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ABSTRACT

The majority of research examining attitudes toward the disabled has demonstrated stereotypically negative biases among disabled and nondisabled populations. These biases may include avoidance or increased social distance with the disabled as well as feelings of uncomfortableness when interacting with disabled individuals. This study investigated the effects of apparent counselor disability on counselor attraction based upon both self-report and behavioral measures in an analogue counseling interaction. College undergraduate students (N=60) met with either a visibly disabled (either visually impaired or wheelchair-bound) counselor or a nondisabled counselor to discuss issues relating to a personal relationship in their lives. Results showed no evidence that counselor disability status affected either self-disclosure or counselor ratings. The results suggest that the disability enhancement effect obtained in prior research may not generalize to face-to-face interactions with the counselor in which cues other than disability may become more salient. (Author/ABL)

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ABSTRACT

The present study investigated the effects of apparent counselor disability on counselor attraction based upon both self-report and behavioral measures in an analogue counseling interaction. Sixty college undergraduates met with either a visibly disabled counselor or a nondisabled counselor to discuss issues relating to a personal relationship in their lives. Results showed no evidence that counselor disability status affected either self-disclosure or counselor ratings. It is suggested that the disability enhancement effect obtained in prior research may not generalize to face-to-face interactions with the counselor in which cues other than disability may become more salient.

SUMMARY

Title: Effects of counselor disability on counselor attraction in an analogue setting

Summary: The majority of research examining attitudes toward the disabled has demonstrated stereotypically negative biases among nondisabled populations (Goffman, 1963; Siller, 1970). These biases may include avoidance or increased social distance with the disabled as well as feelings of uncomfortableness when interacting with disabled individuals (Goffman, 1963; Kleck, 1969). The social stigmata of disability may depend, in part, upon the nature of the disability, with greater negative stigmata associated with visual impairments than with other types of disabilities, such as hearing impairments or ambulatory disabilities (Jacques, Gaier, & Linkowski, 1967). Gender differences in attitudes toward the disabled have also been observed, with females generally displaying more favorable attitudes than males (Chesler, 1965; Titley & Virey, 1969).

Research has also demonstrated that interpersonal attraction is associated with increased self-disclosure to a target person (Jourard, 1964, Cozby, 1973). Females have also been found to self-disclose more than males on self-report instruments (Cozby, 1973).

The present study investigated counselor attraction in an analogue setting as a function visible counselor disability. With the emphasis on viewing counseling as an interpersonal influence process in which counselor qualities play an important role in eliciting client behaviors (Rogers, 1957; Strong, 1968; Truax &

sensory disability (visual impairment) and ambulatory disability (wheel-chair bound). The same male counselor-confederate portrayed both disabled and nondisabled counselor conditions, having met descriptive criteria for enacting each disability condition as judged by raters blind to the purposes of the study.

Subjects were 30 male and 30 female undergraduate students from St. John's University who were asked to discuss a personal relationship with a counselor as part of a study of the counseling interaction. Subjects were then randomly assigned, by sex, to one of the three counseling conditions: nondisabled counselor, visually impaired counselor, or wheel-chair bound counselor. In the wheel-chair condition, the confederate-counselor was seated in a wheel-chair and did not move his legs. In the visually-impaired condition, the confederate-counselor wore dark glasses, tilted his head in a manner characteristic of visually impaired persons and appeared unresponsive to visual cues. A white cane was propped against the counselor's desk, in full view of the subject. In the non-disabled condition, the confederate-counselor did not display any visible disability. The confederate-counselor interviewed each subject using a prepared script and neutral probes to elicit more personal information. Subjects completed a post-experimental questionnaire which assessed their perceptions of the purpose of the study and the credibility of the experimental manipulations.

The results indicated that counselor disability was not a discriminating factor in determining attraction. Neither self-report nor behavioral measures of attraction significantly discriminated between experimental conditions. These results

Carkhuff, 1967; Truax & Mitchell, 1971), the attraction of the client to the counselor may represent a critical dimension of counseling effectiveness.

In contrast to the negative social stigmata associated with disability, prior studies examining attitudes toward disabled counselor-confederates have found a facilitative effect of counselor disability (Brabham & Thoreson, 1973; Mitchell & Allen, 1975; Mitchell & Frederickson, 1975), based upon rating scale measures of attraction. However, behavioral evidence of such facilitative effects have not been demonstrated. Nor has prior research examined attraction to disabled counselors within the context of actual face-to-face counseling interactions. It remains to be seen whether there are behavioral correlates of such effects, or whether facilitation merely masks an underlying sympathy effect.

The present study incorporated both rating scale measures of attraction (i.e., Counselor Rating Form, Barrett-Lennard Relationship Inventory) and behavioral measures of attraction (i.e., number of themes disclosed and length of self-disclosure based on ratings of audiotaped counseling interactions; expressed willingness for additional counseling with the counselor-confederate). An additional methodological improvement over past studies was the use of live face-to-face interactions between subjects and the disabled counselor-confederates, as opposed to the use of slides or photographs of disabled counselor-confederates to elicit subject ratings. In addition, two types of disability were compared with a nondisabled counselor condition:

partially confirmed the recent findings of Mallinckrodt and Helms (1986) with respect to findings of no significant differences between disabled and nondisabled counselor conditions in subjects' reported willingness to consult the counselor themselves for help in dealing with personal problems. However, Mallinckrodt and Helms did find evidence of the disability enhancement effect in that subjects rated disabled counselors either equal to or significantly greater than nondisabled counselors on the Counselor Rating Form subscales measuring perceived expertness, trustworthiness, and attractiveness. The Mallinckrodt and Helms study, however, was limited to measuring subjects' perceptions of disabled and nondisabled counselors based upon their viewing of a videotaped counseling vignette, rather than on the basis of actual face-to-face interactions with the counselor-confederates.

Disability enhancement effects of counselor disability may be limited to self-report measures of counselor attraction based upon observation, rather than interaction, with disabled counselors, in which disability cues may be more salient. The absence of either facilitative or inhibiting effects of apparent counselor disability in the present study may reflect the fact that subjects were able to focus on other aspects of the counselor besides the apparent disability when they interacted with them in face-to-face contact. Thus, the disability may have less salience in determining attraction, while these other cues, such as perceived warmth and empathy may become more prominent.

It also appears based on these findings and those of Mallinckrodt and Helms that the disability enhancement effect may

not generalize to subjects' expressed willingness to consult the counselor in the future for help in dealing with personal problems. Here again, it may be that other cues are more salient in determining the subject's choice of which counselor to consult. Subjects appear to look beyond the disability in determining not only their expressed choice of whether to consult the target counselor but also in their willingness to self-disclose in an analogue counseling interaction. It would be interesting to see, in future research, whether this absence of social stigmata associated with disabled counselors applies as well to other disability groups, such as the hearing impaired and epileptics, etc.

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