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ACCEPTANCE

This dissertation, THE IMPACT OF HELP SEEKING ATTITUDES, PERCEIVED RACISM, AND RACIAL IDENTITY ON INTENTIONS TO SEEK COUNSELING AMONGST AFRICAN AMERICAN UNDERGRADUATE COLLEGE STUDENTS, by T.M. MOSLEY, was prepared under the direction of the candidate's Dissertation Advisory Committee. It is accepted by the committee members in partial fulfillment of the requirements for the degree Doctor of Philosophy in the College of Education,

The Dissertation Advisory Committee and the student's Department Chair, as representatives of the faculty, certify that this dissertation has met all standards of excellence and scholarship as determined by the faculty. The Dean of the College of Education concurs.

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ABSTRACT

HELP SEEKING ATTITUDES, PERCEIVED RACISM, AND RACIAL IDENTITY AMONG AFRICAN AMERICAN UNDERGRADUATE COLLEGE STUDENTS

by
T.M. Mosley

Help-seeking attitudes are the tendencies to seek or resist professional psychological services during crises or after prolonged psychological difficulties. Although African American undergraduate college students are just as distressed as students from other racial and ethnic backgrounds, they are less likely to seek psychological counseling at their college counseling centers. The primary focus of this research was to assess help-seeking attitudes of African American undergraduate college students attending predominantly White institutions (PWIs). Furthermore, scant attention has been devoted to examining the impact of perceived racism and racial identity development on the African American undergraduates' willingness to seek out psychological assistance. For this study, 186 participants completed a sociodemographic survey and four measures including, the Attitudes Towards Seeking Professional Psychological Help Scale (ATSPPHS) Short Form (Fischer & Farina, 1995), Intentions to Seek Counseling Instrument (ISCI; Cash et. al., 1975; Kelly & Acher, 1995), the Perceived Racism Scale (PRS; McNeilly et al., 1996), and the Cross Racial Identity Scale (CRIS; Cross & Vandiver, 2001). Results from quantitative analyses suggest that positive racial identity is related to higher rates of accessing counseling. Help-seeking attitudes were the biggest predictors of intentions to seek counseling, and perceived racism is negatively correlated with intentions to seek counseling. These results suggest that racial identity development and the campus climate of PWIs impact the rates at

which African American undergraduate students seek services at their college counseling centers. Implications for counseling and directions for future research are also discussed.

INDEX WORDS: African-Americans, College Counseling, Higher education

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RACIAL IDENTITY ON INTENTIONS TO SEEK COUNSELING AMONGST
AFRICAN AMERICAN UNDERGRADUATE COLLEGE STUDENTS

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CHAPTER 1

AFRICAN AMERICAN UNDERGRADUATE COLLEGE STUDENTS: COLLEGE COUNSELING MATTERS

Providing comprehensive, culturally relevant psychological services to an ever-changing and diverse student population is a significant challenge facing college counseling centers across the country (Bishop et al., 2004; Kitzrow, 2003; Orchowski, et al., 2011). Although there is an emerging body of research that has investigated the impact of counseling centers on college campuses, there remains scant attention to the impact of these counseling centers on African American undergraduate college students at predominantly White institutions (PWIs). Since counseling centers are effective sources of support within campus communities (Bishop, 2010; Talley & Clack, 2006) and considering African American students' potential experiences with racism and discrimination at PWIs, college counseling centers may be well positioned to assume the role of safe, supportive spaces for African American students struggling with identity development and college adjustment. The purpose of this chapter is to explore the challenges and experiences of African American undergraduate college students at PWIs while also examining potential barriers to their accessing services at college counseling centers.

For many students, regardless of their race and/or ethnicity, attending college is a significant period of emotional, physical, interpersonal, and academic adaptation (Lee et al., 2009). African American college students at PWIs typically encounter similar developmental tasks as their White counterparts, but they may also experience additional stressors. These unique challenges, which include racially based discrimination, feelings

of isolation, threats to academic performance, and experiences of microaggressions, are primary stressors that put African American students at increased risk for mental health concerns compared to their White counterparts.

Coping with racially-based discrimination can be a significant challenge within the culture and climate of predominantly White institutions (Wallace & Constantine, 2005). African-American undergraduates may learn that some of their peers as well as faculty and staff members may hold beliefs about African Americans as unintelligent, lazy, and dangerous (Fries-Britt & Griffin, 2007). These stereotypes are detrimental to healthy identity development, because some African American students internalize these beliefs which, in turn, may affect their self-concept and self-esteem (Solorzano et al., 2000; Solorzano & Yosso, 2002) and enhance self-defeating and self-threatening thoughts (Steele & Aronson, 2000). Arrington and Stevenson (2009) found that direct and vicarious racism experiences on campus were associated with high levels of anger expression and depression symptoms among students. The literature reports overwhelming support that being a victim of racial discrimination can result in harmful effects on a person's psychological functioning and development (Caldwell & Obasi, 2010).

Furthermore, African American students often find themselves to be a small minority inside and outside of the classroom, and this phenomenon has been coined by researchers as solo status (Kanter, 1977; Thompson & Sekaquaptewa, 2002). Being different from the rest of one's classmates in terms of race is often a negative experience, especially for members of socially disadvantaged groups, such as underrepresented racial groups. (Sekaquaptewa, 2002, 2003). Many members of

underrepresented groups, especially African Americans, report feeling overly scrutinized, stereotyped, and isolated (Thompson & Sekaquaptewa, 2002) as a result of their “solo status.” These isolating situations both increase concern about the threat of stereotypes and diminished academic performance (Sekaquaptewa & Thompson, 2003).

In the classroom, African American students may experience stereotype threat (Steele & Aronson, 1995) and stigma consciousness (Pinel, 1999) which have negative consequences for test performance and academic success. These two constructs refer to experiences where targets of this behavior focus on their stereotyped status and believe it pervades their life experiences (Pinel, Warner, & Chua, 2005). African American students may question their social connectedness in school, doubt their own academic potential, and feel apprehensive about reaching out to faculty and/or other university staff for help (Walton & Cohen, 2007). Not only do African American undergraduate college students experience challenges within social and academic contexts on predominantly White campuses, they also must contend with developing healthy personal identities at institutions that may be unsupportive, unsympathetic, and unwelcoming (Strayhorn, 2008). These distinct adversities add a layer of complexity to the social and psychological adjustment and academic performance of African American undergraduate college students (Brown, 2000) during a pivotal time in their identity development.

African American college students at PWIs frequently report incidents of “everyday prejudices” (Swim et al., 2003) or racial “microaggressions” (Sue et al., 2007), such as being the target of racist acts, verbal expressions of prejudice, staring, and bad customer service. African American students may also experience cultural insensitivity in social interactions with White students, faculty, and staff members (Ashburn-Nardo &

Smith, 2008; Steele & Aronson, 1995). Examples of cultural insensitivity include individuals making stereotypical comments about Black culture and people, generalizing students' opinions in class as representing those of all African Americans, and failing to acknowledge and incorporate African American perspectives into curricula (Guiffrida & Douthit, 2010). Researchers have suggested that African American college students may experience these incidents at a rate of nearly once a week (Grier-Reed, 2010; Swim et al., 2003). Due to these aforementioned reasons, it is not surprising that many African American undergraduate college students often experience their predominantly White campuses as unwelcoming (Hayes et al., 2011) and thus, underutilize campus resources such as their college counseling centers.

College counseling centers, providers of psychological services to student populations in over 1,000 four year colleges and universities in the United States, have been found to be effective for undergraduate students regardless if they are PWIs (Turner & Berry, 2000; Bishop, 2010) or historically Black colleges and universities (HCBUs; Gilbert et al., 2006). The primary function of college counseling centers continues to be the provision of direct counseling services to students whose mental health or psychosocial concerns interfere with their ability to function in the academic environment (Sharkin, 2004). The role of these centers is increasingly important in the overall mission of higher education (Resnick, 2006; Sharkin, 2004). The positive impact of psychological counseling in university-based settings has been well documented in the professional literature (Benton et al., 2003; Bishop, 2010; Turner & Berry, 2000; & Turner & Quinn, 1999). Benefits of counseling include symptom improvement (Erdur et al, 2003), academic success (Turner & Berry, 2000), and retention (Sharkin, 2004). Self-assessed

symptom improvement during brief therapy in college counseling centers can occur in as few as three sessions (Talley & Clack, 2006).

African American Students and College Counseling Centers

Although university-based counseling services are effective at relieving students' psychological distress, promoting academic functioning, and aiding campus retention efforts (Hayes et al., 2011; Minami et al., 2009; Wilson, Mason, & Ewing, 1997; Vonk & Thyer, 1999), there is evidence suggesting that utilization of college counseling centers is inconsistent across student racial/ethnic groups (Davidson et al., 2004; Hayes et al., 2011). African American undergraduate students may face barriers in their efforts to access counseling services at PWIs. These barriers and their reluctance to seek psychological counseling services on campus may be related to factors such as stigma, cultural mistrust, preference for seeking support within family and community networks, lack of visibility of counseling services and the need for targeted marketing towards African American students, and the student's existing racial identity development.

Barriers to Accessing Mental Health Services

Stigma. The stigma of mental illness can serve as a strong barrier to accessing counseling services for African Americans (Alvidrez, Snowden, & Patel, 2010). Mental health stigma is conceptualized as a set of negative attitudes and beliefs toward people with a psychological disorder, such as anxiety, depression, and/or substance dependence (Corrigan, 2004; Masuda & Latzman, 2011). The presence of mental health stigma is associated with negative help-seeking attitudes, (Leong & Zachar, 1999; Vogel, Wester, Wei, & Boysen, 2005) and a predictor of mental health service avoidance among African Americans in community-based samples (Mishra, Lucksted, Gioia, Barnett, & Banquet,

2009; Thompson, Bazile, & Akbar, 2004). African American college students tend to have greater mental health stigma and less favorable help-seeking attitudes than their White American counterparts (Twohig, et al., 2009).

In a cross-sectional study at a large, public, university located in Atlanta, Georgia, 221 African American undergraduates (n = 165; 75% female) were recruited from undergraduate psychology courses. Participants completed a web-based survey assessing mental health stigma and self-concealment, the behavioral tendency to withhold distressing and potentially embarrassing personal information from others (Masuda et al., 2012). The researchers found that both mental health stigma and self-concealment were negatively associated with favorable help-seeking attitudes. Additionally, having a previous experience of seeking professional psychological services was associated with more favorable help-seeking attitudes and mental health stigma.

Researchers have also assessed the impact of gender and socio-economic class on mental health stigma amongst African American undergraduate college students. In a research study consisting of 315 Black college students, which consisted of 119 males (37.8%) and 196 females (62.2%) from three predominantly white Midwestern universities and one Southern university, a majority of participants reported they were from a middle class background (70%) whereas 23.5% was lower class and 6.5% self-reported upper middle class status (Duncan & Johnson, 2007). Results indicated that being a woman and possessing a low socio-economic status were associated with more positive attitudes toward counseling.

While the findings related to both gender and stigma were consistent with previous research, the relationship between socio-economic class and help seeking

behaviors challenge former research results that found that higher socioeconomic levels improve the perception of counseling centers as being places where Black students could find relief for personal issues (Duncan & Johnson, 2007). Despite the findings of the aforementioned research studies, there is a dearth in the literature which examines the effect of social class on counseling utilization rates of African-American college students.

In community samples, findings about the impact of social class on stigma were mixed and inconclusive. In some studies, lower income African-Americans expressed more negative attitudes toward counseling than middle income African-Americans (Duncan & Johnson, 2007; Gloria, Hird, & Navaro, 2001). However, other studies within community samples, found that self-identified middle class African Americans may have more negative attitudes and higher stigma toward counseling than lower income African American individuals (Duncan, 2003; White, 2002). In other studies, social class was not found to be a strong predictor of stigma between African-Americans who seek counseling help and those who do not (Duncan, 2007). Overall, the interaction between race and socio-economic status have been difficult to separate when examining mental health stigma and utilization rates (Duncan, 2007). These conflicting studies highlight the importance of conducting more research on the impact of socio-economic status on stigma within the African-American community.

In regards to gender and its impact on mental health stigma, more positive attitudes toward counseling were reported by African-American women than men (Masuda et al., 2012). In spite of these findings, African-American college undergraduate women often report not seeking formal mental health services at their college counseling centers (Jones, 2009). African-American women attending

predominantly White colleges and universities may face significant stress related to their experiences on campus. Due to their double minority status, Black female college students often experience academic and social barriers resulting from a combination of racism, sexism, limited resources, few role models and mentors, loneliness, alienation, devaluation, invisibility, and sometimes despair (Smith & Wermeling, 2007). The stress of struggling to balance personal, academic, occupational, family, and community responsibilities increases African-American female students' vulnerability to physical and mental health concerns such as diminished self-esteem, depression, anxiety, psychosomatic disorders, and substance abuse (Comas-Diaz & Greene, 1994; Smith & Wermeling, 2007). Despite the aforementioned concerns, mental health stigma may impact African American undergraduate women's decision not to seek services at their college counseling centers.

African-American undergraduate college men also exhibit high rates of stigma and low rates of accessing college counseling at predominantly White institutions (Spurgeon & Myers, 2010; Williams & Justice, 2010). African-American men expressed that seeking out professional counseling services were a sign of weakness and others would consider them unmanly. In general samples of men, this mindset is quite common; however, amongst African-American men, this idea is exacerbated by race. African-American men who were interviewed believed they already had a strike against them when it came to their public image due to negative stereotypes, overt and covert discrimination, and a history of prejudices (Spurgeon & Myers, 2010). According to these men, seeking professional counseling, would only threaten their image which has

already been diminished by society. The aforementioned points underscores the role of mental health stigma amongst African American undergraduate men.

Williams and Justice (2010) assessed the attitudes regarding counseling of 212 African-American undergraduate college men at four Texas universities: two predominantly White institutions (PWIs) and two historically Black colleges and universities (HBCUs). In addition to assessing attitudes towards professional psychological counseling, the study also examined the reasons why African-American male students did not choose to seek counseling. At these institutions, African-American undergraduate men had negative attitudes toward counseling and no significant differences were found within the attitudes of African-American men attending PWIs or HBCUs. The major concerns of African-American male college students regarding counseling were mental health stigma, signs of weakness, and embarrassment. The researchers did not collect data about the socio-economic status of participants.

Cultural mistrust. In addition to the impact of socio-economic class and gender on stigma, the construct of cultural mistrust has also been explored in relation to mental health stigma. Terrell and Terrell (1981) created the construct of cultural mistrust to describe the fear, suspiciousness and distrust Blacks exhibited toward perceived White educational systems, political activities, business interactions, and social settings (Townes et al., 2009). Whaley (2001) conducted a meta-analysis on cultural mistrust and its relationship to mental health service utilization in samples of Black undergraduate college students and non-college Black community members. Findings concluded that Black people's mistrust of White people in other settings was consistent with their

mistrust of White people in counseling settings, and these findings were similar across community and college samples.

Preference for seeking support within family and community networks.

Many African-American college students may feel more comfortable accessing family and community support networks instead of utilizing formal counseling services. As previously stated, many African American undergraduate college students avoid utilizing formal psychological resources because these services may be seen as unfamiliar within the community or meant for use by “crazy people” (Thompson et al., 2004). Some African American undergraduate college students may choose not to disclose their problems or difficulties to important others as an act of honor to preserve harmony or to not burden others with their concerns (Constantine et al., 2004). Family members, close friends, and trusted community members are viewed as primary resources of assistance when many African Americans experience distress or concerns (Wallace & Constantine, 2005). These “indigenous” (e.g. familial, social, and spiritual) resources often are accessed and exhausted long before African Americans think about turning to professional counseling or psychological services to cope with mental health concerns (Constantine et al., 2004; Utsey et al., 2000).

Williams & Justice (2010) noted many African-American college men sought the advice of trusted friends, loved ones, or close family members. Help was also sought from a pastor or church member or even in social activity centers like barbershops, bars or lounges, and social/fraternal organizations. African-American undergraduate college women also primarily relied on family and the religious community during times of distress (Jones, 2009).

Lack of visibility and targeted marketing. African American undergraduate students low utilization rates of college counseling centers may also be linked to having very little knowledge of this campus resource. A lack of counseling center visibility and targeted marketing to African American students (i.e. intentional outreach and collaborative programming to student groups of color and social media presence) may also impede access to counseling services by this student group (Mosley & Dew, 2013, pending). In their interactions with mental health providers, some African American undergraduate college students will experience great trepidation about disclosing negative information out of concern that they will misrepresent the larger Black community (Wallace & Constantine, 2005). Furthermore, African American undergraduate college students' racial identity attitudes also play a large role in their psychosocial development as well as their perceptions professional psychological counseling (Watt, 2006).

Racial Identity Development. College-based counselors are increasingly aware of the dynamic interplay among racial identity development and the willingness to seek clinical services at college counseling centers. Racial identity is a multidimensional construct that implies a sense of group or collective identity based on one's perception that he or she shares a common heritage with a particular racial group which may or may not categorize themselves with physical features like skin color (Hays, Chang, & Havice, 2008; Helms, 1990).

Racial identity development for African American undergraduate college students is an important developmental task during adolescence and emerging adulthood. Greater internalization of positive racial identity attitudes is associated with improved

psychological well-being in African American undergraduate college students (Neville & Lilly, 2000; Pope, 2000; Watt, 2006; Wilson & Constantine, 1999). Better academic outcomes are linked to African American individuals who positively identify with their race (Cross, 1991; Harper & Tuckman, 2006). African Americans who strongly identify with positive qualities about Black people showed more signs of academic achievement using GPA as an indicator (Anglin & Wade, 2007; Mutisya & Ross, 2005).

However, the experience of belonging to an underrepresented group on predominantly White campuses may present challenges to college adjustment and the development of a healthy, positive African American racial identity (Ashburn-Nardo & Smith, 2008). African American college students' stage of identity development may impact their willingness to utilize professional counseling services at their college counseling centers (Whittaker & Neville, 2010). Racial identity attitudes within the early stages of identity development are linked to more psychological distress, less satisfaction with life, and a decreased sense of empowerment when it comes to accessing resources to deal with life stressors (Whittaker & Neville, 2010). Conversely, Black students in the latter stage of their racial identity development have better mental health outcomes and more likely to access resources for help (Worrell et al., 2006).

Implications for Counseling

The recommendations that emerged from this literature review underscore four important points for college counseling centers to consider in their efforts to work effectively with African American undergraduate college students attending PWIs: (a) explore clients' perceptions of their racial identity development, (b) hire African American counselors and staff members, (c) increase the visibility of counselors of color

on campus, and (d) offer clinical counseling service options that extend beyond traditional sessions at the counseling center.

Since healthy racial identity development is linked to greater psychological well-being and academic performance, it is imperative for college counselors to understand the effects of racial identity on help-seeking attitudes and potential concerns about the counseling dyad. African American students may present with a wide range of attitudes about their race, and their stage of racial identity development may affect their perceptions and experiences on campus. For example, students who are at an earlier stage of racial identity development may not recognize their experiences with bias and/or discrimination so they may not be inclined to discuss issues about race or mistreatment on campus. However, students who are at a later stage in their racial identity development may be more concerned with exploring coping strategies for race-related stress or finding resources to address prejudice and discrimination on campus.

Nearly four decades of research and psychological literature suggests that African American clients seeking counseling services generally prefer Black counselors (Atkinson, 1983; Coleman et al., 1995; Speight & Vera, 1997; Thompson et al., 2004; Townes et al., 2009; White, 1970). Ethnic dissimilarity within the therapeutic dyad has been cited as an important reason for underutilization of mental health services, premature termination, and poor treatment outcome, presumably because ethnically dissimilar counselors are less likely to understand and be responsive to the cultural values, lifestyles, and experiences of their culturally different clients' (Erdur, Rude, & Baron, 2003; Sue & Sue, 2003). However, counselors must recognize that racial identity development is quite complex, and client and counselor matching is much more nuanced

than previously believed. All counselors regardless of race should know that Black clients may enter into counseling with higher levels of cultural mistrust so intentional efforts to address the topic of race and build rapport may need to be the primary focus of counseling for at least three sessions. We also cannot assume that all Black clients want or need Black therapists, because each individual will have different life experiences. All aspects of a client's identity should be considered during client/counselor matching.

Racial identity development may also affect the counseling dyad. Depending on the students' stage of racial identity development, counselors will need to tailor their interventions and styles of engagement with clients depending on their developmental level. Clients may experience varying challenges during different stages of identity so counselors must be attuned to appropriate strategies and skills so they can effectively meet clients where they are. College counseling centers should consider including racial identity measures in their pre-screening intake packets for clients. In addition to including racial identity measures, intake paperwork should ask clients whether they would prefer a counselor who is within their racial/ethnic group. By assessing these concerns prior to entering into a counseling relationship, counselors will be able to more effectively match clients with service providers based on this initial information.

Although we have previously noted that simply matching Black clients with Black counselors is overly simplistic and presumptuous, clients should have the choice to request a Black therapist, and college counseling centers should be able to grant this request. Hiring practices of college counseling centers must be intentional and proactive in their efforts toward increasing the number of counselors of color within college counseling centers which could include strategic marketing strategies for counselors of

color in training in graduate school programs. Particular efforts must be made to lobby for sufficient resources and attention to recruit, employ, and retain African American counselors and staff in college counseling centers to serve as support and role models for African American students.

The decisions about placing African American clients with Black counselors can be challenging considering the limited availability of Black counselors in college counseling centers (Townes et al., 2009). Some African-American clients may have a strong preference for working with a Black counselor due to the influence of cultural mistrust, racial identity, and help-seeking attitudes. Not all African American clients will prefer a Black counselor. However, prospective African American clients who have elevated levels of cultural mistrust and experiences with racial discrimination and solo status in a predominantly White environment may have a strong preference for working with a Black counselor.

The visibility and physical presence of Black counselors could make professional counseling more attractive, accessible, and viable for African American students at PWIs, resulting in greater utilization of these on-campus clinical services. Disparities in the utilization of psychological services are related to the perceived lack of diversity within the staff of college counseling centers. African American students are less likely to attend counseling if they believe that a Black counselor is not accessible or available to provide them services. Although all African-American college students may not prefer a Black counselor, it is important for college counseling centers to provide these service options for clients.

Counseling centers should also offer informal support networks as opposed to formal mental health counseling outside of traditional counseling centers. Although African-American undergraduate college students face a number of psychosocial stressors at PWIs, they tend not to seek professional psychological counseling to address these concerns. Rather, they tend to heavily rely on informal networks for coping with distress and self-care. Informal support networks may represent a culture-specific, indigenous style of coping for African-American college students (Grier-Reed, 2013). One model of the informal support network is the African American Student Network (AFAM), a social networking group developed for Black undergraduate students at a large, urban, research university in the Midwest.

The purpose of AFAM is to provide a safe space for African American students to (a) explore and make meaning of their experience on campus, (b) find support and encouragement for coping with personal and academic difficulties, and (c) make meaningful connections with other Black students, faculty, and staff (Grier-Reed, 2013). The AFAM group meets weekly over the lunch hour, and attendance can include up to 30 members since the group is always open to new members. Weekly meetings typically begin with introductions and icebreakers in which group participants state their names and share a “high” moment or positive experience and a “low” moment or negative experience from the past or current week. Discussion topics for the group organically emerge from the students’ sharing, and topics can range from personal stressors to academic difficulties to sociopolitical issues. AFAM meetings are facilitated by at least one African-American counselor from the counseling center with the assistance of a Black faculty or staff member.

The group approach provides a safe and accepting place where group members can share and discuss their experiences, challenges, and triumphs while supporting their peers who may also be struggling with the same issues in potentially oppressive school atmospheres. Informal support networks facilitated by African American counselors can possibly aid in the transition and adjustment to college for African American students. Although informal support networks are different from traditional counseling groups, these networks can still be embraced by college counseling centers as viable service options for African-American undergraduate college students. The development and assessment of informal support networks as therapeutic interventions could be an effective way college counseling centers can reach out to African-American students. Given the stigma of mental health counseling in the Black community and the underutilization of college counseling services by African-American undergraduate college students, informal support networks are potentially valuable resources for this population.

Directions for Future Research

Future research is needed to explore the multi-faceted factors which contribute to the underutilization rates of African American undergraduate college students at college counseling centers. Large-scale college counseling center studies such as Benton et al. (2003) and Turner and Berry (2000) focused on students who sought psychological services from college counseling centers, yet they did not include racially specific findings. As a result, little attention has been given to understanding and conceptualizing the help-seeking process of African American undergraduate college students. This

population of students may have significant mental health needs, yet they seek counseling at lower rates than their White counterparts.

Furthermore, we know very little about African American undergraduate college students' attitudes toward seeking professional psychological counseling at their college counseling centers. This gap in the mental health literature prevents us from knowing if racial identity development and perceived racism impact whether African American college students consider receiving professional psychological services. Currently, little is known about the potential associations between help-seeking attitudes, perceived racism, African American racial identity development, and intentions to seek counseling amongst African American undergraduate college students. There is no published data addressing the aforementioned constructs within this population especially in regards to gender and socio-economic class (SES). Further research is needed to examine the relationship between these four constructs, gender, and SES, in our efforts to determine what factors influence African American undergraduate college students' willingness to present for services at college counseling centers. Further research is also needed to compare African American undergraduate college students' experiences and perceptions at Historically Black Colleges and Universities and PWIs.

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CHAPTER 2
EXAMINING THE RELATIONSHIP OF HELP-SEEKING ATTITUDES,
PERCEIVED RACISM, RACIAL IDENTITY, AND INTENTIONS TO SEEK
COUNSELING AMONG AFRICAN AMERICAN UNDERGRADUATE COLLEGE
STUDENTS ATTENDING PWIS

African American undergraduate college students experience significant developmental tasks during their matriculation at predominantly White institutions (PWIs). According to the seminal research of developmental theorist, Erik Erikson (1968), the traditional undergraduate years are a time of great personal identity crisis. The critical age period of the late teens and early twenties constitutes a distinct developmental period which is referred to as emerging adulthood (Arnett, 2000; Luyckx et al., 2010). During this time of vital identity development, young people determine the foundational goals, values, and beliefs which will be central to their identities as adults (Was & Isaacson, 2012). Emerging adults attending college must also contend with choosing an institution, setting priorities, determining academic goals, establishing interest and motivation, defining self-discipline, and responding to and persisting in the face of failure (Was & Isaacson, 2012). Although developmental theorists did not address issues of race, their findings imply that these developmental tasks are significant to identity development among undergraduate college students regardless of race and ethnicity.

In addition to grappling with normal developmental tasks, today's undergraduate students are exhibiting more extensive histories of trauma and psychological disorders

(e.g. depression, anxiety) as well as higher levels of self-injurious behaviors than students from previous generations (Serras, Saules, Cranford, & Eisenberg, 2010). Undergraduate students' presenting concerns at college counseling centers range from normal developmental issues, such as interpersonal relationships (Gibbons & Shurts, 2010), and academic concerns (Lee et al., 2009), to those more related to stress (Chiauzzi et al., 2008), anxiety and depression (McCarthy et al., 2006), suicidal ideation (Paladino & Minton, 2008), being victims of sexual assault (Kress et al., 2003), substance abuse issues (Arria et al., 2009), and disordered eating (Huebner et al., 2006). Since the age of onset for many psychiatric disorders occur during traditional college-age years, many undergraduate college students have their first concerns with mental health issues during this time period (Sharkin & Coulter, 2005).

For many students, attending college is a significant period of adjustment and adaptation that requires navigation of unique academic, social, and psychological challenges. In addition to the hardships that *all* college students may anticipate (e.g., adjusting to living away from home, time management, challenging coursework, making friends), African American students may experience racial discrimination, isolation, and other race-related stressors that affect their academic performance and overall satisfaction on campus (Ashburn-Nardo & Smith, 2008). African American undergraduate college students at PWIs frequently report incidents of "everyday prejudices" (Swim et al., 2003) or racial "microaggressions" (Sue et al., 2007), such as being the target of racist acts, experiencing verbal expressions of prejudice, and experiencing cultural insensitivity in social interactions with mostly White students, faculty, and staff members (Ashburn-

Nardo & Smith, 2008; Steele & Aronson, 1995). In lieu of the unique experiences and difficulties experienced by African American undergraduate college students at PWIs, college counseling centers may be positioned to provide safe, supportive spaces for these students.

College counseling centers, while providing psychological services to student populations in over 1,000 four year colleges and universities in the United States (Resnick, 2006; Sharkin, 2004) have become increasingly important on-campus resources. These types of clinical services typically include assessment, individual, couples, and group counseling, crisis intervention and trauma response, psychoeducational outreach programs and consultation to campus and community members (Resnick, 2006). Results found in the counseling literature have stated that undergraduate college students benefit from receiving individual and group counseling services (LaChance et al., 2009). Benefits of counseling include symptom improvement (Erdur et al, 2003), academic achievement (Turner & Berry, 2000), and retention (Benton et al., 2003). Researchers reveal that self-assessed symptom improvement during brief therapy in college counseling centers can occur in as few as three sessions (Talley & Clack, 2006). However, providing holistic, culturally appropriate psychological services to meet the growing needs of an ever-changing and diverse student population is a major challenge facing college counseling centers across the country (Bishop et al., 2004; Kitzrow, 2003; Orchowski, et al., 2011).

Compared to White undergraduate students, African Americans have traditionally demonstrated lower rates of seeking and accessing mental health counseling services at

their college counseling centers (Cellucci, Krogh, & Vik, 2006; Hayes et al., 2011; Jorm, 2000; Rudd, 2004; So, 2005). Although attitudes toward seeking psychological help have been examined generally, relatively little is known about African American undergraduate college students' help-seeking experiences. In the following sections, African American undergraduate college students' help-seeking attitudes, perceived racism, and racial identity development will be examined in order to gain a better understanding of their perceptions of receiving psychological services.

Help-Seeking Attitudes

Help-seeking attitudes are defined as the tendencies to seek or resist professional psychological services during crises or after prolonged psychological difficulties (Fisher & Farina, 1995; Fischer & Turner, 1970). Although African American undergraduate college students are found to be just as distressed as students from other racial and ethnic backgrounds (Ayalon & Young, 2009), they are less likely to utilize mental health services from professional psychological counseling sources (Kearney, Draper, & Baron, 2005; Masuda et al., 2009). In general, evidence suggests that African Americans prefer to receive counsel for mental health concerns from non-psychological professionals like family members, friends, and clergy (Ayalon & Young, 2005). Previous studies have documented that professional psychological services can also be beneficial for this group (Aymer, 2010; Woods-Giscombe & Black, 2010), yet several factors such as stigma, cultural mistrust, self-concealment, and socio-demographic concerns (i.e. gender and socio-economic class) have been found to influence help-seeking attitudes.

Existing literature notes that stigma is a major barrier in seeking professional psychological services among African American individuals (Corrigan, 2004; Masuda & Latzman, 2011; Townes et al, 2009). Mental health stigma among African Americans, which is considered higher than among Whites, is mostly associated with negative help-seeking attitudes (Leong & Zachar, 1999; Vogel et al., 2005). More specifically, evidence suggests that mental health stigma can predict the use of mental health services among African Americans (Mishra et al., 2009; Thompson et al., 2004).

Since African Americans, compared to Whites, are less likely to exhibit positive help seeking attitudes and behaviors, they often present to counseling under different pretenses. African American clients are more likely to receive psychological treatment under emergency and/or mandated situations rather than under voluntary, self-referred conditions (Hu et al., 1991; Takeuchi & Cheung, 1998; Townes et al, 2009). Once engaged in counseling, some African American clients may view White counselors as extensions of a racially biased system with solutions that may ignore the client's cultural values. African American undergraduates may also perceive the counseling process itself as an instrument of oppression (Sue & Sue, 2003). Research also purports that racial biases and stereotypes harbored by White counselors may account for mental health care disparities found between African American and White clients (Townes et al., 2009; Whaley, 1998).

Previous research findings also suggest that mistrust of White counselors and the counseling profession has contributed to African American clients' underutilization of counseling services, misdiagnoses, lowered expectations, and attrition (Austin et al.,

1990; Townes et al., 2009; Watkins & Terrell, 1988). Terrell and Terrell (1981) developed the construct of *cultural mistrust* to describe the theoretical level of suspiciousness and distrust African Americans exhibited towards educational systems, political activities, business interactions, and interpersonal situations with White individuals. Although the construct of cultural mistrust is over thirty years old, recent research substantiates its claims. In a meta-analysis of 22 empirical studies on cultural mistrust in African Americans, researchers found that African American individuals who had high levels of cultural mistrust were more likely to view White clinicians as representatives of the dominant, oppressive culture (Bullock-Yowell et al., 2011; Whaley, 2001a). Studies also show that high levels of cultural mistrust have been linked to negative attitudes toward counseling especially if the counseling center is perceived as only being staffed by White therapists (Duncan, 2003; Duncan & Johnson, 2007; Nickerson et. al., 1994, Whaley, 2001).

Another factor that has been connected to lower help-seeking attitudes among African Americans is self-concealment (Cramer, 1999; Masuda et al., 2009). This construct is defined as a behavioral tendency to withhold distressing and potentially humiliating personal information from others (Masuda et al., 2012). Self-concealment reflects the process of feeling apprehensive about the self-disclosure of a troubling and negatively evaluated secret, and it is a primary reason for lowered service utilization by African-Americans. Masuda et al. (2012) examined help-seeking attitudes, mental health stigma, and self-concealment among 221 African American undergraduate college students. The findings of the study revealed that both mental health stigma and self-

concealment were negatively associated with positive help-seeking attitudes especially when the counselor was not of the same race. However, despite the reluctance of some African American undergraduate college students to utilize the counseling center, many African American students have expressed a need to seek professional help for their emotional, psychological, environmental, and vocational concerns (Duncan, 2007; Jones, 1991).

Another factor that has been connected to less positive help-seeking attitudes is the construct of cultural mistrust. The term cultural mistrust describes the level of suspiciousness and distrust Black people exhibit toward perceived White educational systems, political activities, business settings, and social interactions (Terrell & Terrell, 1981; Townes et al., 2009). Studies suggest that the mistrust of White counselors, regardless of community or college settings, has contributed to Black clients' underutilization of counseling services (Townes et al., 2009; Whaley, 2001)

In addition to cultural mistrust, socio-demographic factors like socio-economic class, age, and gender also affect help-seeking attitudes. Duncan and Johnson (2007) examined help-seeking behaviors, African self-consciousness, cultural mistrust, and socioeconomic status (SES) and their relationships to attitudes toward counseling and counselor preference among 315 African American undergraduate college students. Researchers found that cultural mistrust and SES were statistically significant predictors of participants' attitudes toward counseling. African American undergraduate college students with high cultural attitudes from lower SES backgrounds were more likely to prefer a Black counselor (canonical correlation of 0.997). However, regardless of SES,

African Americans with high levels of cultural mistrust reported that they were less willing to self-disclose personal problems to White counselors. The study also noted that African American undergraduate college students were less likely than White clients to find professional counseling efficacious, and African Americans were more likely to seek support for psychological difficulties from family members, community leaders, or spiritual leaders.

Furthermore, gender and age also played a role in help-seeking attitudes. African-American women indicated more positive help-seeking attitudes than did African American men. It is also important to note that these gender differences are consistent with the results of many prior studies examining the impact of gender on help-seeking attitudes across ethnic and racial groups (e.g., Lopez et al., 1998, Lucas, 2002; Luedders, 1998; Tedeschi & Willis, 1993; Wallace & Constantine, 2005). Additionally, older African-American undergraduate students or those who had previously sought professional mental health services tended to have more favorable help-seeking attitudes than did the younger students or those without any such help-seeking experiences. In sum, previous studies suggest that a number of variables could affect help-seeking behaviors among African American undergraduate college students. Since the help-seeking process is quite complex, understanding the roles of perceived racism and racial identity development is theoretically and empirically important as a precursor to understanding help seeking attitudes and behaviors among African American undergraduate college students.

Perceived Racism

Racism has been defined as a system of racial superiority followed by discriminatory and prejudicial behaviors in three primary domains: individual, institutional, and cultural (Jones, 1972, 1997; Neville & Pieterse, 2009). Thus, African Americans who perceive they have been exposed to racism and/or racial discrimination can experience this phenomenon as stressful which can lead to psychological distress. An emerging body of research has documented the negative physiological, psychological, and emotional symptoms related to perceived racism for African Americans (Williams et al., 2003), including undergraduate college students (Bynum et al., 2007; Pascoe et al., 2009).

Empirical evidence has posited that perceived racism is a chronic stressor that has negative effects on African American physiological health (Brondolo et al., 2008; Paradies, 2006; Williams & Mohammed, 2008), including lowered birth weight among women (Giscombe & Lobel, 2005; Parker-Dominguez, et al., 2008), coronary artery calcification (Lewis et al., 2006), hypertension (Peters, 2004; Peters, 2006; Peters et al., 2007) and breast cancer (Taylor et al., 2007). Another way that perceived racism impacts African Americans' health is by increasing modes of "escapism and coping" via problematic tobacco and alcohol consumption (Caetano et al., 1998; Guthrie et al., 2002; Landrine & Klonoff, 2000; Kwate et al., 2010).

Researchers have consistently found that extended exposure to perceived instances of racism increase maladaptive psychological symptoms over and above general life stress (Klonoff et al., 1999; Pieterse & Carter, 2007; Sanders-Thompson, 2002). Harrell (2000) identified *racism-related stress* as the outcome of "transactions

between individuals or groups and their environment that emerge from the dynamics of racism, and that are perceived to tax or exceed existing resources or threaten well-being” (p.44). A growing body of evidence supports the link between racism and psychological disorders among non-adult and traditional college aged African Americans (Pieterse et al., 2012; Pieterse & Carter, 2007). Simons et al., (2002) noted that African American children and adolescents who directly experienced discrimination reported increased depressive symptoms and lower self-esteem (Greer & Chwalisz, 2007). According to research based on African American female college students, exposure to racism was directly related to depressive symptoms, and surprisingly, even positive racial identity did not mitigate these effects (Jones, 2009).

In a study examining archival data collected during three consecutive semesters at 12 college counseling centers, Chao et al. (2012) surveyed 1670 African American undergraduate college clients about their presenting concerns and perceived racial discrimination. The findings suggest that perceived racial discrimination distress is associated with a host of interpersonal and intrapersonal concerns common among general college students, including difficulties making friends, relationships with peers, and concerns about dating. Physical health concerns and sleep problems were also connected with perceived racial/ethnic discrimination distress. The results also implied that perceived racism is related to self-perception issues such as self-esteem, perfectionism, concerns about body image, and disordered eating.

However, an important aspect of the perceived racism construct is the extent to which the individual perceives a situation to be racist. In order for an individual to deem

an encounter or statement as racist, one must believe that race is a salient, important aspect of his or her identity (Franklin, 1999). Research suggests that racial identity development can have a profound influence on numerous aspects of psychological functioning and may also serve as a buffer to experiences of racism (Bynum et al., 2007).

Racial Identity

Racial identity indicates a sense of group or collective identity based on one's perception that he or she shares a common heritage with a particular racial group which may or may not categorize themselves with physical features like skin color (Helms, 1990). Empirical findings indicate that racial identity is related to a wide range of psychological variables (Carter, 1995), including perceptions of racial bias (Sellers & Shelton, 2003) and adaptive psychological well-being (Carter, 2007 & Franklin-Jackson). African American racial identity refers to the process by which an individual of African descent acquires an understanding of his or her racial self-concept in a race based society (Whittaker & Neville, 2010).

Helms' definition of racial identity is useful because it describes racial identity as being based on both a group identity and individual experiences and perceptions. This definition indicates that racial identity varies in meaning and importance for each individual. The construct of racial identity has been explored in relation to career decision-making self-efficacy (Bullock-Yowell et al., 2011), disordered eating (Watson et al., 2013), and interpersonal difficulties (Chao et al., 2012). The evidence suggests that racial identity is an important construct associated with both perceptions of racism and psychological functioning. However, despite the vast literature on racial identity

development, currently, there exists no published study examining the relationships between perceived racism, racial identity development, and help-seeking behaviors of African American undergraduate college students at PWIs.

Racial identity theory provides a critical framework in which to understand the psychological processes of African American college students attending PWIs. African American students' perceptions of discrimination or racism as stressors are directly related to Black racial identity (Carter, Helms, & Juby 2004; Sellers & Shelton, 2003). The Black racial identity model is described as a set of different worldviews or "ego statuses" that serve as a filter for race-based information and experiences (Helms, 1995; Thompson & Carter, 1997). How a Black person identifies with his or her race may influence their perception of race-related events (Hall & Carter, 2006). There are several racial identity development models, yet they are heavily influenced by Cross's foundational racial identity research on African Americans.

Cross (1971, 1995) developed one of the first and most prevalent models of influential racial identity theory, the Nigrescence Model of African American Identity, which is now referred to as the Cross Racial Identity Scale (CRIS). Since Cross's seminal model of racial identity development laid the groundwork for racial identity theories, the scale heavily influenced the development of stage models such as the Helms White Racial Identity Model (Miville & Helms, 1996), Biracial Identity Model (Poston, 1990), and the Racial/Cultural Identity Development Model (R/CID; Sue & Sue, 2003). Most of the aforementioned stage models describe growth and development in a linearly, stepwise progression with the exception of the R/CID model which uses non-linear stages

to describe racial and ethnic identity as a process that occurs over a course of a lifetime. Despite their differences, the racial identity models discussed note that an activating event causes individuals to experience great consternation and exploration in their racial identity. The culmination of each stage model is identity integration which signifies healthy identity development.

In this current study African American undergraduate college students' underutilization of formal counseling services at predominantly White institutions (PWIs) will be examined. The relationships between help-seeking attitudes, levels of perceived racism, and stages of racial identity development will also be assessed. Understanding these relationships is critical to the counseling profession as clients' help-seeking behaviors and racial identity may have direct implications on the possible course of counseling as well as the selection of the mental health provider. Thus, in this study, the following three research questions will be examined:

(R1) What is the relationship among help-seeking attitudes, perceived racism, racial identity development, and intentions to seek counseling among African American undergraduate college students?

(H1) Help-seeking attitudes and perceived racism will be significantly related to the intentions to seek counseling.

(H2) Perceived racism and racial identity development will be related to help-seeking attitudes and intentions to seek counseling.

(R2) How are African American undergraduate college students' intentions to seek counseling related to select demographic variables such as gender, institution type, and parent/family socio-economic status?

(H3) Gender will be related to students' intentions to seek counseling, in that female participants will be more likely to seek counseling.

(H4) Students who attend public universities are not more likely than students at private colleges to report higher or lower intentions to seek

counseling. Institution type will not be related to students' intentions to seek counseling.

(H5) Socio-economic status will have a positive relationship with intentions to seek counseling, in that participants with higher socio-economic status will be more inclined to seek counseling.

(R3) Among demographic variables (e.g. gender, SES, and institution type), help-seeking attitudes, perceived racism, and racial identity development what is the primary predictor of intentions to seek counseling among African American undergraduate college students?

(H6) Help-seeking attitudes will be the primary predictor of intentions to seek counseling followed by gender, socio-economic status, and perceived racism.

Methods

Self-identified African-American undergraduate college students attending predominantly White institutions in 17 different states in the U.S. were included in this study. Data was collected during the fall semester of 2013. A convenience sample of online sites was selected from a pool of the most popular social media websites (i.e. Facebook, Instagram, and Twitter) in which the researcher already held online memberships. Web-based advertisements were posted to blogs and forums catering to African-American college students, such as the forums at blog.breaking-it-down.com and blog.theivyblackademic.com, as well as communities on Facebook.com, instagram.com, twitter.com, and the Cesnet professional counseling list serv. The online advertisements included a link to the survey.

Inclusionary criteria included the following: 1) be at least 18 years of age; 2) self-identify as Black or African-American; 3) enrolled currently as an undergraduate at a 4 year college or university; 4) and reside currently in the U.S. All forum rules regarding

posting were followed. Advertisements included the study's purpose, inclusionary criteria, and a direct link to the survey instruments. To compensate participants for their time, ten \$20 Amazon.com gift cards were purchased and raffled off to randomly chosen participants. At the beginning of the survey, on the consent page which was the first page of the survey, participants were informed about the gift card raffle. They were directed to email the researcher expressing their interest to be included in the drawing for gift cards, and they were instructed to give their preferred contact information. Once the study was closed, a drawing was held by randomly selecting ten email addresses, and they were contacted in regards to the gift cards shipment. Advertisements for the study noted that participation in the study was not required to be entered into the drawing. Seventeen participants responded to the researcher, and they were entered into the drawing.

Participants

Of the 258 participants who started the survey, 24 were excluded for being over 25 years of age and 8 were excluded for self-identifying as White or Asian. Further, 40 surveys were excluded for non-completion. Of the remaining 186 useable surveys, 111 (59.7%) identified as female and 75 (40.3%) identified as male. The nearly 60/40 ratio of females to males approximately reflects the demographics of the gender-ratio on college campuses across the U.S. The sample includes participants from public and private institutions across the United States. A summary of the sample's sociodemographics is included in Table 1.

Table 1.

Sample Sociodemographics

	<i>N</i>	<i>frequency</i>
Gender		
Male	75	40.3 %
Female	111	59.7 %
Average Family Income		
\$0-39,000	64	34.4 %
\$40,000-79,000	68	36.6 %
\$80,000 and above	54	29.0 %
Sexual Orientation		
Heterosexual	160	86.0 %
Lesbian/Gay	18	9.7 %
Bisexual	5	2.7 %
Other	3	1.6 %
Institution Type		
Public	112	60.2 %
Private	74	39.8 %
Received Counseling Services		
Yes	29	15.6%
No	157	84.4%

The majority of the sample (60.2%) reported attending a public institution. Participants reported a wide range of familial income levels. Of the sample, 64 (34.4%) participants reported their average parent/family income as \$39,000/year or less, 68 (36.6%) reported a parent/family income between \$40,000 and \$79,000, and 54 (29.0%) reported a parent/family income over \$80,000. The majority of the sample identified as heterosexual 160 (86.0%), 18 (9.7%) identified as lesbian/gay, 5 (2.7%) identified as bisexual, and 3 (1.6%) identified as other sexual orientations (such as pansexual, asexual, etc.). The majority of the sample reported they had never received counseling services 147 (84.4%). Finally, of the sample, 125 (67.2%) participants were identified as having an Internalization Multicultural Inclusive racial identity profile, 36 (19.4%) participants were identified as having a Pre-Encounter Assimilation, Pre-Encounter Miseducation, or Pre-Encounter Self-Hatred racial identity profile, and 25 (13.4%) participants were identified as having an Immersion-Emmersion Anti-White or Internalization Afrocentricity typology. A summary of the sample's racial identity groupings and descriptive statistics is included in Table 2.

Table 2.

Racial Identity Groups and Descriptive Statistics

	Group 1* (<i>n</i> = 36)	Group 2** (<i>n</i> = 25)	Group 3*** (<i>n</i> = 125)
Attitudes Towards Seeking Professional Psychological Help Scale			
Mean (SD)	22.25 (7.44)	18.76 (6.11)	25.06 (6.20)
Variance	55.39	37.36	38.46
Range	26	26	26
Intentions to Seek Counseling Inventory			
Mean (SD)	33.94 (9.92)	28.04 (9.45)	34.41 (8.79)
Variance	98.45	89.29	77.32
Range	36	39	40
Perceived Racism Scale			
Mean (SD)	78.97 (40.27)	11.64 (30.42)	79.36 (31.03)
Variance	1621.97	925.40	962.88
Range	149	148	134

*Group 1 (Pre-Encounter Assimilation, Pre-Encounter Miseducation, Pre-Encounter Self-Hatred)

**Group 2 (Immersion-Emmersion Anti-White; Internalization Afrocentricity)

***Group 3 (Internalization Multicultural Inclusive)

Measures

Participants completed a brief demographics questionnaire, which included standard demographic questions, such as race, gender, age, year in college, and parent/family socio-economic status, college-related information, and previous counseling experience. The next three components of the survey included the Attitudes Towards Seeking Professional Psychological Help Scale (ATSPPHS) Short Form (Fischer & Farina, 1995), Intentions to Seek Counseling Instrument (ISCI; Cash et. al., 1975; Kelly & Acher, 1995), the Perceived Racism Scale (PRS; McNeilly et al., 1996), and the Cross Racial Identity Scale (CRIS; Cross & Vandiver, 2001). The entire assessment is included in Appendix B.

Attitudes Towards Seeking Professional Psychological Help Scale (ATSPPHS) Short Form

The ATSPPHS Short Form (Fischer & Farina, 1995) is a 10-item inventory that assesses attitudes toward seeking help for psychological concerns. Likert scale items are rated from 1 (disagree) to 4 (agree), and five of the 10 items are reverse scored so that higher scores reflect more positive attitudes towards seeking professional psychological help. A single total score ranging from 10 – 25 points are considered to reflect more positive attitudes towards counseling whereas scores ranging from 26 – 40 reflect more negative attitudes.

Items on the scale include statements such as “The idea of talking about problems with a counselor strikes me as a poor way to get rid of emotional conflicts” and “I would want to get psychological help if I were worried or upset for a long period of time.” The

Short Form has evidence of construct validity. The abbreviated scale has a correlation of .89 with the original 29-item Long Form. The ATSPPHS has been among the most widely used and researched assessments used to measure help-seeking attitudes among people of color (Delphin & Rollock, 1995; Yeh, 2002). In a study of college students, test-retest reliability after approximately 4 weeks was .80 for the Short Form (Fischer & Farina, 1995; Townes et al., 2009).

Intentions to Seek Counseling Inventory (ISCI)

The ISCI is a 17-item, 4-point Likert-type instrument used by researchers to assess college students' intentions to seek professional counseling in the future (Cash et al., 1975; Kelly & Acher, 1995). The inventory is composed of a list of issues that college students commonly bring to counseling. Participants are asked to rate how likely they would be to seek counseling if they were experiencing the issue listed, rating from 1 (very unlikely) to 4 (very likely). Some of the issues presented include relationship difficulties, depression, personal concerns, and substance-use related problems. Higher scores on the assessment reflect a greater likelihood of seeking counseling for various psychological concerns.

Total scores on the inventory, ranging from 17- 42, indicate that the participant is less likely to seek professional counseling services whereas scores ranging from 43- 68 indicate that the participant is more likely to seek services (Hobson, 2008). Three subscales exist within the ISCI that include Interpersonal Problems (10 items), Academic Problems (4 items), and Drug/Alcohol Problems (2 items). The ISCI has the necessary internal consistency for each of the three subscales measuring .90 for Interpersonal

Problems, .71 for Academic Problems, and .86 for Drug/Alcohol Problems. However, scores can be totaled to reflect intentions to seek counseling for each subscale or an overall score on willingness to seek out services when needed can be tallied Cepeda-Benito & Short, 1998). Generally, internal consistency reliability coefficients for the ISCI have ranged from .84 to .95 (e.g., Kelly & Acher, 1995).

Perceived Racism Scale (PRS)

The PRS is a 51-item, 5-point Likert instrument which asks participants about the frequency of perceived racism (wherein 0 indicates not applicable and 5 indicates several times a day) in various domains and how often they were exposed to racist statements over the past year and over their lifetime (McNeilly et al., 1996). The PRS measures the perceived frequency of exposure to racism, yielding four subscales: on the job (e.g., “I am often ignored or not taken seriously by my boss, because I’m Black.”), in academic settings (“Teachers and students assume I’m less intelligent, because of my race.”), in the public realm (“I have been followed, stopped, or arrested by White police more than others because of my race.”), and racist statements from Whites (“Most Blacks are on welfare, because they are too lazy to get a job.”).

Not only are perceptions of racism assessed, but coping skills and emotional responses are evaluated as well which provides a more holistic psychometric tool when exploring perceived racism (Holman, 2011). The PRS is arranged into three main sections. The first section involves four main domains in which perceived racism can occur: within the work setting, academic environment, public realm, and through racist statements. The second component of the PRS provides participants the opportunity to

disclose their emotional response on a five-point Likert scale (1 = not at all; 5 = extremely) when they encountered a racist experience. The final portion of the assessment allows to participants to indicate which coping strategy they employed when encountering racism.

The PRS has demonstrated reliability, as evidenced by Cronbach's alpha levels of .93, .95, and .91 on each of its subscales respectively. The measure also demonstrates internal consistency levels between .87-.95 (Combs et al., 2006; Utsey, 1998). Since this study will focus on full-time college students, the academic and public domain subscales will be the only section utilized from the measure. PRS scores can range from 0 to 215, with higher PRS scores reflective of more frequent perceptions of exposures to racism.

Cross Racial Identity Scale (CRIS)

The CRIS is a 40-item inventory designed to measure six racial identity attitudes (Cross & Vandiver, 2001). The instrument is a 7 point Likert scale (wherein 1= strongly disagree and 7= strongly agree) which has been used to assess undergraduate college student levels of racial identity development. There are the following six subscales for the CRIS: (a) Pre-encounter Assimilation (PA) –individuals in this stage place a great deal of value on being American rather than being a member of a particular racial group; (b) Pre-encounter Miseducation (PM) –people in this phase personalize stereotypes and other negative information regarding Black individuals; (c) Pre-encounter Self-Hatred (PSH) –in this period individuals are strongly dislike personal traits that are characteristic of their Black race; (d) Immersion-Emersion Anti-White (IEAW) –during this stage individuals exhibit an intense hatred towards Whites; (e) Internalization Afrocentricity

(IA) –in this interval there is a pronounced appreciation for Afrocentric values and characteristics; and (f) And Internalization Multiculturalist Inclusive (IMCI). In this final phase, individuals embrace an identity with intersecting identities that are comprised of three or more social groups (Cokley & Helm, 2007; Vandiver et al., 2000).

Considering the CRIS includes 10 filler questions, 30 of the 40 items comprise the six subscales which are composed of five items each. As a result, the CRIS produces six separate subscale scores which cannot be summed for interpretation (Vandiver et al., 2001). Instead, a profile is generated which reflects the participants' strength of agreement with each of the racial identity subscales. Individuals' racial identity profiles are determined by the highest score on one of the six subscales.

The CRIS has been used with African American undergraduate students. Previous studies used two sets of samples to validate the psychometric properties of the CRIS. The first sample consisted of 296 African American students attending a PWI, and the second sample consisted of 336 African American students attending a different PWI. The CRIS illustrated very good internal consistency. Cronbach alpha's for each subscale were: PA (.83), PM (.78), PSH (.88), IEAW (.90), IA (.82), and IMCI (.86). Reliability estimates for each subscale were: PA (.85), PM (.78), PSH (.89), IEAW (.89), IA (.83), and IMCI (.82). In the studies of college students, internal reliability ranged from .78 to .90 (Vandiver et al. (2002).

Results

To address research question 1, a series of correlations and Kruskal-Wallis One Way Analyses of Variance by Ranks were conducted. Pearson correlations were

conducted to assess the relationship between help-seeking attitudes total scores, perceived racism total scores, and intentions to seek counseling total scores. The results show significant negative relationships between perceived racism and help-seeking attitudes ($r(186) = -0.44, p < .001$), and between perceived racism and intentions to seek counseling ($r(186) = -0.39, p < .001$), and a significant positive relationship between help-seeking attitudes and intentions to seek counseling ($r(186) = .65 < .001$). These results indicate that students experience less positive help-seeking attitudes and are less inclined to seek professional counseling services when they experience a higher frequency of racism. Further, the results indicate that students who have more positive help-seeking attitudes are more likely to seek counseling services. These findings support Hypothesis 1. The details of this correlation are summarized in Table 3.

Table 3.

Summary of Correlations between Help-Seeking Attitudes, Perceived Racism, and Intentions to Seek Counseling

	1	2	3
1. Help Seeking Attitudes	---	-.44***	.65***
2. Perceived Racism	-.44***	---	-.39***
3. Intentions to Seek Counseling	.65***	-.39***	---

Note. $N = 186$. *** $p < .001$.

To address racial identity in research question 1, a non-parametric Kruskal-Wallis One Way Analysis of Variance by Ranks was conducted because the data was not evenly distributed across racial identity typologies. Kruskal-Wallis does not assume a normal distribution of data. Since the Cross Racial Identity Scale produced six different identity typologies, these typologies were collapsed into three groupings for analysis: Group 1 (Pre-Education Assimilation, Pre-Education Miseducation, and Pre-Education Self-Hatred, $n = 36$); Group 2 (Immersion-Emmersion Anti-White and Internalized Afrocentricity, $n = 25$); and Group 3 (Internalized Multicultural Inclusive, $n = 125$).

Results of the first Kruskal-Wallis One-way Analysis of Variance by Ranks indicated there was a statistically significant relationship measured by mean rank differences among the three racial identity groups in their help-seeking attitudes ($H = 19.440, p < .000$). A post-hoc analysis of the differences between racial identity groups using the multiple comparison technique described by Siegel and Castellan (1988) indicated no significant differences between mean ranks for Group 1 (Mean Rank = 82.93) and Group 2 (Mean Rank = 54.72) at the .05 level. There was a statistical difference between mean ranks for Group 2 (Mean Rank = 54.72) versus Group 3 (104.30) at the .05 level, and there was also a significant difference between mean ranks for Group 1 (Mean Rank = 82.93) versus Group 3 (104.30) at the .05 level. Group 3 had the highest mean rank (104.30), Group 1 had the second highest mean rank (82.93), and Group 2 had the lowest mean rank (54.72), indicating that students in Group 3 (Internalized Multicultural Inclusive) had the most positive help-seeking attitudes.

Kruskal-Wallis results also indicated there was a statistically significant relationship measured by mean rank differences among the three racial identity groups and perceived racism ($H = 17.914, p < .000$). A post-hoc analysis of the differences between racial identity groups indicated significant differences between mean ranks for Group 1 (Mean Rank = 85.67) and Group 2 (Mean Rank = 135.86) at the .05 level. There was a statistical difference between mean ranks for Group 2 (Mean Rank = 135.86) versus Group 3 (87.28) at the .05 level, but there was no significant difference between mean ranks for Group 1 (Mean Rank = 85.67) versus Group 3 (87.28) at the .05 level. Group 2 had the highest mean rank (135.86), Group 3 had the second highest mean rank (87.28), and Group 1 had the lowest mean rank (85.67), indicating that students in Group 2 (Immersion-Emmersion Anti-White and Internalized Afrocentricity) reported experiencing the most perceived racism.

Results of the final Kruskal-Wallis One-way Analysis of Variance by Ranks indicated there was a statistically significant relationship measured by mean rank differences among the three racial identity groups in their intentions to seek counseling ($H = 13.463, p < .001$). A post-hoc analysis of the differences between racial identity groups indicated significant statistical differences between mean ranks for Group 1 (Mean Rank = 96.14) and Group 2 (Mean Rank = 57.02) at the .05 level. There was also a statistical difference between mean ranks for Group 2 (Mean Rank = 57.02) versus Group 3 (100.04) at the .05 level, but there was no significant difference between mean ranks for Group 1 (Mean Rank = 96.14) versus Group 3 (100.04) at the .05 level. Group 3 had the highest mean rank (100.04), Group 1 had the second highest mean rank (96.14),

and Group 2 had the lowest mean rank (57.02), indicating that students in Group 3 (Internalized Multicultural Inclusive) were most likely to seek professional counseling. The results of the Kruskal-Wallis analyses support Hypotheses 2.

To examine how intentions to seek counseling are affected by socio-demographic variables (R2), several statistical analyses were conducted. First, an independent samples t-test was conducted to compare intentions to seek counseling total scores between males and females. There was a significant difference in the scores for males ($M = 29.67$, $SD = 9.127$) and females ($M = 36.03$, $SD = 8.558$); $t(184) = -4.84$, $p = .000$. These results suggest that women are more likely than men to seek counseling. These findings support Hypothesis 3. A second independent samples t-test was conducted to compare intentions to seek counseling total scores between students attending public and private institutions. There was a significant difference in the scores for students attending public institutions ($M = 35.14$, $SD = 9.432$) and students attending private institutions ($M = 30.92$, $SD = 8.570$); $t(184) = 3.098$, $p = .002$. These results suggest that students who attend public institutions are more likely than students at private colleges/universities to seek professional counseling services. These findings do not support Hypothesis 4.

Finally, a one-way between subjects ANOVA was conducted to compare the effect of parent/family socio-economic status on intentions to seek counseling in incomes between \$0-39,000, family incomes between \$40,000-79,000, and incomes \$80,000 and above. There was not a significant effect of socio-economic status on intentions to seek counseling at the $p < 0.05$ level for the three conditions, $F(2, 183) = 1.341$, $p = 0.264$. Overall, these results suggest that parent/family socio-economic status within this sample

is not related to students' willingness to seek counseling. These findings do not support Hypothesis 5.

Finally, to test the predictability of demographic variables, help-seeking attitudes, perceived racism, and racial identity development on intentions to seek counseling (R3), a two-step hierarchical multiple regression analysis was conducted. In Step 1, predictor variables were gender, parent/family socio-economic status, institution type, perceived racism, and racial identity. According to Hypothesis 6, the help-seeking attitudes variable is assumed to have the most predictive impact on intentions to seek counseling.

In Step 2, the variable of interest, help-seeking attitudes was entered as a predictor variable in addition to the variables listed in step 1.

In the first model which corresponds with step 1 ($R = 0.466$, $R^2 = 0.217$, $F(5,180) = 9.975$, $p < .001$), Beta coefficients for the two predictors were gender, $\beta = 0.258$, $t = 3.681$, $p < .001$, and perceived racism, $\beta = -0.274$, $t = -3.543$, $p < .001$. However in step 2, the addition of the help-seeking attitudes variable, $\beta = 0.615$, $t = 8.715$, $p < .001$, significantly improved prediction (R^2 change = 0.233, $F = 24.431$, $p = .000$). These statistically significant findings indicate that there was a 23.3% increase in the predictive capacity of the model unit when the help-seeking attitudes variable is added to the model in step 2 (Table 4). Based on the regression analyses, help-seeking attitudes are the most unique, incremental predictor of the dependent variable, intentions to seek counseling. Gender and perceived racism are significant predictors of the dependent variable until help-seeking attitudes are added to the model unit which implies that help-seeking attitudes are mediating all of the other relationships between the independent variables

and the dependent variable (Table 4). To ensure the results were reliable, the researcher performed a second hierarchical multiple regression by reversing the order of operations of the regression using the same data which means that help-seeking attitudes were entered as step 1 and the other independent variables of interest were added during step 2. This second hierarchical multiple regression yielded the same results as the first regression. Results of the regression analysis provided partial confirmation for Hypothesis 6.

Table 4

Summary of Hierarchical Multiple Regression Analysis for Variables Predicting Intentions to Seek Counseling

Step and Variable	β	t	R^2	F	p
Step 1					
Gender	.258	3.680	.217	9.975	.000**
Parent/Family SES	.036	0.502	---	---	.616
Institution Type	-.124	-1.646	---	---	.101
Perceived Racism	-.274	-3.543	---	---	.001**
Racial Identity	.023	0.335	---	---	.738
Step 2					
Gender	-.002	-0.024	---	---	.981
Parent/Family SES	-.004	-0.072	---	---	.943
Institution Type	-.090	-1.419	---	---	.158
Perceived Racism	-.073	-1.059	---	---	.291
Racial Identity	-.066	-1.150	---	---	.252
Help Seeking Attitudes	.615	8.715	.233	24.431	.000**

Note: * $p < .05$. ** $p < .001$.

Discussion

These findings are significant to mental health professionals working with African-American undergraduate college students at PWIs. Knowing the reasons why African-American students are not accessing professional counseling services at college counseling centers has direct implications for how culturally appropriate services for this population are conceptualized and delivered. Since help-seeking attitudes are strongly positively correlated with intentions to seek counseling, perceived racism and gender are the most notable predictors of willingness to seek counseling among African-American undergraduate college students. In this section the following three points of the study will be explored: (a) college counseling centers must address perceived racism as a significant predictor of intentions to seek counseling among African-American undergraduate college students, (b) counseling professionals on college campuses can work to improve the campus climate at PWIs, (c) counselors must attend to the intersectionality of multiple identities especially since gender is a significant predictor of intentions to seek counseling.

The findings from this investigation suggest there is a strong association between perceived racism and willingness to seek counseling services. This finding is consistent with previous studies, which have documented the link between perceived racism and discrimination and mental health (Cross et al., 1998; Neville & Lilly, 2000; Pieterse et al., 2012 Whittaker & Neville, 2010). On average, African-Americans report more incidents of racism than other racial minority groups, and racism has resulted in a host of health of disparities (Chao, Mallinckrodt, & Wei, 2012). The mental health of African-

Americans is greatly impacted by exposure to racism. Moreover, the greater the exposure and appraised stressfulness of racist events, the greater the likelihood that African-Americans will experience mental distress. (Pieterse et al., 2012).

The relationship between perceived racism and mental health for African-American college undergraduate students is also quite robust. Perceived racism is linked to a range of interpersonal concerns common among college students such as difficulties making friends, problems relating with peers, and worries about dating. Physical health and sleep issues were also associated with perceived racism distress (Pieterse & Carter, 2007). African-American students struggling with instances of perceived racism were also more worried about their finances as well as academic performance-related problems such as study skills, academic workload, time management, and adjustment to college (Chao, Mallinckrodt, & Wei, 2012).

However, racial identity development impacts African-American students' experiences with perceived racism. Positive internalized racial identity has been linked to hardiness as an indicator of resiliency. Higher levels of hardiness have been found to be indicative of a person's capacity and motivation to face and transform stressors, because of their buffering properties against distress and mental illness (Soderstrom et al., 2000). This information is useful, because it can have direct implications for mediating perceived racism and discrimination. In other words, maintaining a positive racial identity may reflect a salient, pro-Black and multiculturally inclusive identity that could serve as protective qualities for individuals. Pope (2000) found that African-American college students who had a secure Black sense of self (i.e., internalized racial identity)

were better able to establish their purpose in college and develop healthier relationships and academic autonomy in comparison with students with pre-encounter racial identity attitudes.

As previously noted, Black racial identity development is multi-faceted and multi-dimensional. Students who are in the earlier stages of their racial identity development may not recognize the importance of culturally specific initiatives so they may not participate in counseling programs designed to support healthy racial identity. In order to get these students involved and more likely to seek counseling services, counselors may need to actively interface with these students outside of the traditional counseling center. Providing workshops in academic classrooms around time management, stress reduction, and conflict resolution skills may be an effective, innocuous strategy to introduce these students to counseling professionals and increase their willingness access services. Counselors could also partner with colleagues in student affairs to co-host large-scale campus-wide events open to all students. These student activities will give students access to counseling professionals in less formal ways which could translate into future use of the counseling services.

For counseling centers, counselors should routinely ask African-American clients about experiences of racism and discrimination. It is vital to address these issues early within the first few sessions since these clients may not return after initial appointments. Since racism could be a traumatic experience for African-Americans, counselors can also use culture-related trauma therapy to contextualize the relationship between counseling and discrimination and racism-related stress (Brown, 2008; Bryant-Davis, 2005; Dass-

Brailsford, 2007). Counselors can help to normalize clients' reactions to racism and discrimination by providing them with epidemiological and psychological research examples noting the impact of race-related stress on African-Americans.

Normalization can be a powerful first step to partner with clients and empower them to address their concerns. During counseling, a strength-based perspective on the part of the counselor could potentially help African-American undergraduate clients actively use internal and external resources such as spirituality, racial/ethnic pride, and social networks to counteract the deleterious effects of perceived racism. Since negative perceptions of campus climate have been associated with symptoms of trauma (Pieterse et al., 2010), perhaps many of the interventions that help combat veterans through their process of "meaning making" (Park, 2010) after a traumatic experience would be helpful for African American undergraduate clients who experience discrimination and racism-related stress.

The results also underscore the impact of institutional racism experienced by African Americans at predominantly White institutions which affects intentions to seek counseling and help-seeking attitudes. Institutional racism implies a systematized lack of social justice in which ethnic/racial underrepresented persons are denied access to opportunities and resources, in part, due to policies and procedures of the institution itself (Anglin & Wade, 2007). Perceived institutional racism is also reflected in African-American undergraduates' experiences with the campus climate of their institutions. Counseling professionals on college campuses can intervene and address issues of campus racial climate within their capacities in higher education.

Counselors can play a key role in mobilizing resources and helping address campus climate issues related to perceived racism on both individual and institutional levels. In counseling, counselors can identify coping resources and engage in culturally competent interventions addressing African-American clients' concerns. However, throughout the therapeutic process, the counselor must be aware of his or her biases and attend to the dynamics of how potential cultural differences may impact the therapeutic alliance. Counselors should be sensitive to issues of perceived racism and discrimination as they relate to African-American students' psychological well-being as well as their academic work (Banks & Kohn-Wood, 2007; Chao, Mallinckrodt, & Wei, 2012; Carter, 2007).

As related to the individual level of campus climate, counseling professionals on college campuses can encourage diversity and healthy campus climate through creating opportunities for cross-racial interaction via engagement inside or outside of the classroom. In the classroom setting, curricula are powerful venues for students to dialogue about race and diversity (Gurin et al., 2002) and several studies have linked taking ethnic studies courses or courses that incorporate racial understanding, reducing one's prejudices, and promoting social justice (Park, Denson, & Bowman., 2013; Engberg, 2004; Zuniga, Williams, & Berger, 2005). Counselor educators should include elements of intergroup dialogue and discussions of diversity in their syllabi. In addition to exposing students to the histories and lived experiences of diverse groups, when students are engaged in discussions in racially diverse settings with multiple viewpoints, their critical and active thinking are enhanced (Antonio et al., 2004; Gurin et al., 2002).

Intergroup dialogue methods and pedagogy can be used inside or outside of the classroom setting. Such dialogues are revered for fostering healthy communication and conflict resolution skills often around difficult topics that are critical to a diverse student body (Gurin & Nagda, 2006).

Counselors on college campuses can also promote positive campus climate through advocacy that occurs outside of the classroom. Studies examining diversity-related interactive workshops have largely found favorable outcomes (Park et al., 2013; Engberg, 2004). Since counselors are trained to adhere to multicultural counseling competencies while providing professional services to clients, they are ideal campus partners who can lead interactive workshops for students, faculty, and staff about the impact of biases and the importance of diversity. At the institutional level, counselors should be encouraged to sit on interdepartmental committees with colleagues from student life and campus affairs across the campus community. They should have visible roles in new student orientation planning and student leadership development initiatives. Institutions can also issue a diversity statement and emphasize diversity in all of their academic and co-curricular programming. Since social justice and advocacy are cornerstones in the counseling profession, counselors can provide a helpful perspective on institutional committees addressing issues of student involvement and campus climate.

Counselors can also address campus climate concerns and mitigate the effects of perceived racism through partnerships with racial/ethnic student organizations. Since African-American students are more likely to seek counseling services if they perceive their campuses as less racist, partnerships with student organizations is an important step

in building rapport and increasing awareness of counseling. Students will be more likely to see counseling professionals as resources if they have an established relationship with their student organizations. These student groups foster a positive sense of self for students; they also play a critical social support role for students of color (Museus, 2008). Students from underrepresented communities on campus may need to "recharge" before spending additional time with peers of other races at PWIs. Ethnic student organizations can play a substantial role in supporting cross racial interactions (Park, 2011).

Counselors could partner with these student groups to provide programming to their communities, sponsor students to attend conferences related to diversity and inclusion, and also create "safe spaces" for students of color to congregate for social support. By partnering with organizations, counselors are able to interact with students in non-clinical settings which provide counselors with informal opportunities to connect with students and offer support. These less formal interactions with counseling may also increase the likelihood that students of color will view counselors as helpful resources on campus and increase their willingness to seek services.

Finally, the results also indicated that gender differences impacted intentions to seek counseling as well. When discussing perceived racism and discrimination with African-American undergraduate college students, counselors should be aware of the possibility of gender differences in the experiences. In the sample, women were more likely to seek counseling services than men. These findings are consistent with other national studies of African-American college students which conclude that Black men overwhelmingly seek counseling at much lower rates than women. (Lee, 1997; Spurgeon

& Myers, 2010; Williams & Justice, 2010). The importance of gender in regards to intentions to seek counseling may make it necessary to work with African-American undergraduate college men and women differently in therapy.

Since African American undergraduate college women have more positive attitudes toward counseling, they may be more motivated and may value the counseling process more than their male counterparts. Counselors may need to employ a different focus in order to reach African-American male clients. It may be important to assess the implicit and explicit meanings associated with counseling when communicating with Black men. Counselors may even consider holding pilot groups exclusively for self-identified Black men within the informal support network modality. These men's groups could be effective places for peer mentoring and could generate a great deal of feedback for counselors concerning the delivery of counseling services to this population. Since African-American men continue to be an underserved population within the counseling field, these informal men's groups may provide valuable insight into best practices for counseling Black men. These findings are also important in terms of highlighting the role of intersectionality and within group differences and within group variability on the variables of gender, socioeconomic class, help-seeking attitudes, perceived racism, and identity development.

Limitations

There are several limitations to the current study that impact its generalizability. Because the study was primarily advertised through Internet forums, websites, and social media, all participants had to have accounts or memberships to the various forums to see

the ads, which means that participants had to have access to the Internet. Further, participants who viewed these advertisements voluntarily agreed to complete the survey, so in effect, the sample is self-selected, which may have impacted the results. However, the vast majority of research on African-American undergraduate college students is based on self-selected samples.

Undergraduate students are a privileged group, and the results are not generalizable to African-American emerging adults who are not enrolled in college. It is also possible individuals who completed the survey were students who were more advanced and comfortable in their racial identity development than other African-American students at PWIs. The impact of the halo effect could have also affected results since participants could have answered in a way that promoted social desirability. It is also important to note that the researcher of this study is an African-American woman and a college administrator. This means she was granted access to certain groups due to her involvement in campus and community organizations germane to the Black student community. Other researchers who seek to duplicate the methods of this study may not have the same level of access to this demographic as the primary investigator.

Also, the term "Afrocentric" is used throughout the CRIS, particularly within the five items on the Internalized Afrocentric subscale. The over-reliance on the term is methodologically problematic, because the word "Afrocentric" is never defined in the measure. In addition, contrary to theoretical expectations, the internalized Afrocentric subscale closely aligned with the Immersion-Emersion Anti-White racial identity cluster. Thus, it was difficult to determine whether respondents had the same understanding of

the term "Afrocentric" that was intended by the original architects of the CRIS. Given the conflicting media representations of Afrocentricity, it is possible that respondents had different connotations of the term (Cokley, 2002). It is highly possible that these two identity clusters were conflated due to students aligning the term "Afrocentric" as a term associated with the militant, angry characteristic of the Immersion-Emmersion stage which is dissimilar to the original aspect of the internalized Afrocentric stage characterized by an affirmative and salient Black sense of self (Anglin & Wade, 2007).

Finally, it is of critical important not to generalize these findings to all African-American undergraduate college students. This study examined the experiences of African-American students attending 17 predominantly White institutions in the United States. However, the majority of the sample attended institutions on the East Coast (approximately 65%) so the results are not generalizable across regions. Even within this demographic, there is a great deal of variability in the Black community of students on college campuses. This population is not monolithic, and intersecting issues of class, sexual orientation, (dis)ability, and gender expression could certainly impact results.

The CRIS like many other racial identity models is unable to assess intersecting aspects of identity. The CRIS examines race in isolation instead of incorporating aspects of intersectionality. This shortcoming is not unique to the CRIS, but a more comprehensive identity model with a nuanced approach to racial identity and intersectionality could possibly yield different findings. These limitations may be important considerations for replication. The sample also did not include participants

from Historically Black Colleges and Universities (HBCUs) so the findings of the study may not be replicated if the sample is comprised of students attending HBCUs.

Implications for Future Research

In this study quantitative methodology to explore racial identity was exclusively utilized. Using a similar methodology, future research should investigate a comparison between African-American undergraduate college students attending PWIs and HBCUs. The design of this study did not allow for the assessment of differences between students at PWIs from students at HBCUs. Future studies should also utilize measures to conduct longitudinal assessment of African-American students participating in counseling over time. Future use of quantitative measures should also include outcome based assessments of counseling center interventions designed to increase service utilization.

Despite the decades of racial identity research, there is remarkably scant information about African-American racial identity development from a phenomenological standpoint. Future research should employ qualitative methodologies to examine the complexities in which individuals develop racial views and how racial identity impacts intentions to seek counseling. This information will provide essential information that will illuminate issues to address in clinical interventions as well as informal interactions with African-American undergraduate college students. Qualitative or mixed-methods research is also needed to better understand the distinct differences between the different racial identity typologies in the CRIS. Such kinds of research could also elucidate the ways in which individuals develop and express their racial attitudes and experience race within each identity stage. A better understanding of the contextual and

personal factors related to racial identity development would be beneficial in improving the rates of African-American undergraduate college students' willingness to seek counseling.

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APPENDIXES
APPENDIX A
Sample Recruitment Advertisement

African American undergraduate students!

I am a PhD student at Georgia State University and I am currently conducting research on African American college students. I am interested in finding out more about African Americans' experiences on college campuses as well as their motivations to ask for help when they need it.

If you identify as Black or African American, are currently enrolled in a 4-year college or university, live in the U.S., and are above 18 years old, then you qualify! I have a survey at www.surveymonkey.com/fakeaddress, and if you are interested, the survey only takes about 25 minutes.

After you complete the survey, you'll have the option of entering a drawing I'm holding for 10 \$20 Visa gift cards to thank people who participate in the study*.

Thanks!

If you have any questions, feel free to email me at tmosley7@student.gsu.edu.

Ps – this is the last thing I need to do to complete my degree so I would really appreciate any help you can be. If you do not want to take the survey, then consider forwarding this to other students you know who might. Thanks!

*You do not have to participate in the study to be entered into the drawing. See www.surveymonkey.com/fakeaddress for more details.

APPENDIX B
Study Instrument

Demographics Questionnaire

Age: _____

Race / Ethnicity:

Gender: Male Female Transgender Other:

Sexuality: Heterosexual Lesbian/Gay
 Bisexual Questioning Other:

Annual family household income:

- less than \$25,000
- between \$25,000-\$40,000
- between \$40,000-\$60,000
- between \$60,000-\$80,000
- between \$80,000-\$100,000
- more than \$100,000

Undergraduate Classification in College:

- First Year
- Second Year
- Third Year
- Fourth Year
- Fifth Year
- Other: _____

Are you a first generation college student?

- Yes
- No

Name of Institution _____

Type of Institution You Attend (Check all that apply):

- Predominantly White college/university
- Historically Black college/university (HBCU)
- Women's College
- Men's College
- Urban college/university
- Public college/university
- Private college/university
- Other: _____

Location of Institution

- Northeast
- Southeast
- Midwest
- Southwest
- West
- Other: _____

Approximately how many people attend your institution?

- less than 5,000
- between 5,000-10,000
- between 10,000-15,000
- between 15,000-20,000
- between 20,000-25,000
- between 25,000-30,000
- between 30,000-40,000
- between 40,000-50,000
- more than 50,000

Have you ever received counseling services or other psychological services before? (This may include: psychotherapy, counseling, receiving medication for a mental or emotional problem, family therapy, in and outpatient psychological services, and any other services provided by a licensed mental health worker)?

- Yes, I have and it was helpful
- Yes, I have, but it was not helpful
- No, I have never attended professional psychological counseling

If you attended counseling, how did you hear about it? (check all that apply):

- I was referred by my school, health care provider, job, etc.
- Self-referral
- Friends
- Boyfriend/girlfriend/relationship partner
- Advertisements for counseling (web, TV, radio, magazine, etc.)
- Co-worker
- Family members
- Other – please specify: _____

Have you ever considered receiving professional counseling services at your college counseling center?

- Yes, currently
- In the past, but not now
- No, I have never considered professional counseling services at my college counseling center
- No, I did not realize my college/university had a college counseling center
- Other: _____

Attitudes Towards Seeking Professional Psychological Help-Short Form
(Fischer & Farina, 1995)

Instructions. Read each statement carefully and indicate your degree of agreement using the scale below.

	Disagree 0	Partly disagree 1	Partly agree 2	Agree 3		
1.			0	1	2	3
	If I believed I was having a mental breakdown, my first inclination would be to get professional attention.					
2.			0	1	2	3
	The idea of talking about problems with a counselor strikes me as a poor way to get rid of emotional conflicts.					
3.			0	1	2	3
	If I were experiencing a serious emotional crisis at this point in my life, I would be confident that I could find relief in psychotherapy.					
4.			0	1	2	3
	There is something admirable in the attitude of a person who is willing to cope with his or her conflicts and fears without resorting to professional help.					
5.			0	1	2	3
	I would want to get psychological help if I were worried or upset for a long period of time.					
6.			0	1	2	3
	I might want to have psychological counseling in the future.					
7.			0	1	2	3
	A person with an emotional problem is not likely to solve it alone; he or she is likely to solve it with professional help.					
8.			0	1	2	3
	Considering the time and expense involved in psychotherapy, it would have doubtful value for a person like me.					
9.			0	1	2	3
	A person should work out his or her own problems; getting psychological counseling would be a last resort.					
10.			0	1	2	3
	Personal and emotional troubles, like many things, tend to work out by themselves.					

Intentions to Seek Counseling Inventory (ISCI)
(Cash et. Al., 1975; Kelly & Acher, 1995)

Instructions. Below is a list of issues people commonly bring to counseling. How likely would you be to seek counseling if you were experiencing these problems? Please circle the corresponding answer.

	Very unlikely 1	Unlikely 2	Likely 3	Very likely 4
1. Weight Control	1	2	3	4
2. Excessive Alcohol use	1	2	3	4
3. Relationship differences	1	2	3	4
4. Concerns about sexuality	1	2	3	4
5. Depression	1	2	3	4
6. Conflict with parents	1	2	3	4
7. Speech anxiety	1	2	3	4
8. Difficulties dating	1	2	3	4
9. Choosing a major	1	2	3	4
10. Difficulty in sleeping	1	2	3	4
11. Drug problems	1	2	3	4
12. Inferiority Feelings	1	2	3	4
13. Test anxiety	1	2	3	4
14. Difficulty with friends	1	2	3	4
15. Academic work procrastination	1	2	3	4
16. Self-understanding	1	2	3	4
17. Loneliness	1	2	3	4

Perceived Racism Scale (PRS)
(McNeilly et al., 1996)

Section I

Instructions. Please circle the number which corresponds to how often you experience each event. Please circle only one number for each item. For example, if you felt, over the past year that you were assigned jobs no one else wanted, on average “Several times a month,” you’d circle number “3” next to item 1a. If you felt, over your lifetime you were assigned jobs no one else wanted, on average “Several times a year,” you would circle number “2” next to item 1b.

A. Racism on the Job

(If you have never been employed, please skip this section and go to, question number 11, section B).

0--Not Applicable	3—Several times a month
1—Almost Never	4—Several times a week
2—Several times a year	5—Several times a day

- | | | |
|----|---|-------------|
| 1. | Because I am Black, I’m assigned the jobs no one else wants to do. | |
| | a. How often has this happened in the past year? | 0 1 2 3 4 5 |
| | b. How often has this happened during my lifetime? | 0 1 2 3 4 5 |
| 2. | At work when different opinions would be helpful, my opinion is not asked for because of my race. | |
| | a. How often has this happened in the past year? | 0 1 2 3 4 5 |
| | b. How often has this happened during my lifetime? | 0 1 2 3 4 5 |
| 3. | I am treated with less dignity and respect than I would be if I were White. | |
| | a. How often has this happened in the past year? | 0 1 2 3 4 5 |
| | b. How often has this happened during my lifetime? | 0 1 2 3 4 5 |
| 4. | I am watched more closely than other workers because of my race. | |
| | a. How often has this happened in the past year? | 0 1 2 3 4 5 |
| | b. How often has this happened during my lifetime? | 0 1 2 3 4 5 |
| 5. | Racial jokes or harassment are directed at me at work. | |
| | a. How often has this happened in the past year? | 0 1 2 3 4 5 |
| | b. How often has this happened during my lifetime? | 0 1 2 3 4 5 |

6. Because I am Black, I feel as I have to work twice as hard.
- a. How often has this happened in the past year? 0 1 2 3 4 5
- b. How often has this happened during my lifetime? 0 1 2 3 4 5
7. Tasks that require intelligence are usually given to Whites, while Blacks get those that don't require much thought.
- a. How often has this happened in the past year? 0 1 2 3 4 5
- b. How often has this happened during my lifetime? 0 1 2 3 4 5
8. I am often ignored or not taken seriously by my boss because of my race.
- a. How often has this happened in the past year? 0 1 2 3 4 5
- b. How often has this happened during my lifetime? 0 1 2 3 4 5
9. Whites often assume I work in a lower status job than I do and treat me as such.
- a. How often has this happened in the past year? 0 1 2 3 4 5
- b. How often has this happened during my lifetime? 0 1 2 3 4 5
10. A White co-worker with less experience and qualifications got promoted before me.
- a. How often has this happened in the past year? 0 1 2 3 4 5
- b. How often has this happened during my lifetime? 0 1 2 3 4 5

B. Racism in Academic Settings

0--Not Applicable

1—Almost Never

2—Several times a year

3—Several times a month

4—Several times a week

5—Several times a day

11. I have been made to feel uncomfortable in a classroom of White students.
- a. How often has this happened in the past year? 0 1 2 3 4 5
- b. How often has this happened during my lifetime? 0 1 2 3 4 5
12. Teachers and students assume I'm less intelligent because of my race.
- a. How often has this happened in the past year? 0 1 2 3 4 5
- b. How often has this happened during my lifetime? 0 1 2 3 4 5
13. Whites assume I gained admission to school only because of Affirmative Action-not based on my abilities or intelligence.

- | | | | | | | | | |
|-----|----|--|---|---|---|---|---|---|
| | a. | How often has this happened in the past year? | 0 | 1 | 2 | 3 | 4 | 5 |
| | b. | How often has this happened during my lifetime? | 0 | 1 | 2 | 3 | 4 | 5 |
| 14. | | My graded assignments are judged more critically because I am Black. | | | | | | |
| | a. | How often has this happened in the past year? | 0 | 1 | 2 | 3 | 4 | 5 |
| | b. | How often has this happened during my lifetime? | 0 | 1 | 2 | 3 | 4 | 5 |
| 15. | | Although I'm equally prepared and responsive, I am called on less than Whites in the class. | | | | | | |
| | a. | How often has this happened in the past year? | 0 | 1 | 2 | 3 | 4 | 5 |
| | b. | How often has this happened during my lifetime? | 0 | 1 | 2 | 3 | 4 | 5 |
| 16. | | When I excel academically, I am looked upon as an exception to my race. | | | | | | |
| | a. | How often has this happened in the past year? | 0 | 1 | 2 | 3 | 4 | 5 |
| | b. | How often has this happened during my lifetime? | 0 | 1 | 2 | 3 | 4 | 5 |
| 17. | | I find it difficult to trust White teachers and/or students. | | | | | | |
| | a. | How often has this happened in the past year? | 0 | 1 | 2 | 3 | 4 | 5 |
| | b. | How often has this happened during my lifetime? | 0 | 1 | 2 | 3 | 4 | 5 |
| 18. | | My academic advancement has suffered because of my race. | | | | | | |
| | a. | How often has this happened in the past year? | 0 | 1 | 2 | 3 | 4 | 5 |
| | b. | How often has this happened during my lifetime? | 0 | 1 | 2 | 3 | 4 | 5 |
| 19. | | Although I am equally intelligent, Whites often don't include me in study groups because I am Black. | | | | | | |
| | a. | How often has this happened in the past year? | 0 | 1 | 2 | 3 | 4 | 5 |
| | b. | How often has this happened during my lifetime? | 0 | 1 | 2 | 3 | 4 | 5 |
| 20. | | I have been taught in school that Europeans are civilized and Africans are primitive | | | | | | |
| | a. | How often has this happened in the past year? | 0 | 1 | 2 | 3 | 4 | 5 |
| | b. | How often has this happened during my lifetime? | 0 | 1 | 2 | 3 | 4 | 5 |

Racism in the Public Realm

	0--Not Applicable	3—Several times a month				
	1—Almost Never	4—Several times a week				
	2—Several times a year	5—Several times a day				
21.	I have been called insulting names related to my race or skin color.					
	a. How often has this happened in the past year?	0	1	2	3	4 5
	b. How often has this happened during my lifetime?	0	1	2	3	4 5
22.	When I go shopping, I am often followed by White security guards or watched by White clerks.					
	a. How often has this happened in the past year?	0	1	2	3	4 5
	b. How often has this happened during my lifetime?	0	1	2	3	4 5
23.	I hear comments from Whites expressing surprise at my or other minority individuals' intelligence or industriousness.					
	a. How often has this happened in the past year?	0	1	2	3	4 5
	b. How often has this happened during my lifetime?	0	1	2	3	4 5
24.	People "talk down" to me because I am Black.					
	a. How often has this happened in the past year?	0	1	2	3	4 5
	b. How often has this happened during my lifetime?	0	1	2	3	4 5
25.	I have been refused rental housing which was then later rented to Whites of similar standing (e.g., comparable family income).					
	a. How often has this happened in the past year?	0	1	2	3	4 5
	b. How often has this happened during my lifetime?	0	1	2	3	4 5
26.	I know of people who have gotten into trouble (gotten hurt, beaten up, shot) by Whites (individuals, gangs, police, White hate groups).					
	a. How often has this happened in the past year?	0	1	2	3	4 5
	b. How often has this happened during my lifetime?	0	1	2	3	4 5
27.	I have difficulty getting a loan because I am Black.					
	a. How often has this happened in the past year?	0	1	2	3	4 5
	b. How often has this happened during my lifetime?	0	1	2	3	4 5
28.	I am followed, stopped or arrested by White police more than others because of my race.					
	a. How often has this happened in the past year?	0	1	2	3	4 5
	b. How often has this happened during my lifetime?	0	1	2	3	4 5
29.	I have had to make my speech and posture appear passive when dealing with Whites.					
	a. How often has this happened in the past year?	0	1	2	3	4 5
	b. How often has this happened during my lifetime?	0	1	2	3	4 5
30.	Waiters and waitresses ignore me and serve Whites first.					
	a. How often has this happened in the past year?	0	1	2	3	4 5
	b. How often has this happened during my lifetime?	0	1	2	3	4 5
31.	White males talk about not desiring Black women for					

- “serious” relationship versus those with White women.
- a. How often has this happened in the past year? 0 1 2 3 4 5
- b. How often has this happened during my lifetime? 0 1 2 3 4 5
32. My house has been vandalized because of my race.
- a. How often has this happened in the past year? 0 1 2 3 4 5
- b. How often has this happened during my lifetime? 0 1 2 3 4 5
33. I have had to allow Whites to obtain the best seats in public places.
- a. How often has this happened in the past year? 0 1 2 3 4 5
- b. How often has this happened during my lifetime? 0 1 2 3 4 5
34. I have been denied hospitalization or medical care because of my race.
- a. How often has this happened in the past year? 0 1 2 3 4 5
- b. How often has this happened during my lifetime? 0 1 2 3 4 5
35. I have known Black men who have suffered negative consequences for talking to White women (being hurt or killed).
- a. How often has this happened in the past year? 0 1 2 3 4 5
- b. How often has this happened during my lifetime? 0 1 2 3 4 5
36. I have encountered legal restrictions against Blacks. Please circle each one that applies:
housing, marriage, jobs, use of public facilities.
- a. How often has this happened in the past year? 0 1 2 3 4 5
- b. How often has this happened during my lifetime? 0 1 2 3 4 5

C. Responses to Racist Situations

0--Not Applicable

1—Almost Never

2—Several times a year

3—Several times a month

4—Several times a week

5—Several times a day

37. “Over the past few years, Black have gotten more economic and educational breaks than they deserve.”
- a. How often has this happened in the past year? 0 1 2 3 4 5
- b. How often has this happened during my lifetime? 0 1 2 3 4 5
38. “Blacks should not push themselves into places where they are not wanted.”
- a. How often has this happened in the past year? 0 1 2 3 4 5
- b. How often has this happened during my lifetime? 0 1 2 3 4 5
39. “Most Blacks are on welfare because they are too lazy to get a job.”

- | | | | | | | | | |
|-----|----|---|---|---|---|---|---|---|
| | a. | How often has this happened in the past year? | 0 | 1 | 2 | 3 | 4 | 5 |
| | b. | How often has this happened during my lifetime? | 0 | 1 | 2 | 3 | 4 | 5 |
| 40. | | “If a Black family moved in next door to me, I would seriously think about moving.” | | | | | | |
| | a. | How often has this happened in the past year? | 0 | 1 | 2 | 3 | 4 | 5 |
| | b. | How often has this happened during my lifetime? | 0 | 1 | 2 | 3 | 4 | 5 |
| 41. | | “Black people are generally not as smart as Whites.” | | | | | | |
| | a. | How often has this happened in the past year? | 0 | 1 | 2 | 3 | 4 | 5 |
| | b. | How often has this happened during my lifetime? | 0 | 1 | 2 | 3 | 4 | 5 |
| 42. | | “Black men have an animal like passion in bed.” | | | | | | |
| | a. | How often has this happened in the past year? | 0 | 1 | 2 | 3 | 4 | 5 |
| | b. | How often has this happened during my lifetime? | 0 | 1 | 2 | 3 | 4 | 5 |
| 43. | | “Some Blacks are so touchy about their rights that it is difficult to get along with them.” | | | | | | |
| | a. | How often has this happened in the past year? | 0 | 1 | 2 | 3 | 4 | 5 |
| | b. | How often has this happened during my lifetime? | 0 | 1 | 2 | 3 | 4 | 5 |

Section II.

In answering the questions in this section, **please circle a response next to each emotion that best describes how you feel in that setting:**

- 1—Not at all
2—Moderately
3--Extremely

- | | | | | |
|-----|--|---|---|---|
| 44. | When I experience Racism on the Job , I generally feel: | | | |
| | Angry | 1 | 2 | 3 |
| | Frustrated | 1 | 2 | 3 |
| | Powerless | 1 | 2 | 3 |
| | Hopeless | 1 | 2 | 3 |
| | Ashamed | 1 | 2 | 3 |
| | Strengthened | 1 | 2 | 3 |
| 45. | When I experience Racism in Academic Settings , I generally feel: | | | |
| | Angry | 1 | 2 | 3 |
| | Frustrated | 1 | 2 | 3 |
| | Powerless | 1 | 2 | 3 |
| | Hopeless | 1 | 2 | 3 |
| | Ashamed | 1 | 2 | 3 |
| | Strengthened | 1 | 2 | 3 |
| 46. | When I experience Racism in the Public Realm , I generally feel: | | | |
| | Angry | 1 | 2 | 3 |

	Frustrated	1	2	3
	Powerless	1	2	3
	Hopeless	1	2	3
	Ashamed	1	2	3
	Strengthened	1	2	3
47.	When I hear Racist Statements , I generally feel:			
	Angry	1	2	3
	Frustrated	1	2	3
	Powerless	1	2	3
	Hopeless	1	2	3
	Ashamed	1	2	3
	Strengthened	1	2	3

Section III.

In answering the questions in this section, **please mark the *behavior or behaviors* that best describe how you deal with racism in that setting:**

1—Never	4—Fairly often
2—Rarely	5—Very often
3—Sometimes	

48. When I experience **Racism on the Job**, I generally deal with it by:

Speaking up	1	2	3	4	5
Accepting it	1	2	3	4	5
Ignoring it	1	2	3	4	5
Trying to change things	1	2	3	4	5
Keeping it to myself	1	2	3	4	5
Working harder to prove them wrong	1	2	3	4	5
Praying	1	2	3	4	5
Avoiding it	1	2	3	4	5
Getting violent	1	2	3	4	5
Forgetting it	1	2	3	4	5
Other (please list): _____	1	2	3	4	5

49. When I experience **Racism in Academic Settings**, I generally deal with it by:

Speaking up	1	2	3	4	5
Accepting it	1	2	3	4	5
Ignoring it	1	2	3	4	5
Trying to change things	1	2	3	4	5
Keeping it to myself	1	2	3	4	5
Working harder to prove them wrong	1	2	3	4	5
Praying	1	2	3	4	5
Avoiding it	1	2	3	4	5
Getting violent	1	2	3	4	5
Forgetting it	1	2	3	4	5
Other (please list): _____	1	2	3	4	5

50. When I experience **Racism in the Public Realm**, I generally deal with it by:

Speaking up	1	2	3	4	5
Accepting it	1	2	3	4	5
Ignoring it	1	2	3	4	5
Trying to change things	1	2	3	4	5
Keeping it to myself	1	2	3	4	5
Working harder to prove them wrong	1	2	3	4	5
Praying	1	2	3	4	5
Avoiding it	1	2	3	4	5
Getting violent	1	2	3	4	5
Forgetting it	1	2	3	4	5

Other (please list): _____ 1 2 3 4 5

51. When I hear **Racist Statements**, I generally deal with it by:

Speaking up	1	2	3	4	5
Accepting it	1	2	3	4	5
Ignoring it	1	2	3	4	5
Trying to change things	1	2	3	4	5
Keeping it to myself	1	2	3	4	5
Working harder to prove them wrong	1	2	3	4	5
Praying	1	2	3	4	5
Avoiding it	1	2	3	4	5
Getting violent	1	2	3	4	5
Forgetting it	1	2	3	4	5
Other (please list): _____	1	2	3	4	5

Cross Racial Identity Scale (CRIS)
(Cross & Vandiver, 2001)

Instructions. Read each item and indicate to what degree it reflects your own thoughts and feelings, using the 7-point scale below. There are no right or wrong answers. Base your responses on your opinion at the present time.

	Strongly Disagree	Disagree	Somewhat	Neither agree/disagree	Somewhat	Agree	Strongly Agree				
	1	2	3	4	5	6	7				
1. As an African American, life is good for me.					1	2	3	4	5	6	7
2. I think of myself primarily as an American, and seldom as a member of my racial group.					1	2	3	4	5	6	7
3. Too many Blacks "glamorize" the drug trade and fail to see opportunities that do not involve crime.					1	2	3	4	5	6	7
4. I go through periods when I am down on myself because I am Black.					1	2	3	4	5	6	7
5. As a multiculturalist, I am connected to many groups (Hispanics, Asian-Americans, Whites, Jews, gays & lesbians, etc.).					1	2	3	4	5	6	7
6. I have a strong feeling of hatred and disdain for all White people.					1	2	3	4	5	6	7
7. I see and think about things from an Afrocentric perspective					1	2	3	4	5	6	7
8. When I walk into a room, I always take note of the racial make-up of the people around me.					1	2	3	4	5	6	7
9. I am not so much a member of a racial group, as I am an American.					1	2	3	4	5	6	7
10. I sometimes struggle with negative feelings about being Black.					1	2	3	4	5	6	7
11. My relationship with God plays an important role in my life.					1	2	3	4	5	6	7
12. Blacks place more emphasis on having a good time than on hard work.					1	2	3	4	5	6	7

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| 13. | I believe that only those Black people who accept an Afrocentric perspective can truly solve the race problem in America. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 14. | I hate the White community and all that it represents. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 15. | When I have a chance to make a new friend, issues of race and ethnicity seldom play a role in who that person might be. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 16. | I believe it is important to have both a Black identity and a multicultural perspective, which is inclusive of everyone (e.g., Asians, Latinos, gays & lesbians, Jews, Whites, etc.). | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 17. | When I look in the mirror at my Black image, sometimes I do not feel good about what I see. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 18. | If I had to put a label on my identity, it would be "American," and not African-American. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 19. | When I read the newspaper or a magazine, I always look for articles and stories that deal with race and ethnic issues. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 20. | Many African-Americans are too lazy to see opportunities that are right in front of them. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 21. | As far as I am concerned, affirmative action will be needed for a long time. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 22. | Black people cannot truly be free until our daily lives are guided by Afrocentric values and principles. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 23. | White people should be destroyed. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 24. | I embrace my own Black identity, but I also respect and celebrate the cultural identities of other groups (e.g., Native Americans, Whites, Latinos, Jews, Asian Americans, gays & lesbians, etc.). | 1 | 2 | 3 | 4 | 5 | 6 | 7 |

25. Privately, I sometimes have negative feelings about being Black. 1 2 3 4 5 6 7
26. If I had to put myself into categories, first I would say I am an American, and second I am a member of a racial group. 1 2 3 4 5 6 7
27. My feelings and thoughts about God are very important to me. 1 2 3 4 5 6 7
28. African-Americans are too quick to turn to crime to solve their problems 1 2 3 4 5 6 7
29. When I have a chance to decorate a room, I tend to select pictures, posters, or works of art that express strong racial-cultural themes. 1 2 3 4 5 6 7
30. I hate White people. 1 2 3 4 5 6 7
31. I respect the ideas that other Black people hold, but I believe that the best way to solve problems is to think Afrocentrically 1 2 3 4 5 6 7
32. When I vote in an election, the first thing I think about is the candidate's record on racial and cultural issues. 1 2 3 4 5 6 7
33. I believe it is important to have both a Black identity and a multicultural perspective, because this connects me to other groups (Hispanics, Asian-Americans, Whites, Jews, gays & lesbians, etc.). 1 2 3 4 5 6 7
34. I have developed an identity that stresses my experiences as an American more than my experiences as a member of a racial group. 1 2 3 4 5 6 7
35. During a typical week in my life, I think about racial and cultural issues many, many times. 1 2 3 4 5 6 7
36. Blacks place too much importance on racial protest and not enough on hard work and education. 1 2 3 4 5 6 7

37. Black people will never be free until we embrace an Afrocentric perspective. 1 2 3 4 5 6 7
38. My negative feelings toward White people are very intense. 1 2 3 4 5 6 7
39. I sometimes have negative feelings about being Black. 1 2 3 4 5 6 7
40. As a multiculturalist, it is important for me to be connected with individuals from all cultural backgrounds (Latinos, gays & lesbians, Jews, Native-Americans, Asian-Americans, etc.). 1 2 3 4 5 6 7