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The Application of Holland's Career Theory in Modern Day Career Services: Integrating the Self-Directed Search and the Career Thoughts Inventory

by

Stacie Vernick
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Introduction

The purpose of this chapter is to describe the utility of the Career Thoughts Inventory (CTI; Sampson, Jr., Peterson, Lenz, Reardon, & Saunders, 1996a) in concert with a widely used interest inventory associated with Holland’s theory of vocational behavior. The chapter begins with an analysis of the gap in career interest assessment, followed by a brief review of the CTI and its uses in practice. A case study demonstrating the integration of the Self-Directed Search (Holland, 1994) and the CTI is described, and the chapter ends with final conclusions based on the integration of the CTI and the SDS.

Though some may question the relevance of Holland’s (1997) career theory in modern day career development interventions, practitioners at the Florida State University Career Center are using numerous applications of this theory in practice each day. One way in which Holland’s theory and associated resources are used in practice at the FSU Career Center is in concert with the CTI. The CTI serves as a useful screening tool for practitioners assisting clients with a range of career concerns, perhaps most common of which is interest assessment. There are several implications of the application of this theory for both practitioners and clients.

The Gap in Career Interest Assessment

Interest inventories such as Holland’s Self-Directed Search (SDS; Holland, 1994) have the potential to provide clients with direction and clarity in the career decision-making process. However, it is not uncommon for individuals to face difficulties in processing the information they obtain from interest inventories. In such cases, a screening instrument such as the CTI (Sampson Jr. et al., 1996a) may be used to evaluate the degree to which the client is likely to benefit from use of the interest inventory. As a screening tool, the CTI identifies clients whose negative thinking may impede their effective use of the results of the SDS. As a needs assessment instrument, the CTI further identifies the specific aspects of the career decision-making process that are likely to provide challenges to the individual. As Reardon and Lenz (1998, p. 155) suggested, “practitioners can use both the CTI and SDS results to help clients see where they may be stuck and what activities may be needed to get them unstuck…”

The CTI shares many similarities with the identity scale of My Vocational Situation (MVS; Holland, Daiger, & Power, 1980). Both instruments are useful in identifying...
individuals for whom the Holland typology may not “work,” due to a lack of vocational identity or low career decision-making readiness. Reardon and Lenz (1999) indicated that individuals with low scores on the MVS are likely to need greater individualized assistance in using their SDS scores effectively in the career decision-making process. They further noted that low vocational identity might be an indication that interest patterns identified by the SDS may not be stable, and may change as vocational identity increases. The same holds true when the CTI is used in screening for career decision-making readiness. We use the CTI as the primary screening and needs assessment tool at the FSU Career Center as a result of its foundation in theory, solid psychometric properties, and the auxiliary learning resource that accompanies the instrument, the CTI Workbook (Sampson Jr., Peterson, Lenz, Reardon, & Saunders, 1996b).

The Career Thoughts Inventory

The Career Thoughts Inventory (CTI; Sampson, Jr. et al., 1996a) was developed in order to assist high school students, college students, and adults in making career decisions, and to augment the quality of the services they receive in solving career problems and making career decisions. According to the authors, “the CTI is a self-administered, objectively scored measure of dysfunctional thinking in career problem solving and decision making” (Sampson, Jr. et al., 1996a, p.1). Along with the CTI Workbook (Sampson, Jr. et al., 1996b), this instrument may be used as an assessment instrument and an intervention in the career decision-making process.

There are three main uses of the CTI in practice: screening, needs assessment, and as a learning resource (Sampson, Jr. et al., 1996a). In screening, the CTI may be used to identify individuals who are characterized by high levels of dysfunctional career thinking, who may be in need of greater assistance in the career decision-making process. In terms of needs assessment, the CTI can be used to gain a more specific understanding of the nature of the client’s career problem, specifically by analyzing the individual’s scores on the three scales of the instrument. This needs assessment enables the practitioner to target the needs of the individual and select appropriate interventions to assist them in the career decision-making process. Finally, the CTI and the accompanying CTI Workbook (Sampson Jr., et al., 1996b) may be used as a learning resource in counseling, providing concrete activities to assist the individual in identifying, altering, challenging, and acting upon dysfunctional career thoughts (Sampson, Jr., et al., 1996a).

The idea that dysfunctional thinking may negatively impact an individual’s efforts to make a career decision is the foundation of this instrument. This instrument is undergirded by the assumption that negative or dysfunctional thinking patterns impact the individuals’ emotions and behavior. Thus, the goal is to reframe or restructure these dysfunctional thoughts so that they will not act as barriers in the decision-making process (Sampson, Jr. et al., 1996a). The CTI assesses the underlying construct of dysfunctional career thinking through an assessment of the nature of the statements endorsed by the individual relative to the career decision-making process. Sampson, Jr. et al. (1996a, p.2) define career thoughts as “outcomes of one’s thinking about assumptions, attitudes, behaviors, beliefs, feelings, plans, and/or strategies related to career problem solving and decision making.”

Statements endorsed on the CTI yield a total score, as well as three sub-scale scores.
The total score is reflective of global dysfunctional thinking. The Decision-Making Confusion (DMC) sub-scale measures the degree of difficulty an individual has in commencing or continuing in the career decision-making process. High scores on the DMC scale typically reflect an individual's lack of knowledge regarding how to make decisions or emotions that are stopping the individual from moving forward with a decision. The Commitment Anxiety (CA) sub-scale assesses the level of difficulty an individual has in committing to a choice, which is typically associated with anxiety. Finally, the External Conflict (EC) sub-scale measures an individual's level of difficulty distinguishing between his or her own priorities in the decision-making process and the opinions of significant others (Sampson, Jr. et al., 1996a).

Initial research demonstrated that the CTI is a reliable and valid measure for all three of the populations upon which the instrument was normed: high school students, college students, and adults (Sampson Jr. et al., 1996a). A number of additional studies have analyzed the relationship between dysfunctional career thoughts and various constructs related to vocational behavior and overall life adjustment. These studies have increased what is known about the construct of dysfunctional career thoughts, and have supported the convergent validity of the instrument (Vernick, 1999).

**Integrating the Self-Directed Search and the Career Thoughts Inventory: The Case of Sue**

Sue's presenting problem was that she was unsure of the direction in which to steer her career. She presented for career counseling after quitting a job with which she was extremely unhappy, and saw this time as her opportunity to take a step back and decide what she would like to do with the rest of her life. When she initiated career counseling, Sue had a bachelor's degree in psychology and work experience as a receptionist. She expressed the sentiment that the areas in which she had focused her career in the past were not career fields she would like to pursue in the future.

On her client intake form, Sue listed nurse midwife, nurse practitioner, health educator, and librarian as some of the occupations she was considering. The Holland codes for these occupations are SIR, ISA, SEA, and SAI, respectively. She seemed to be conflicted between choosing a career in healthcare or a career as a librarian. She expressed a great deal of interest in the field of healthcare, yet said that her husband had been trying to convince her to become a librarian in light of the more stable work conditions and hours typical of individuals in this field. She was unsure of which option would make her the most happy, and expressed that her husband had exerted a large influence on her career decision making thus far.

**Assessments**

Sue utilized a number of assessment instruments in her career decision-making process. Among the assessments used were the Self-Directed Search (SDS; Holland, 1994) and the Career Thoughts Inventory (CTI; Sampson Jr. et al., 1996a). Her assessment results were as follows:
**SDS**

*Occupational Daydreams*

Certified Nurse Midwife  SIR  
ESOL Teacher  SAE  
Librarian  SAI  
Writer  AIE  
Therapist  SIA  
Public Health Educator  SEA

**Holland Code: SAC**

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**CTI**

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<th>Percentile</th>
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<td>60</td>
<td>84</td>
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<tr>
<td>Decision-Making Confusion (DMC)</td>
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<td>57</td>
<td>76</td>
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<td>Commitment Anxiety (CA)</td>
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<td>95</td>
</tr>
<tr>
<td>External Conflict (EC)</td>
<td>7</td>
<td>69</td>
<td>97</td>
</tr>
</tbody>
</table>

*Scale elevations in bold

**Career Diagnosis**

Sue presented for individual counseling as an undecided individual. Her scores on the CTI indicated that External Conflict and Commitment Anxiety posed problems for her in her career decision making. Sue seemed to have a considerable amount of self-knowledge, and was able to identify her interests, skills, and values with relative ease. However, her executive processing was largely limited by her negative career thinking, and the degree to which she was able to effectively apply her self-knowledge was somewhat questionable. Sue’s metacognitions suggested the need for reframing, but her overall upbeat attitude indicated that work in this area would likely lead to positive results in a relatively short time.
Career Counseling Outcomes

Sue engaged the career decision-making process with a great deal of motivation and interest. Beginning with the first session, she put forth a considerable amount of effort in working towards the achievement of her career goals and the closure of her identified gap. Each week Sue presented as dedicated to her career decision making and was enthusiastic about learning.

Though she scored slightly above average on this sub-scale of the CTI, Decision-Making Confusion was not an overwhelming barrier for Sue. She seemed to have a considerable amount of self-knowledge, and was willing to work with her career counselor to move through the steps of the career decision-making process. Her efforts, however, seemed to be hampered by her negative career thoughts in the areas of Commitment Anxiety and External Conflict.

Sue’s scores on the Commitment Anxiety sub-scale of the CTI reflected a barrier in her career decision making. Early in the career counseling relationship, Sue stated that she was afraid of actually jumping into a chosen career until she was relatively sure it was the “right one” for her. Work in career counseling targeted the appropriateness and functionality of this career thought. After identifying thoughts of this nature as negative, Sue worked on altering, challenging, and acting upon new career thoughts. Her effectiveness in engaging the process of reframing negative thoughts in this area helped her to take positive action towards making a career decision.

At the start of counseling, Sue was very concerned with obtaining her husband’s support for her career choice. A few sessions into the counseling relationship, she stated that she would not be able to move forward without the support of her husband. She appeared to be extremely reliant on external sources of evaluation and seemed to be characterized by an external locus of control. After she had learned to identify, challenge, and alter her negative career thoughts, Sue came to the conclusion that her over-reliance upon her husband’s views of her career was hindering her individual career development. After reframing her negative career thoughts associated with External Conflict, she stated that she would really like it if her husband supported her decision, but if this were not the case initially, she would hope that he would come around some day. Once Sue decided that she was going to put all of her effort into what would make her happy, she stopped fighting against her husband and went about the task of working towards a satisfying career decision. At this time, her husband began to ease up as well and their relationship improved a great deal.

After Sue had effectively worked through the process of reframing her negative career thoughts, she was ready to use the information she obtained from the Self-Directed Search more effectively. It was as if her negative career thinking, largely centered on Commitment Anxiety and External Conflict, impacted the lens through which she viewed her career options. After effectively working through these negative career thoughts, she was able to recognize the range of opportunities open to her, and work towards making a satisfying career decision.

In light of her high interest and skills in the Social area, occupations in the helping professions seemed to be a good fit for Sue. As a result of the lack of differentiation between her scores in the other five areas of the Holland typology, Sue recognized that there were
likely to be a broad array of options in the Social area that would be desirable to her. She researched a range of options with an open mind, and finally settled on nursing as her first choice.

Summary and Conclusions

At the conclusion of individual counseling, Sue had accomplished a great deal in working towards the achievement of her goals. The goals outlined on her Individual Action Plan (IAP; Sampson Jr. et al., 1996b) were achieved for the most part, and she was successful in accomplishing the various tasks that were continually added to her IAP. Sue did a great deal of research and decided that she would like to pursue a career in nursing. She did a number of informational interviews, followed by a few site visits and shadowing experiences. She found a way to get her hands on any and every piece of information she could find related to the field of nursing, and remained excited about pursuing a career in this area.

Through her work in career counseling, Sue reached the final stage of the career decision-making process, and was planning the education necessary to lead her to her ultimate goal. She terminated counseling satisfied with the progress she had made, having learned quite a bit about the career decision-making process, and having gained a considerable amount of knowledge about herself along the way. However, it is unlikely that all of this would have been possible had the CTI (Sampson, Jr. et al., 1996a) not been integrated with the SDS (Holland, 1994) in the career counseling process.

After effectively working through the problematic negative career thoughts identified by the CTI, Sue was able to successfully use the information obtained from the SDS. After recognizing her difficulty with Commitment Anxiety and External Conflict, she worked towards reframing specific career thoughts in these areas, and altered her metacognitions related to the career decision-making process. This, in turn, enabled her to view her results on the SDS objectively, and identify occupational options that complemented her interests and skills. No longer was she afraid to commit to a career decision, nor was she overly reliant on the views of significant others. As career counselors, there is little more that can we expect or desire from our clients.

References


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