacted, producing a 58% response rate. Half of the participants were low-acculturated (SL-ASIA  $M = 53.88$ ,  $SD = 8.62$ ;  $n = 52$ ) and the other half were high-acculturated (SL-ASIA  $M = 82.77$ ,  $SD = 6.08$ ,  $n = 52$ ), and there were 24 male and 28 female participants in each acculturation group. These participants were then randomly assigned to one of four cultural sensitivity-counselor ethnicity conditions: 1) culture-blind Asian-American counselor, 2) culture-sensitive Asian-American counselor, 3) culture-sensitive Caucasian counselor, and 4) culture-blind Caucasian counselor.

Participants reported to a campus counseling clinic, where a research assistant provided a brief overview of the study. The research assistant then directed participants to a private counseling room, where they completed their tasks. Participants were instructed to read a short introductory statement describing the context of the counseling session as well as a paragraph each about the client and counselor. The client was described as an Asian-American woman who had recently transferred to the campus. The counselor was described as a woman in her 30's who worked at the university counseling center. The descriptions of the client remained constant in all conditions; the ethnicity of the counselor was manipulated by changing her name and country of ancestry.

After reading the introductory material and listening to the tape-recorded mock counseling session, participants were asked to provide some basic demographic data and to complete the CERS and CCCI.

**Results**

We computed an overall 2 (Participant Acculturation)  $\times$  2 (Counselor Cultural Sensitivity)  $\times$  2 (Counselor Ethnicity)  $\times$  2 (Participant Gender) multivariate analysis of variance (MANOVA) with the CCCI and CERS total scores as dependent variables. This resulted in nonsignificant main effects for participant acculturation and gender, and significant main effects for counselor cultural sensitivity, Wilks's lambda = .808,  $F(2, 84) = 9.969$ ,  $p < .000$ , and ethnicity, Wilks's lambda = .910,  $F(2, 84) = 4.135$ ,  $p < .019$ . Significant interaction effects were obtained for Participant Acculturation  $\times$  Counselor Cultural Sensitivity, Wilks's lambda = .919,  $F(2, 84) = 3.681$ ,  $p < .029$ , and Counselor Cultural Sensitivity  $\times$  Counselor Ethnicity  $\times$  Participant Gender, Wilks's lambda = .896,  $F(2, 84) = 4.873$ ,  $p < .010$ . Four-way univariate analyses were computed for CCCI and CERS total scores to determine the source of the overall effects.

**CCCI univariate analysis.** The analysis of variance (ANOVA) for the total CCCI scores resulted in significant main effects for counselor cultural sensitivity and ethnicity (see Table 1). The main effect of cultural sensitivity was the result of higher mean ratings being given for the culture-sensitive condition ( $M = 95.48$ ) than for the culture-blind condition ( $M = 85.94$ ). The main effect of counselor ethnicity was due to higher mean ratings for the Asian-American counselor ( $M = 93.79$ ) than for the Caucasian-American counselor ( $M = 87.35$ ).

Two interaction effects were also found to be significant. A significant interaction effect for Counselor Cultural Sensitivity  $\times$  Ethnicity resulted from a pattern of means in which the highest rating was given to the culture-sensitive Asian-American counselor ( $M = 96.54$ ) and the lowest rating to the

**Table 1**  
*Analysis of Variance for Cross-Cultural Counseling Inventory Total Scores*

Source	Sum of squares	df	MS	F
Participant acculturation level (A)	0.03	1	0.03	0.00
Counselor condition (B)	2,508.67	1	2,508.67	19.55***
Counselor ethnicity (C)	990.98	1	990.98	7.72**
Participant gender (D)	93.95	1	93.95	0.73
A $\times$ B	215.51	1	215.51	1.68
A $\times$ C	1.42	1	1.42	0.01
A $\times$ D	2.47	1	2.47	0.02
B $\times$ C	569.81	1	569.81	4.44*
B $\times$ D	217.44	1	217.44	1.70
C $\times$ D	29.94	1	29.94	0.23
A $\times$ B $\times$ C	50.93	1	50.93	0.40
A $\times$ B $\times$ D	431.54	1	431.54	3.36
A $\times$ C $\times$ D	13.83	1	13.83	0.11
B $\times$ C $\times$ D	959.42	1	959.42	7.48**
A $\times$ B $\times$ C $\times$ D	86.50	1	86.50	0.67
Error	10,905.51	85	128.30	

\*  $p < .05$ . \*\*  $p < .01$ . \*\*\*  $p < .001$ .

culture-blind Caucasian-American counselor ( $M = 80.64$ ). A significant interaction effect of Cultural Sensitivity  $\times$  Counselor Ethnicity  $\times$  Participant Gender also was observed. The means for the three-way interaction are presented in Table 2. As hypothesized, both male and female participants gave their lowest mean CCCI ratings to the culture-blind Caucasian American counselor. However, although female participants gave their highest mean rating to the culture-sensitive Asian-American counselor as anticipated, male participants gave their highest mean rating to the culture-sensitive Caucasian-American counselor.

*CERS univariate analysis.* A four-way ANOVA of the total CERS scores revealed a pattern of significant effects similar to the CCCI results (see Table 3). The main effects of counselor cultural sensitivity and ethnicity were both found to be significant. For cultural sensitivity, the culture-sensitive counselors were given a higher rating ( $M = 57.33$ ) than the culture-blind counselors ( $M = 53.33$ ). Also, as expected, the Asian-American counselors received higher ratings ( $M = 57.40$ ) than the Caucasian-American counselors ( $M = 53.64$ ). A near-significant  $F$  value was observed for the Counseling Condition  $\times$  Counselor Ethnicity interaction. The pattern of means was identical to the CCCI results in that the highest mean rating was given to the culture-sensitive Asian-American counselor ( $M = 57.62$ ) and the lowest mean rating to the culture-blind Caucasian-American counselor ( $M = 50.23$ ).

One three-way interaction (Participant Acculturation  $\times$  Counseling Condition  $\times$  Participant Gender) and the four-way interaction were also found to be significant. The means for the four-way interaction are presented in Table 4. The means indicate differing patterns for the low- and high-acculturated men and women. In the low-acculturated group, both men and women gave their lowest mean ratings to the culture-blind Caucasian-American counselor. However, they disagreed on their highest mean ratings. The low-acculturated men gave the highest mean rating to the culture-sensitive Asian-American counselor, whereas the low-acculturated women gave the highest mean rating to the culture-sensitive Caucasian-American counselor. In contrast to the low-acculturated group, the men and women in the high-acculturated

Table 2  
*Means and Standard Deviations for Cross-Cultural Counseling Inventory by Counselor Ethnicity, Counselor Cultural Sensitivity, and Participant Gender*

Participant gender	Counselor characteristics			
	Culture-blind		Culture-sensitive	
	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>
	Asian-American			
Male	92.33	9.93	94.33	7.45
Female	89.93	14.43	98.43	8.48
	Caucasian-American			
Male	73.64	14.26	97.54	8.93
Female	86.14	13.99	91.62	8.91

Table 3  
*Analysis of Variance for Counselor Effectiveness Rating Scale Total Scores*

Source	Sum of squares	<i>df</i>	<i>MS</i>	<i>F</i>
Participant acculturation level (A)	123.34	1	123.34	0.185
Counselor condition (B)	344.11	1	344.11	4.54*
Counselor ethnicity (C)	409.85	1	409.85	5.41*
Participant gender (D)	3.08	1	3.08	0.04
A $\times$ B	109.63	1	109.63	1.45
A $\times$ C	50.14	1	50.14	0.66
A $\times$ D	114.11	1	114.11	1.51
B $\times$ C	269.02	1	269.02	3.55
B $\times$ D	4.88	1	4.88	0.06
C $\times$ D	198.01	1	198.01	2.61
A $\times$ B $\times$ C	12.54	1	12.54	0.16
A $\times$ B $\times$ D	461.63	1	461.63	6.09*
A $\times$ C $\times$ D	0.30	1	0.30	0.00
B $\times$ C $\times$ D	5.02	1	5.02	0.07
A $\times$ B $\times$ C $\times$ D	326.38	1	326.38	4.31*
Error	6,668.90	88	75.78	

\*  $p < .05$ .

group concurred on their highest mean ratings. Both genders gave the highest mean ratings to the culture-blind Asian-American counselor. However, they disagreed on their lowest mean ratings. The high-acculturated men gave their lowest mean rating to the culture-blind Caucasian-American counselor, whereas the women gave their lowest mean rating to the culture-sensitive Caucasian-American counselor.

## Discussion

The results of this study suggest that counselor ethnicity, counselor cultural sensitivity, participant acculturation, and participant gender all play a role, to some degree, in how Asian-American students perceive the cultural competence and credibility of a counselor. When collapsed across counselor cultural sensitivity, participant gender, and participant acculturation, the data support our hypothesis that an ethnically similar counselor is perceived as being more credible and culturally competent than a counselor who is ethnically dissimilar. Similarly, when the other independent variables are ignored, the data suggest that a culture-sensitive counselor will be perceived as more culturally competent and credible than a culture-blind counselor.

The existence of several three-way and four-way interactions, however, qualifies these findings somewhat and presents a more complex picture of how participant acculturation and gender play a role in perceptions of counselor credibility and cultural competence. In terms of cross-cultural competence, it appears that women perceive a culture-sensitive Asian-American counselor as being most culturally competent, whereas men perceive a culture-sensitive Caucasian-American counselor as being most culturally competent. This male bias in favor of a Caucasian-American counselor is difficult to explain. Further research is needed to verify and account for the gender influence on perceptions of counselor cultural competence.

**Table 4**  
*Means and Standard Deviations for the Counselor Effectiveness Rating Scale Total Scores by Participant Acculturation, Participant Gender, Counselor Ethnicity, and Counselor Cultural Sensitivity*

Counselor variables	Participant Gender			
	Male		Female	
	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>
Low-acculturated group				
Asian-American Counselor				
Culture-blind	56.67	7.17	51.57	8.46
Culture-sensitive	59.17	7.08	55.43	8.20
Caucasian-American Counselor				
Culture-blind	52.00	8.67	46.00	13.33
Culture-sensitive	53.33	9.54	61.14	6.64
High-acculturated group				
Asian-American Counselor				
Culture-blind	60.33	6.80	60.57	6.97
Culture-sensitive	58.67	7.74	57.57	9.71
Caucasian-American Counselor				
Culture-blind	44.17	12.77	58.14	3.98
Culture-sensitive	58.33	10.11	55.00	7.70

Although the role of acculturation in determining perceptions of cross-cultural counseling competence and counselor credibility remains somewhat ambiguous, the fact that it contributed to significant two-way and three-way interactions in the overall MANOVA, as well as to significant three-way and four-way interactions for the CERS total scores, suggests that it cannot be discounted as an important participant variable. Because of the complex nature of these interaction effects, any discussion of the role that acculturation played in this study, particularly in the four-way interaction, would be highly speculative. However, the fact that the low-acculturated subjects consistently gave their lowest credibility ratings to the culture-blind Caucasian-American counselor appears to confirm our assumption that the ethnic similarity and cultural sensitivity of the counselor are important issues to low-acculturated Asian Americans.

The fact that the average SL-ASIA score for the low-acculturated participants was in the middle range rather than the low range for the instrument is a limitation of the study. Although high-acculturated participants in the present study can be assumed to be representative of highly acculturated Asian Americans, participants labeled as low-acculturated probably were more representative of a bicultural population. A replication of the current study with participants more representative of low-acculturated Asian Americans might provide more definitive information about the role of acculturation in perceptions of counselor credibility. This study is also subject to the limitations of any analog study. In particular, it should be noted that exposure to a written description of a counselor and listening to a tape recording of the counselor in a contrived counseling session may have an impact quite different from that experienced in an actual counseling session. Finally, generalization of the current results to other Asian-American populations should be limited, at a mini-

um, to Asian-American students attending a predominantly Caucasian-American university.

To the extent that these results are valid and generalizable, however, they suggest that for the most part, Asian Americans perceive a racially similar counselor who is culture-sensitive as being most culturally competent and credible. It is evident from the results that counselors, both Asian-American and Caucasian-American, can enhance their perceived cross-cultural competence and credibility among Asian-American students by acknowledging the role that culture may play in clients' problems. When the two variables of counselor ethnicity and cultural sensitivity are combined, the culture-sensitive, ethnically similar counselor is generally perceived as being most credible and culturally competent, whereas the culture-blind, ethnically different counselor is generally perceived as being least credible and least culturally competent.

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