Counselor Self-Efficacy Re-Examined: Components of Racial Identity Development and Impostor Phenomenon Among Counseling Graduate Students of Color

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COUNSELOR SELF-EFFICACY RE-EXAMINED: COMPONENTS OF RACIAL IDENTITY DEVELOPMENT AND IMPOSTOR PHENOMENON AMONG COUNSELING GRADUATE STUDENTS OF COLOR

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Northern Illinois University, 2019
Teresa A. Fisher and Dana T. Isawi, Co-Directors

The focus of this study was to explore the relationships among racial identity development, impostor phenomenon, and counseling self-efficacy among counseling graduate students of color. There is evidence supporting the importance of a client’s racial identity. However, there is limited research exploring the impacts of a counselor’s racial identity and the development of counseling self-efficacy (Tomlinson-Clarke, 2013; Holcomb-McCoy, Hines, & Johnston, 2008; Owens, Bodenhorn, & Bryant, 2010; Crockett & Hays, 2015). The following research questions were used to provide a frame of inquiry for this study and each research question pertained to counseling graduate students of color: (1) What are the relationships among racial identity attitudes, impostor phenomenon, and counseling self-efficacy?; (2) Does the impostor phenomenon predict each component of counselor self-efficacy (microskills, attending to counseling process, dealing with difficult client behaviors, cultural competence, and awareness of values)?; (3) Do elements of racial identity attitudes (assimilation, miseducation, self-hatred, anti-dominant, ethnocentricity, multiculturalist inclusive, and ethnic-racial salience) predict impostor phenomenon? (4) Do racial identity attitudes have indirect effects on counseling self-efficacy, as mediated by impostor phenomenon?
A non-experimental survey design was utilized, and correlational methods were used to determine the separate and collective variations between outcome and predictor variables. The internet-based survey consisted of an informed consent, a demographic questionnaire, the Cross Ethnic-Racial Identity Scale-A (CERIS-A), Clance Impostor Phenomenon Scale (CIPS), and Counseling Self-Estimate Inventory Scale (COSE). A Pearson’s correlation and a series of multiple regression analyses were performed to examine the relationships and predictive effect of racial identity attitudes and impostor phenomenon scores on the outcome of counseling self-efficacy. The results revealed that there was a relationship between racial identity attitudes and counseling self-efficacy among counseling graduate students of color. In addition, the analyses indicated that impostor phenomenon does not predict counseling self-efficacy or racial identity attitudes, but there was a correlational relationship between the counseling self-efficacy subscale (cultural competence) and impostor phenomenon scores. Finally, limitations, recommendations for future research, and implications for counselor training programs were presented.

*Keywords:* Counseling self-efficacy, impostor phenomenon, racial identity development
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IDENTITY DEVELOPMENT AND IMPOSTOR PHENOMENON AMONG
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BY

ERICA DENISE WADE
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A DISSERTATION SUBMITTED TO THE GRADUATE SCHOOL
IN PARTIAL FULFILLMENT OF THE REQUIREMENTS
FOR THE DEGREE
DOCTOR OF PHILOSOPHY

DEPARTMENT OF COUNSELING AND HIGHER EDUCATION

Doctoral Co-Directors:
Teresa A. Fisher
Dana T. Isawi
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DEDICATION

I would like to dedicate my dissertation to my three beautiful children and granddaughter. I also dedicate my dissertation to my loving parents, Leandrew and Mary Wade who were my first educators and who taught me the meaning of dedication, perseverance, and resilience.
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Chapter 1

INTRODUCTION

A primary mission of graduate counselor education programs is training professional counselors to be competent practitioners through the process of developing necessary skills, knowledge, and experiences (American Counseling Association, 2014; Bernard & Goodyear, 2013; CACREP, 2016; Tang, Addison, LaSure-Bryant, Norman, O’Connell, & Stewart-Sicking, 2004). In addition, through both foundational coursework and clinical experiences, counseling programs aim to increase students’ self-efficacy by bridging the gap between coursework and clinical practice (CACREP, 2016). Additionally, skill, knowledge, and confidence has a direct influence on the quality of counseling services provided (Bradley & Fiorini, 1999). An important determinant that influences professional counselors’ ability to assume their role as a professional with success and confidence is self-efficacy. Moreover, self-efficacy is recognized as a measure of development in the counseling field (Bischoff, Barton, Thober, & Hawley, 2002; Mullen, Uwamahoro, Blout, & Lambie, 2015).

Self-efficacy is defined as an individual’s belief in having competence in the ability to succeed in reaching potential ambitions and goals to cope with unexpected problems (Bandura, 1977, 1997, 2001, 2006; Brady-Amoon, 2009; Fife, Bond, & Byars-Winston, 2011). Avery and Meyer (2012) indicated that research expanded Bandura’s theory of self-efficacy by investigating counseling self-efficacy. Counseling self-efficacy is defined as a counselors’ belief about their ability to demonstrate specific counseling skills (Lent, Hill, & Hoffman, 2003). Moreover, examining counseling self-efficacy is based on the significance and benefits of
understanding the relationship between counseling self-efficacy and client outcome (Orlinsky, Grawe, & Parks, 1994; Orlinsky & Howard, 1986).

Within this chapter, a conceptual framework and synopsis of research related to and the relationships among racial identity development, impostor phenomenon, and counseling self-efficacy will be discussed. In addition, gaps in the literature, the purpose of the study, and the research questions will be identified. Moreover, included in this chapter are definitions of important terms and variables and a discussion regarding the potential significance of findings.

Statement of the Problem

A considerable amount of research has examined the importance of counseling self-efficacy in relation to counseling variables such as counselor performance, counselor anxiety, and the supervision environment (see Daniels & Larson, 2001; Larson & Daniels, 1998; Larson, Suzuki, Gillespie, Potenza, Bechtel, & Toulouse, 1992; Leach & Stoltenberg, 1997). Kozina, Grabovari, De Stefano, and Drapeau (2010) emphasized that clinical practice is the main growth area for self-efficacy. Moreover, Mullen et al. (2015) found that the majority of the students’ self-efficacy increased prior to clinical experience. Additionally, McCarthy (2014) found that higher levels of self-efficacy decreased critical self-evaluation that negatively impacted counseling sessions. It is evident that self-efficacy is an important aspect of a counseling trainees’ professional development (Flasch, Bloom, & Holladay, 2016). Counseling literature has historically explored the dynamics between the counselor and the client’s racial identity, but there is limited research exploring the counselor’s racial identity and the development of counseling self-efficacy (Crockett & Hays, 2015; Holcomb-McCoy, Hines, & Johnston, 2008; Owens, Bodenhorn, & Bryant, 2010; Tomlinson-Clarke, 2013).
As mentioned, factors such as performance, counselor anxiety, and the supervision environment can impact counseling self-efficacy (Crockett & Hays, 2015; Daniels & Larson, 2001; Larson & Daniels, 1998; Larson et al., 1992; Leach & Stoltenberg, 1997). Impostor phenomenon is another construct that empirically has the ability to impact counseling self-efficacy, which impostor phenomenon is linked to influencing an individual’s perception of self (Crook, 2010; Clance & Imes, 1978; Daniels & Larson, 2001; Larson & Daniels, 1998; Larson et al., 1992; Leach & Stoltenberg, 1997). Impostor phenomenon (IP) occurs when high achieving individuals are marked by an inability to internalize their accomplishments, a persistent fear of being exposed as a fraud, which leads to a significant amount of fear often associated with a focus on impression management and self-monitoring behaviors (Kolligian & Sterberg, 1991; Sakulku & Alexander, 2011; Clance & Imes, 1978; Cowman & Ferrari, 2002; Kets de Vries, 2005). In addition, a component of self-efficacy is self-concept, which is based on the global perception of one self and one’s self-esteem, similar to the constructs of IP (Zimmerman, 2000). Tang et al. (2004) stated that understanding the occurrence of IP among counselors and the influence of this phenomenon on counselor competency could have implications for graduate training programs. Larson et al. (1992) indicated that IP can directly affect counseling trainees’ perception of their counseling abilities and can adversely affect their performance.

This study is deeply rooted in the foundation of counseling self-efficacy by investigating issues surrounding multicultural issues (race/ethnicity) and self-concept/self-perception (impostor phenomenon and counseling self-efficacy) issues among counseling graduate students of color. Although researchers have explored either one or both of these constructs (i.e., counseling self-efficacy and impostor phenomenon) (Peteet, Montgomery, & Weekes, 2015),
there is limited research exploring counseling self-efficacy as it relates to factors of IP and racial identity development among counseling graduate students of color. Thus, results from this research will aid faculty, administrators, graduate counseling programs, and supervisors in providing culturally sensitive and relevant support for counselors from varying academic and racial backgrounds. For the purpose of this study, graduate student of color is defined as an individual who is attending a graduate counseling program (i.e., counseling psychology, clinical psychology, clinical mental health, counseling, counselor education and supervision, rehabilitation, marriage and family, and school counseling) at a college or university, and who self-identifies as either African, Black or African American, American Indian or Alaskan Native, Asian or Asian American, Hispanic or Latinx, Native Hawaiian or Pacific Islander, Middle Eastern or Arab American, or two or more races (i.e., multiracial or biracial).

**Conceptual Framework**

To understand the relationships among racial identity development, impostor phenomenon, and counseling self-efficacy among counseling graduate students of color, Racial Identity Development Theory (Cross, 1971, 1976, 1978, 1991; Cross, Flagen-Smith, Worrell, & Vandiver, 2002; Cross & Vandiver, 2001; Cross, Flagen-Smith, Vandiver, & Worrell, 2010), Impostor Phenomenon Theory (Clance & Imes, 1978), and Self-Efficacy Theory (Bandura, 1977, 1997, 2001, 2006) will be used to guide this research.

**Racial Identity Development Theory**

Racial identity development theory is about personal growth and a lifelong process that matures over time, and is affected by personal, interpersonal, sociopolitical, and cultural environments (Wijeyesinghe & Jackson, 2012). Racial identity is viewed as a protective factor
and supports self-esteem, but when individuals of color experience negative messages, anxiety or feelings of inferiority, their perception of self-decreases (Cokley et al., 2013; Greene, Way, & Pahl, 2006; Rowley, Sellers, Chavous, & Smith, 1998). Conversely, anxiety, poor college adjustment, and feelings of inferiority have been associated with a negative racial identity (Anglin, & Wade, 2007; Munford, 1994; Parham & Helms, 1985). As post-secondary institutions become increasingly diverse, models of racial identity development allow for valuable tools in understanding the needs of individuals and groups (Wijeyesinghe & Jackson, 2012). However, by exploring racial identity development, counseling self-efficacy and IP, there could be a greater understanding of the graduate counseling students experience while pursuing a degree in higher education. Moreover, racial identity has been highlighted as a specific resilience factor that may operate to influence the association between impostor phenomenon and psychological adjustment (e.g., Bynum, Best, Barnes, & Burton, 2008; Hoggard, Byrd, & Sellers, 2015; Neblett, Shelton, & Sellers, 2004; Sellers et al., 2003, 2006). As such, given the protective dimensions of racial identity development associated with positive self-concept and increased self-esteem, one might imagine that racial identity development could bolster self-concept and attenuate feelings of intellectual incompetence (Rowley et al., 1998). However, for individuals of color to experience success, it must be salient in self (Harvey, 1981). Salience is the premise of being noticed or deemed important from a societal perspective (Harvey, 1981). From a conceptualization perspective, racial identity is a developmental process and is based on people’s perceptions and sociopolitical influences. Therefore, this theory is important for counseling graduate students of color as it creates an opportunity to bring awareness to the existence of race
and the diverse ways that counseling graduate students of color experience racial realities (Patton, McEwen, Rendón, & Howard-Hamilton, 2007).

**Impostor Phenomenon Theory**

Similar to racial identity development, individuals experiencing impostor phenomenon (IP) will feel inadequate and consider their feelings or reactions due to other factors, such as feelings of inferiority, lack of knowledge or fear (Ahlfeld, 2009). Additionally, IP is based on thoughts and when individuals internalize feelings of self-doubt and distress this will impede their ability to succeed. However, high self-esteem tends to lower levels of IP and individuals who report higher self-regard may feel more confident about their abilities (Levin, Van Laar, & Sidanius, 2003; Sonnack & Towell, 2001). Bischoff, Barton, Thobor, and Hawley (2002) found that feelings of inadequacy and fraudulence diminished as the trainees moved into further stages of counselor development. By understanding the impact of impostor phenomenon on self-efficacy this can add to the available psycho-educational information that could potentially aid counselor growth and counseling performance (Ahlfeld, 2009). Additionally, having a greater understanding and awareness of imposter phenomenon could help counselors fulfill their potential by increasing their effectiveness in counseling sessions (Ahlfeld, 2009). Furthermore, Murakami-Ramalho, Piert, and Militello (2008) and Ewing et al., (1996) found that IP is particularly relevant among racial minorities in higher education. Therefore, by incorporating this theory, it provides additional information that could contribute to the impacts of self-perception (Cokley, McClain, Enciso, & Martinez, 2013) and the experiences of counseling graduate students of color.
Self-Efficacy Theory

Bandura (1977) explored self-efficacy and indicated that self-reflection is how people evaluate and alter their own thinking and behavior. Additionally, Bandura (1977) referenced that to understand human functioning it is based on behavior, personal factors (i.e., cognitive and internal factors), and environmental; a triadic perspective. It was referenced that beginning counselor trainees feared that clients will recognize their lack of experience, personalize the negative counseling experiences as incompetence, and as a result, their fears and beliefs about incompetence led the trainees to view themselves as frauds (Bischoff et al., 2002). However, Larson et al. (1992) concluded that a counselor’s perceptions of self-efficacy will change across developmental levels. Exploring the impact of self-efficacy beliefs is useful, particularly with counseling graduate students of color, as this theory, discusses how self-efficacy beliefs can impact individuals in that the experiences of anxiety and stress triggers the fear of being a failure. Indicating that self-efficacy influences academic achievement, performance, and motivation, which is similar to racial identity development and impostor phenomenon.

Together, these theories provide an approach to understanding the relationship among racial identity development, impostor phenomenon, and counseling self-efficacy among counseling graduate students of color. Additionally, by examining each of the variables (i.e., racial identity development, impostor phenomenon, and counseling self-efficacy) will allow for an increased awareness about racial experiences and reveal how these relationships impact the developmental process of becoming a counselor.
Purpose of the Study

The purpose of this study was to explore the relationships among racial identity development, impostor phenomenon, and counseling self-efficacy among counseling graduate students of color. The following research questions were used to provide a frame of inquiry for this study and each research question pertained to counseling graduate students of color:

1. What are the relationships among racial identity attitudes, impostor phenomenon, and counseling self-efficacy?

2. Does the impostor phenomenon predict each component of counseling self-efficacy (microskills, attending to counseling process, dealing with difficult client behaviors, cultural competence, and awareness of one’s own values)?

3. Do elements of racial identity attitudes (assimilation, miseducation, self-hatred, anti-dominant, ethnocentricity, multiculturalist inclusive, and ethnic-racial salience) predict impostor phenomenon?

4. Do racial identity attitudes have indirect effects on counseling self-efficacy, as mediated by impostor phenomenon?

Significance

Exploring possible outcomes resulting from this study would be that institutions or counseling departments would begin to realize the importance of discussing and researching the role of racial identity development and impostor phenomenon in relation to counseling self-efficacy. Specifically, when students of color or counselor educators gain awareness regarding impostor phenomenon, counseling self-efficacy, or racial identity development constructs, feelings of validation or normalization will occur and, as a result, enhance the professional
growth and competency of counselors-in-training (CIT). Addressing and acknowledging these elements will enhance the counseling profession. In addition, examining fears (or other constructs) that may contribute to the developmental journey could support academic success, thus increasing retention and matriculation.

Another significant outcome from this study would be the cross-cultural considerations for supervisors and training in relation to levels of racial identity development, IP, and CSE awareness. This pertains to relevance of the supervisor’s role in working with CIT and the impact on a counselor’s development. For example, results may suggest exploring racial identity development, IP, and CSE constructs earlier in training will support developmental growth and learning. Additionally, exploring the impact of mentoring on levels of IP and CSE among students of color in graduate counseling programs will allow for counselor educators to utilize interventions or assessments to better understand their students or to provide more effective support through training and/or their developmental journey. Furthermore, the goal is to re-evaluate curriculum and training programs within master and doctoral counseling programs to develop effective strategies for students of color regarding CSE. From a universalistic approach to educational research, the researcher will evaluate the potentiality of the Cross Ethnic-Racial Identity (CERIS-A), Clance Impostor Phenomenon (CIP), and Counseling Self-Estimate Inventory (COSE) scales to determine if they are valid across different ethnic and cultural backgrounds (Clance, 1985; Clance & Imes, 1978; Lent et al., 2003; Padilla, 2004).

Summary

The intent of this study was to explore the relationships among racial identity development, impostor phenomenon, and counseling self-efficacy within the field of counseling.
This study will utilize a survey design to collect information based on the variables referenced, and a correlational design will be used to assess relationships and to build on the existing quantitative literature (Balkin & Kleist, 2017). Overall, studies have examined the relationship of self-efficacy and impostor phenomenon, but unexamined questions identify how these constructs additionally relate to a counselor’s racial identity.

Definition of Terms

Counseling self-efficacy: A counselor’s belief about their ability to demonstrate specific counseling skills (Lent, Hill, & Hoffman, 2003).

Ethnic identity: Identity based upon an individual’s self-concept in having a common bond with a distinctive ethnic group of people because of similar experiences in culture (i.e., shared beliefs, practices, and values), ancestry (i.e., generational descendants, or kinship), and history (i.e., record of inherited past; Cokley, 2007; Luhman, 2002; Jiménez, 2010).

Ethnicity: A characteristic of an individual or ethnic group of people based upon their ancestry, history, and cultural distinctiveness (i.e., native language, traditions, values, customs, and beliefs; Cokley, 2007; Helms, 2007; Jiménez, 2010; Yoon, 2011).

Graduate student of color: An individual who is attending a graduate counseling program (i.e., counseling psychology, clinical psychology, clinical mental health, counseling, counselor education and supervision, rehabilitation, marriage and family, and school counseling) at a college or university who self-identifies as either African, Black or African American, or American Indian or Alaskan Native, or Asian or Asian American, or Hispanic or Latinx, or Native Hawaiian or Pacific Islander, Middle Eastern or Arab American, or two or more races (i.e., multiracial or biracial).
Impostor phenomenon: The inability of high-achieving individuals to internalize their accomplishments, and their persistent fear of being exposed as a fraud (Clance & Imes, 1978).

Race: An individual or group of people who share genetic physical appearances through ancestral heritage, shared commonality of history (social and cultural influences), and/or geographic origin of birth (Luhman, 2002; Cokley, 2007; Jiménez, 2010).

Racial identity: Individual identity based upon an individual’s perception of commonality in a specific racial group by ancestral heritage, culture, place of origin, and appearance (i.e., skin color, hair; Cokley, 2007; Luhman, 2002).


Chapter 2

REVIEW OF LITERATURE

The purpose of this study was to explore the relationships among racial identity development, impostor phenomenon, and counseling self-efficacy among counseling graduate students of color. The literature review will discuss identity formation through the racial/cultural identity development model and discuss the gap in literature regarding the relationships among racial identity development, impostor phenomenon, and counseling self-efficacy.

Counseling self-efficacy

Bandura (1977) was interested in the theory of self-efficacy from a developmental perspective. Bandura (1977) referenced that self-efficacy beliefs impact one’s thoughts, motivation, action, affect, and one’s environment. His research defined that self-efficacy was emphasized by how a person’s personality is developed, which was through the role of observational learning, social experience, and reciprocal determinism (Bandura, 1977). Moreover, his research suggested that parents, peers, and institutions play major roles in the development of self-efficacy and provide the foundation on the importance of self-efficacy as it contributes to the influence of psychological states, behavior, and motivation (Bandura, 1977; 2001).

Individuals with a weak notion of self-efficacy are inclined to think that tasks seem more difficult than they are, and these thoughts are grounds for feelings of failure, similar to IP (Van Dinther et al., 2011), whereas a strong notion of self-efficacy creates feelings of tranquility and a challenge when faced with an arduous task (Van Dinther et al., 2011). In addition, Bandura
(1977) argued that self-efficacy plays a role within human agency, where it is socially rooted and operates within sociocultural influences that individuals are viewed as products of their social systems.

For more than two decades, Bandura’s (1986) self-efficacy theory, a core component of social cognitive theory (SCT), has been used as a conceptual framework to address experiences that may influence students’ academic achievement, performance, motivation, persistence and confidence. Originally, Bandura theorized the concept of social learning as being influenced by a behavioral approach to human action (Grusec, 1992). Bandura (1977) viewed human functioning as a transactional process; cognitive, behavioral, and environmental events all acting as interacting determinants that affect one another in a reciprocal manner. As Bandura’s (1977) research progressed, his approach shifted to more of an examination regarding self-regulative capacities and self-efficacy; thus, relabeling his research as social cognitive theory (SCT; Bandura, 1977). Within SCT there is an immense value attached to self-reflection as a human capability, where this form of self-referent thought is how people evaluate and alter their own thinking and behavior (Bandura, 1986; Van Dinther, Dochy, & Segers, 2011). Included in self-reflection is perceptions of self-efficacy, that is, beliefs in one’s capabilities to organize and execute the course of action required to manage prospective situations (Bandura, 1977).

According to SCT, there are four main sources of information that create students’ self-efficacy: performance accomplishments, vicarious experiences, social persuasions, and physiological and psychological states (Van Dinther, Dochy, & Segers, 2011; Bandura, 1977). Performance accomplishments are authentic successes in dealing with a situation (Van Dinther, Dochy, & Segers, 2011). These experiences are the most powerful source of creating a strong sense of efficacy because they provide students with authentic evidence that they have the
capability to succeed at a task (Palmer, 2006). Meaning, successes build a strong sense of self-efficacy and failures lower it, but success requires overcoming obstacles and difficult situations through maintained effort and persistence (Bandura, 1977; Van Dinther, Dochy, & Segers, 2011). The second source of creating self-efficacy is through vicarious (observational) experiences provided by social models (Bandura, 1977). Students obtain information about their own capabilities by observing others (Bandura, 1977). Although vicarious experiences have a weaker effect than performance-based information, people who are uncertain about their capabilities are more sensitive to failure (Bandura, 1977). However, if significant others communicate their confidence in someone’s capabilities rather than express doubt, it is easier to create and persist a sense of self-efficacy; especially under difficult circumstances, this is called social persuasion (the third source that helps students develop beliefs of self-efficacy; Van Dinther, Dochy, & Segers, 2011). In addition, people draw from their physiological, emotional, and mood states, the fourth source of efficacy information (Van Dinther, Dochy, & Segers, 2011). Moreover, symptoms such as anxiety, stress and tension could signify failure and debility (Van Dinther, Dochy, & Segers, 2011), whereas a positive mood state strengthens someone’s self-efficacy. Additionally, people rely in part on these states in assessing their capacities by perceiving and interpreting information (Pajares, 1997; Van Dinther, Dochy, & Segers, 2011). As people have the capacity to modify their own thinking and feeling, students with a high sense of self-efficacy can view a state of tension as energizing in the face of a performance, whereas those who have self-doubts interpret their tension as debilitating (Van Dinther, Dochy, & Segers, 2011). Self-efficacy information that arises from these four sources does not influence self-efficacy directly, for it is cognitively appraised (Bandura, 1977; Van Dinther, Dochy, & Segers,
During cognitive efficacy appraisal, people weigh and combine the contributions of personal and situational factors such as the difficulty of the task, the effort they spend, the support received, the outcome of the task, and failures and successes (Schunk, 1989). These interpretations people make are because of the activities and performances that provide information on which self-efficacy is based (Pajares, 1997). Moreover, researcher Earley (1994) stated that SCT has cultural limits and that the influence of various sources of information is greater or lesser depending on differing cultural values. Each section previously, discussed the influence of how counselors perceive themselves and what factors may impact skill development and knowledge, whereas, the next section will discuss the developmental component in relation to self-efficacy.

In 1982, Bandura found that self-efficacy increases performance levels and decreases anxiety levels in counselors. Self-efficacy is defined as an individual’s perceived belief in having self-competence in the ability to act on completing a task, succeed in reaching potential ambitions and goals, and the ability to cope with unexpected problems (Bandura, 1977, 1997, 2001, 2006; Brady-Amoon, 2009; Fife, Bond, & Byars-Winston, 2011), whereas in counselor education, self-efficacy has been examined to explore career self-efficacy, counselor competency, and the role of supervision in supporting the development of a counselor’s self-efficacy (Smith, 2015; Leach, Stoltenberg, McNeill, & Eichenfiled, 1997; Meyer, 2012; Tang et al., 2004; Johnson, Baker, Kopala, Kiselica, & Thompson, 1989). When examining self-efficacy, the most of the literature focuses on academic achievements [i.e., academic self-efficacy] (Awad, 2007; Kim, 2014; Okech & Harrington, 2002; Woodroffe, 2011). Similarly, literature has also explored academic self-efficacy based on factors, such as impostor phenomena or racial identity

**Counseling Self-Estimate Inventory Scale (COSE).** For the past three decades, more than ten instruments were developed to empirically examine counseling self-efficacy (Larson & Daniels, 1998). Examples include instruments that focused on counseling self-efficacy and individual counseling skills (i.e., Interpersonal Skills Efficacy Scale, ISES; Munson, Zoerink, & Stadulis, 1986); Counselor Behavior Evaluation-Self-Efficacy (Munson, Stadulis, & Munson, 1986); Counseling self-efficacy Scale (Johnson, Baker, Kopala, Kiselica, & Thompson, 1989); and Counseling Self-Estimate Inventory (COSE; Larson et al., 1992); Counseling Activity Self-Efficacy Scale (CASES; Lent et al., 2003), and other instruments that focused on group counseling skills (i.e., Counseling self-efficacy Scale; COSES; Melchert, Hays, Wiljanen, & Koliczek, 1996) or domains that counselors or psychologists use while providing support to clients (i.e., case management, group and family interventions, etc.); Self-Efficacy Inventory (Friedlander & Snyder, 1983). Despite the extensive variations of counseling self-efficacy scales, the researcher explored the COSE and the CASES based on their similarities and their focus on Bandura’s self-efficacy theory. Specifically, the CASES instrument was developed to tap a students’ perception of their counseling capabilities (Lent et al., 2003), and the COSE was designed to apply Bandura’s self-efficacy theory to the counseling process (Larson et al., 1992). In addition, the CASES focus on measuring self-efficacy relative to counselor activity and self-
perceived capability (Lent et al., 2003), whereas the COSE was intended for the use in training, supervision, and research regarding the development of self-efficacy (Larson et al., 1992).

In comparison, the COSE and the CASES share overlapping dimensions, but items are worded differently. Also, the COSE incorporates four items that address cultural competency (Lent et al., 2003), whereas the CASES has only two items under the counseling challenges subscale that assesses participants’ confidence in working with clients who are different from them (e.g., race, ethnicity, gender, age, and social class) and who have core values or beliefs that conflict with their own religion or gender roles (Hanson, 2006). Furthermore, both the COSE and the CASES exhibit adequate internal consistency reliability, test-retest reliability, and construct validity (Hanson, 2006). However, the COSE strongly correlates with self-reflective variables, such as perceptions of fraudulence (Alvarez, 1995) and self-concept (Larson et al., 1992), which is specific to this study. Therefore, the COSE will be used.

Racial identity development and counseling self-efficacy. Research is limited in terms of the exploration between race and self-efficacy, however, the primary focus has been exploring the relationship among academic achievements, self-efficacy, and race (Felder, Stevenson, & Gasman, 2014; Buchanan & Selmon, 2008; Awad, 2007; Okech & Harrington, 2002). For example, Fordham and Ogbu (1986) suggested that success in academic domains is related to low identity salience for African American students, and Phinney (1990) and Ward (1990) referenced that high-achieving African American students may gain strength and affirmation as a result of their racial identity. Despite the mixed views about race and self-efficacy, research has not examined the relationship between racial identity development and counseling self-efficacy. Additionally, research has focused on binary attributes (i.e., White or Black) when examining
race and self-efficacy, and there is limited information exploring self-efficacy among other racial/ethnic identities, such as Latino(a), Asian, Asian American, Native American, etc. (Okech & Harrington, 2002).

Impostor Phenomenon

Impostor Phenomenon (IP) is defined as the inability of high-achieving individuals to internalize their accomplishments and their concurrent, persistent fear of being exposed as a fraud. IP can lead to significant amount of distress and maladaptive behavior (Clance & Imes, 1978; Kets de Vries, 2005; Harvey & Katz, 1985; Kolligan & Sternberg, 1991; Sonnak & Towell, 2001). Additionally, individuals with IP believe that success is due to external factors, alluding to the idea that IP is often associated with a focus on impression management and self-monitoring behaviors (Clance & Imes, 1978; Kolligan & Sterberg, 1991; Cowman & Ferrari, 2002; Kets de Vries, 2005; Sakulku & Alexander, 2011).

Clance (1985) indicated that IP is evidenced by six characteristics: 1) the impostor cycle, 2) the need to be special or to be the very best, 3) superman/superwoman aspects, 4) fear of failure, 5) denial of competence and discounting praise, and 6) fear and guilt about success. Research shows that not every individual will experience each of these characteristics and results may vary, but a minimum of two characteristics should be evident (Sakulku & Alexander, 2011). Clance (1985) indicated that the impostor cycle is the most important characteristic of IP. The following section will describe each characteristic.

The impostor cycle is initiated due to an achievement related task, such as schoolwork or professional task, and impostors often experience uncontrollable anxiety due to their fear of failure (Sakulku & Alexander, 2011). To manage their anxiety, they will either over prepare or
procrastinate (Sakulku & Alexander, 2011). During this experience individuals may be successful in accomplishing their task, but there is an inability to receive the accolades due to their own self-doubt (Sakulku & Alexander, 2011). Burnout, emotional exhaustion, loss of intrinsic motivation, poor achievement including guilt and shame about success are reinforced by repetitions of the impostor cycle (Chrisman et al., 1995; Clance, 1985; Clance & Imes, 1978).

The need to be special-to be the very best is the result of comparing oneself to peers (Sakulku & Alexander, 2011). Clance (1985) referenced that impostors are used to being at the top of their class, but in college, impostors begin to believe that their talents and abilities are not atypical and when they do not excel develop a belief that they are stupid. Clance (1985) referenced that the superwoman/superman characteristic is inter-related with the need to be special, to be the very best, and refers to perfectionistic tendencies. For example, impostors expect to do everything flawlessly and, as a result, set high and almost impossible standards as a goal or for self-evaluation (Clance & Imes, 1984). Whereas, fear of failure occurs when impostor individuals experience elevated levels of anxiety when exposed to an achievement-related task and fear failure is possible (Sakulku & Alexander, 2011). Moreover, impostors believe that making mistakes and not performing at the highest standard precipitate’s feelings of shame and humiliation and that fear of failure is an underlying motive of most impostors (Clance, 1985).

The characteristic denial of competence and discounting of praise references that impostors are unable to internalize their success and accept praise as valid (Sakulku & Alexander, 2011), emphasizing that success or achievement is the result of external factors and there is an unwillingness to accept praise (Thompson et al., 1998; Chae, Piedmont, Estadt, & Wicks 1995; Topping & Kimmel, 1985; Harvey, 1981). In these situations, the characteristic fear
and guilt of success is related to negative consequences of success, meaning impostors are overwhelmed by guilt about being different and worry about being rejected by others (Sakulka & Alexander, 2011; Clance, 1985). Apart from having a fear of rejection, impostors are afraid that their success may lead to higher demands and greater expectations from others (Sakulka & Alexander, 2011). Impostors feel uncertain about their ability to maintain current levels of performance and are reluctant to accept additional responsibility, which could reveal their intellectual phoniness (Sakulku & Alexander, 2011; Clance, 1985).

Initially, IP was believed to only affect professional white women (Clance & Imes, 1978), but Harvey (1981) broadened the understanding by indicating that there are no gender differences in the prevalence of IP and that anyone can view themselves as an impostor if they fail to internalize their successes. Moreover, Harvey and Katz (1985) acknowledged that IP consisted of three core factors: (1) the belief that he/she has fooled other people; (2) fear of being exposed as an impostor; and (3) inability to attribute own achievement to internal qualities such as ability, intelligence, or skills. Additionally, Harvey and Katz (1985) indicated that by definition, all three factors must be apparent to be considered an impostor.

Bussotti (1990) coined the term “impostorism” to describe the psychological experience of individuals who perceive themselves as intellectual frauds and fear of being exposed as impostors. Researchers have identified factors contributing to the emergence of impostorism, such as perfectionism and family environment (Ferrari & Thompson, 2006; Thompson et al., 1998; Clance, 1985). Additionally, Bussotti (1990) acknowledged that impostor phenomenon occurs in both genders and across diverse cultures. Furthermore, Gravois (2007) estimated that about 70% of people (both men and women) will experience impostor phenomenon at some
point in their life. In addition, impostorism acknowledges the inclusivity of all individuals, but in previous research, impostorism or impostor fears is a term used to describe psychological experiences of feeling like a fraud or exposed as an impostor (Thompson et al., 1998).

Subsequently, Kolligian and Sternberg (1991) included the term Perceived Fraudulence to describe IP to avoid confusion between those who experienced the impostor phenomenon due to fear and being considered a fraud. Additionally, researchers referenced that impostorism is a self-perception of fraudulence, which is a combination of cognitive and affective components rather than an emotional disorder (Kolligian & Sternberg, 1991; Leary, Patton, Orlando, & Funk, 2000). Moreover, Perceived Fraudulence further emphasizes a vigilant practice of impression management and self-monitoring in impostors who are concerned about their self-worth and social image (Kolligian & Sternberg, 1991).

For this study, the term IP is defined as an intense self-perception that one’s achievements are undeserved or an internal experience of intellectual phoniness and unable to internalize success (Clance & Matthews, 1985; Sakulku & Alexander, 2011). Additionally, IP will not be viewed as a pathological disease, but rather it interferes with the psychological well-being of a person and influences feelings of self-doubt and anxiety (Sakulku & Alexander, 2011).

**Clance Impostor Phenomenon Scale (CIPS).** Three scales were developed to provide empirical data supporting the identification of impostor phenomenon: the Clance Impostor Phenomenon Scale (CIPS; Clance, 1985), the Harvey Impostor Phenomenon Scale (HIPS; Harvey, 1981), and the Perceived Fraudulence Scale (PFS; Kolligan & Sternberg, 1991; Kwan, 2015). Holmes et al. (1993) referenced that there were possible discrepancies in the IP literature
due to methodological flaws or problems. For example, Clance and Imes (1978) used a limited sample in their initial formulation of IP, such that subjects from the study could have been expected to be prone to impostor characteristics (Holmes et al., 1993). Moreover, the discrepancies could have been due to studies utilizing different instruments to measure IP (Holmes et al., 1993). Harvey (1981) developed the Harvey Impostor Phenomenon Scale (HIPS) to standardize the measurement of IP. Clance (1985) later developed a new instrument to incorporate the clinically observed attributes or feelings not addressed in the HIPS. Holmes et al. (1993) examined both the CIPS and the HIPS to determine if each scale was reliable or can distinguish between impostors or nonimpostors. The study determined that the Clance scale is a more sensitive instrument based on an ANOVA analysis (Holmes et al., 1993). Moreover, the study indicated that both scales can clearly differentiate between both clinically and non-clinically identified impostors (Holmes et al., 1993). However, in contrast, it was evident that the Clance scale is a more sensitive measure of IP, and the HIPS did not prove to differentiate impostors from nonimpostors (Holmes et al., 1993). Chrisman, Pieper, Clance, Holland, and Glickauf-Hughes (1995) speculated that the failure of the HIPS to differentiate could be due to the wording of the HIPS, where respondents may have felt they would be negatively perceived and might inhibit accurate self-reporting. Chrisman et al. (1995) examined the Perceived Fraudulence (PFS) scale (Kolligian & Sternberg, 1991) and CIPS. PFS and CIPS are comparable in the sense of similar internal consistency reliabilities (Chrisman et al., 1995). Moreover, PFS is a fifty-one item Likert-type scale that evaluates impostor characteristics from a diagnostic category and uses the term Perceived Fraudulence (Chrisman et al., 1995). The CIPS will be used for this study because it does not view IP from a diagnostic perspective, it is shorter length
and easier to administer, and the CIPS is judged to be a more useful instrument for clinical and research purposes (Chrisman et al., 1995).

**Impostor Phenomenon and Counseling self-efficacy.** Impostor phenomenon has been examined in professions, such as engineering, marketing, medical, dental, nursing, pharmacy students, and physician assistants (Fried-Buchalter, 1997; Gibson-Beverly & Schwartz, 2008; Henning, Ey, & Shaw, 1998; Pierce, 2011; Prata & Gietzen, 2007), however, there is limited research in examining the relationship between impostor phenomenon and counseling. For counselors there is an importance with being able to identify counseling skills and to be confident in the ability to use those skills because it has a direct influence on the quality of counseling services they provide (Bradley & Fiorini, 1999). To be efficacious, counselors must orchestrate and continuously improve multiple skills to manage everchanging circumstances in a session (Bandura 1982).

Yet, there are multiple factors that can influence a person’s perception of themselves. Larson et al. (1992) indicated that IP can directly affects trainee’s perceptions of counseling abilities, which could impact their experience during training; stating that a counselor’s self-efficacy can adversely affect performance. However, literature states that as a trainee develops, their feelings of doubt will dissipate and that IP feelings are more prominent among beginning counselors (Bischoff, Barton, Thober, & Hawley, 2002). Additionally, beyond the theoretical schema, Larson et al. (1992) discussed how a counselor’s perceptions of self-efficacy changes across developmental levels and that advanced trainees display higher efficacy expectations than first- or second-year trainees. Furthermore, counselor who perceives him or herself to be an impostor is likely to judge his or her work as less than adequate, especially as compared to
observations of others, and to focus on the criticism rather than the praise provided by supervisors and peers (Alvarez, 1995).

Despite the presence of the sources of counseling self-efficacy information (i.e., numerous hours of counseling, observation, and supervision), the counselor with perceptions of fraudulence would not feel confident about his or her ability, experience considerable anxiety related to performance and presentation, and approach each counseling situation as if they will fail (Alvarez, 1995). Additionally, the self-perceived impostor's experience of high-performance anxiety, perfectionism, and a critical attitude toward their performance would interfere with the development of counseling self-efficacy (Alvarez, 1995). Future research comparing the occurrence of imposter feelings among students in different human service programs is needed to determine if the imposter phenomenon is more problematic in specific training programs (Bischoff, Barton, Thober, & Hawley, 2002).

**Racial identity development and impostor phenomenon.** There is limited research exploring racial identity development and IP (Kwan, 2015). Additionally, there is limited discussion about the impact of IP and racial identity development among counseling graduate students of color. This section will explore the implications of racial identity development as it relates to IP.

Several studies have indicated that racial identity is a protective factor that may bolster positive coping responses (Cokley et al., 2013; Greene, Way, & Pahl, 2006; Rowley, Sellers, Chavous, & Smith, 1998). Having a positive racial identity has been linked to lower levels of stress, depressive symptoms, and increased psychological well-being (Sellers, Copeland-Linder, Martin, & Lewis, 2006). Conversely, anxiety, poor college adjustment, and feelings of inferiority
have been associated with a negative racial identity (Anglin, & Wade, 2007; Munford, 1994; Parham & Helms, 1985). The most impactful correlate of positive racial identity is high self-esteem.

Subsequently, two studies were conducted to examine the association between racial/ethnic identity and the impostor phenomenon. Cokley et al. (2013) believed that people of color were susceptible to the impostor phenomenon, similar to the various studies conducted on middle- and upper-middle class professional White women (p. 85). Cokley et al. (2013) predicted that different minority groups experienced different levels of the impostor phenomenon. One of their predictions was the association that individuals with lower academic performance would be more likely to develop the impostor phenomenon. Cokley et al. (2013) found that Asian Americans experience the impostor feelings more than African Americans and Latino(a) Americans. Additionally, they found that Asian Americans show perfectionistic tendencies, dealing with academic stress from the model minority and parental expectations. The model minority may in fact be more likely to develop impostor phenomenon because some Asian Americans felt that they did not have the intellectual abilities to fulfill this stereotype (Cokley et al., 2013). Additionally, most studies exploring IP focus on the issue of racial differences in self-esteem, whereas African Americans do not have low self-esteem as compared to White Americans even though African Americans experience low social status, economic and social discrimination in American society (Porter & Washington, 1993, 1979). As referenced racial identity components can contribute to the perception of self and with the increased pressure to be accepted, the elements of IP can increase students’ doubt and affect their training experience.
Although studies of IP in African American populations are limited, the literature includes a handful of studies specifically examining IP among African American students attending predominantly White institutions (PWIs). For example, Ewing, Richardson, James-Myers, and Russell (1996) found academic self-concept to be a significant inverse predictor of IP among African American graduate students attending a PWI. In addition, Austin, Clark, Ross, and Taylor (2009) found that IP partially mediated the association between survivor guilt and depression in a sample of African American college students attending a PWI. More recently, Peteet, Montgomery, and Weekes (2015) found that IP positively predicted psychological distress and were inversely related to self-esteem among African American students attending a PWI. Although relatively sparse, these and other related studies (e.g., Lige, Peteet, & Brown 2017; McClain et al., 2016) indicate that IP is a pertinent and psychologically harmful experience among African American college students.

Peteet et al. (2014) studied the impostor phenomenon within an African American context. Their study examined the relationship among the impostor phenomenon, psychological distress, self-esteem issues within African American college students, and the feeling of being “the other” triggered impostor feelings because of its relation to self-esteem (Peteet et al., 2014). The theory of othering posits that societal norms and expectations predict who is made to feel and be powerful versus who is made to assume a place of inferiority (Spivak, 1985). Othering not only serves to mark and name those thought to be different from oneself, but also is a process through which people construct their own identities in reference to others (Weis, 1995). By talking about individuals or groups as other, one magnifies and enforces projections of apparent differences from oneself (Fine, 1994). Moreover, othering practices can, albeit sometimes
unintentionally, serve to reinforce and reproduce positions of domination and subordination (Fine, 1994). These experiences can contribute to the development of minority status stress. Minority status stress is the result of compounded experiences of racism, discrimination, and feelings of inadequacy due to academic qualifications being questioned (Smedley, Myers, & Harrell, 1993). These stressors may leave some students with a lack of confidence in their academic ability and themselves as well as feelings of isolation and not belonging to the collegiate community (Fries-Britt & Griffin, 2007).

Austin et al. (2009) and Ewing et al. (1996) referenced that the knowledge and implications of being a student of color may be associated with feelings of IP. It is unclear how often a student of color experiences IP or how often they believe they are or are not capable of organizing or executing an action for a prospective situation (Ahlfeld, 2009). However, students of color may feel more anxious and apprehensive about their performance compared to dominant students, which can lead to an increase in IP experiences. Virtually all people can identify goals they want to accomplish and things they want to change or want to achieve, however, putting plans into action at times can be difficult to execute. External barriers exist that can impact an individual (e.g., financial, familial), but internal factors can promote resiliency to overcome external obstacles, such as self-efficacy. Two major dimensions that are positively correlated with self-perception are self-esteem and personal efficacy (Buchanan & Selmon, 2008).

**Racial Identity Development**

From the psychological, sociological, social psychological, and human ecological standpoint, racial identities matter in the study of human development (Renn, 2012). Erikson (1950) influenced the constructs of identity development models (Worrell, 2015) and the history
of slavery, segregation, and the Civil Rights Movement logically informed racial identity models for African Americans and European Americans. Erikson (1959) defined and elaborated on Freud’s concept of ego identity (i.e., psychosocial identity). Erikson (1959) saw that identity as a persistent sameness with oneself and a persistent sharing of an essential character with others. As racialized beings, people then develop both selfsameness in terms of racial identity and a shared racial identity with others of the same group (Renn, 2012; Erikson, 1959). Additionally, an individual’s identity becomes stronger as one resolves each crisis and becomes more committed to one’s identity (Erikson, 1959). Building on Erikson’s model, Marcia (1966) proposed four ego identity statuses (i.e., foreclosure, moratorium, diffusion, and identity achievement; p. 550). Marcia (1966) referenced that racial identity is achieved from exploration or crisis related to racial identity and commitments made to having and expressing racial identity. Marcia’s (1996) model has criticized that the statuses are not adequately inclusive of ethnically diverse populations (Sneed, Schwartz, & Cross, 2006); however, the concepts of identity exploration and commitment appear throughout the psychological literature on racial identity development.

Racial identity refers to a group or collective identity based on people’s perceptions that they share a common racial heritage with a particular racial group (Helms, 1990). Initially, the concept of racial identity development was applied to the understanding of people of color (Atkinson, Morten, & Sue, 1989). Moreover, racial identity pioneers (e.g. Cross, 1971, 1978; Jackson, 1975; Thomas & Thomas, 1971) developed theories to discuss issues such as the effects of racism and prejudice (oppression) on the identity formation of victims (Sue & Sue, 2016). Additionally, these theories initiated the development of racial identity development models. Racial identity development is defined as a lifelong socialization process of self-categorization in
understanding one’s racial experiences and identifying with a particular race (Cross, 1971, 1976, 1978, 1991; Cross, Flagen-Smith, Worrell, & Vandiver, 2002; Cross & Vandiver, 2001; Flagen-Smith, Vandiver, Worrell, & Cross, 2010). Similarly, contributions from racial identity models have been the acknowledgement of sociopolitical influences in shaping identity (Sue & Sue, 2016). Moreover, researchers have proposed that race and ethnicity are two separate constructs (Helms & Talleyrand, 1997; Phinney, 1996; Zuckerman, 1990). Issues related to racial identity focus on the social and political impact of visible group membership on psychological functioning (Johnson & Arbona, 2006). However, it is unclear whether the racial identity development models are adequate for understanding the experiences, cultural psychology and racial identity of ethnic groups who are not African American or European American (Cokley & Vandiver, 2012). Sue and Sue (2016) stated that identity development is not solely due to cultural differences, but how the differences are perceived in our society. Burlew and Smith (1991) incorporated racial identity development under an umbrella of ethnic identity development, which is a process of coming to terms with one's ethnic/racial membership group as a salient reference group. Helms (1990) and Poston (1990) shared similar arguments as Burlew and Smith (1991) and point out that people who receive negative messages concerning their ethnic background or learn values from the larger society that conflict with their inner cultural selves are at risk of developing a negative self-image (Goodstein & Ponterotto, 1997). The following section will explore the racial/cultural identity development model.

Racial/Cultural Identity Development Model. Most identity models trace their roots from ego identity Erikson (1959/1980); identity formation, Marcia (1980); or cognitive structural work, Piaget (1952). Additionally, Critical Race Theories were influenced by the experiences of
African Americans during the Civil Rights Movement, and the study of racial identity development has expanded to encompass a range of racial groups, including Whites, Asian Americans, Latinos, Native Americans, and people with multiple racial backgrounds (Wijeyesinghe & Jackson, 2012). Racial identity development models are tools to create an understanding of how individuals achieve an awareness of their sense of self in relation to race within a larger social, cultural, and historical context (Wijeyesinghe & Jackson, 2012). Furthermore, Wijeyesinghe and Jackson (2012) referenced that perspectives on race and identity are constantly evolving in light of social, political, and cultural changes and that racism is a major aspect that affects identity and understanding of oneself, race, and intergroup dynamics.

For this study, the Racial/Cultural Identity Model (R/CID; Atkinson et al., 1989) will be used to conceptualize racial identity development based on the understanding that experiences of belonging to a racial group transcend all other experiences (Atkinson, Morten, & Sue, 1989; Sue & Sue, 2016). Originally, the R/CID was named the Minority Identity Model (MID), a five-stage model that was developed to be applied to all racial and ethnic minority groups and avoid the disempowering term minority (Sue & Sue, 2016; Atkinson et al., 1989). Sue and Sue (2016) argued that R/CID is a conceptual framework to provide an understanding of how culturally diverse individuals experience or struggle to understand themselves in terms of their own culture. The R/CID model consists of five phases: conformity, dissonance, resistance and immersion, introspection, and integration awareness (Sue & Sue, 2016). Each of the phases provides direction of how a person of color develops an understanding of themselves (Sue & Sue, 2016). In addition, there are “corresponding levels of belief and attitudes that are integral in how a person views 1) the self, 2) others of the same minority, 3) others of another minority, 4)
majority individuals” (p. 366). Sue and Sue (2016) referenced that individuals move through these phases based on experiencing a crisis that shifts them from feeling of self-depreciating to self-appreciation. Additionally, the R/CID model can take into account an individual’s background, socio-historical and personal experiences (West-Olatunji, Frazier, Guy, Smith, Clay, & Breaux, 2007). Moreover, the R/CID is a nonlinear model of stages that are arranged in order of an individual’s cultural depreciation to appreciation of their own culture; the next section will describe each stage (see Table 1; Atkinson, Morten, & Sue, 1989; West-Olatunji et al., 2007).
Table 1
The Racial/Cultural Identity Development Model

<table>
<thead>
<tr>
<th>Phases of Minority Development Model</th>
<th>Attitude Toward Self</th>
<th>Attitude Toward Others of the Same Group</th>
<th>Attitude Toward Others of a Different Marginalized Group</th>
<th>Attitude Toward Dominant Group</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stage 1</td>
<td>Self-depreciating or neutral due to low race salience</td>
<td>Group-depreciating or neutral due to low race salience</td>
<td>Discriminatory of neutral</td>
<td>Group-appreciating</td>
</tr>
<tr>
<td>Stage 2</td>
<td>Conflict between self-depreciating and group-depreciating</td>
<td>Conflict between group-depreciating views of minority hierarchy and feelings of shared experience</td>
<td>Conflict between dominant-held and group-depreciating</td>
<td>Conflict between group-appreciating and group-depreciating</td>
</tr>
<tr>
<td>Stage 3</td>
<td>Self-appreciating</td>
<td>Group-appreciating experiences and feelings of culturocentrism</td>
<td>Conflict between feelings of empathy for other minority</td>
<td>Group-depreciating</td>
</tr>
<tr>
<td>Stage 4</td>
<td>Concern with basis of self-appreciation</td>
<td>Concern with nature of unequivocal appreciation</td>
<td>Concern with ethnocentric basis for judging others</td>
<td>Concern with the basis of group depreciation</td>
</tr>
<tr>
<td>Stage 5</td>
<td>Self-appreciation</td>
<td>Group-appreciation</td>
<td>Group-appreciating</td>
<td>Selective appreciation</td>
</tr>
</tbody>
</table>

The conformity phase is where individuals of color are distinguished by their unequivocal preference for dominant cultural values over those of their own culture (Atkinson, Morten, & Sue, 1989; West-Olatunji et al., 2007; Sue & Sue, 2016). In addition, during the conformity phase, individuals have bought into the majority societal definitions about their marginalized status in society (Atkinson, Morten, & Sue, 1989; West-Olatunji et al., 2007; Sue & Sue, 2016). This phase has such a profound negative impact on individuals of color in that members of one cultural group tend to adjust themselves to the group possessing the greatest prestige and power to avoid feelings of inferiority (Atkinson, Morten, & Sue, 1989; West-Olatunji et al., 2007; Sue & Sue, 2016). Moreover, this experience can create ambivalence in an individual or cultural conflict due to a pressure for either assimilation or acculturation.

The second phase is dissonance, which is a gradual process (Atkinson, Morten, & Sue, 1989; West-Olatunji et al., 2007; Sue & Sue, 2016). Individuals begin to experience denial of their identity that begins to break down, leads to questioning and challenging attitudes, and beliefs of the conformity phase (Atkinson, Morten, & Sue, 1989; West-Olatunji et al., 2007; Sue & Sue, 2016). Moreover, individuals are in conflict between disparate pieces of information or experiences that challenge their current self-concept (Atkinson, Morten, & Sue, 1989; West-Olatunji et al., 2007; Sue & Sue, 2016). As stated, individuals will move into this phase gradually, but a traumatic event may propel some individuals to move into dissonance at a rapid pace (Atkinson, Morten, & Sue, 1989; West-Olatunji et al., 2007; Sue & Sue, 2016).

The third phase, resistance and immersion is where individuals tend to endorse minority-held views completely and to reject values of the dominant society and culture, where eliminating oppression becomes an important motivation (Atkinson, Morten, & Sue, 1989; West-
Moreover, affective feelings such as guilt, shame, and anger are attributed from past experiences, where individuals rejected their own racial and cultural group (Atkinson, Morten, & Sue, 1989; West-Olatunji et al., 2007; Sue & Sue, 2016). Additionally, movement into this phase occurs due to a resolution of the conflicts and confusion of the previous phase that allows for a greater understanding of social forces (i.e., racism, oppression, and discrimination) and one’s own role as a victim (Atkinson, Morten, & Sue, 1989; West-Olatunji et al., 2007; Sue & Sue, 2016).

Introspection is the fourth phase, where individuals begin to realize that the level of feelings is psychologically draining and does not permit one to really devote more crucial energies to understanding oneself or one’s own racial-cultural group, where the previous phase tends to be reactive and within this phase proactiveness emerges (Atkinson, Morten, & Sue, 1989; West-Olatunji et al., 2007; Sue & Sue, 2016). The final integrative awareness phase is where an individual develops an inner sense of security and now can appreciate unique aspects of their culture as well as the majority group; indicating that the individual’s culture is not in conflict with the dominant cultural group. Conflicts and discomforts experienced in the previous phase are resolved, allowing the individual control and flexibility (Atkinson, Morten, & Sue, 1989; West-Olatunji et al., 2007; Sue & Sue, 2016). Within the integrative awareness phase, an individual has a strong commitment and desire to eliminate all forms of oppression and accept all aspects of cultures (Atkinson, Morten, & Sue, 1989; West-Olatunji et al., 2007; Sue & Sue, 2016). Each of these phases provides a developmental understanding of how people experience their cultural view of self; however, there are other factors that can impact an individual.
Moreover, the contribution of the R/CID approach has significant merit when conceptualizing culturally diverse individuals; however, there is a limitation to the model (West-Olatunji et al., 2007). Potential change is a limitation, where change is dependent on an individual’s stage of development. Meaning, movement within and between stages is dependent on specific dynamic circumstances and responses to interpersonal interactions can trigger shifts from one stage to another (West-Olatunji et al., 2007).

**Cross Ethnic-Racial Identity Scale-Adult (CERIS-A).** To explore the R/CID model, the Cross Ethnic-Racial Identity Scale-Adult (CERIS-A) will be used. The CERIS-A is a new measure developed to assess ethnic-racial identity (ERI) in multiple groups (Worrell et al., 2017). The CERIS-A is an expansion of the Nigrescence model and modeled after the Cross Racial Identity Scale (CRIS; Vandiver, Cross, Worrell, & Fhagen-Smith, 2002; Worrell, 2015). The Nigrescence model or the process of becoming Black model is a Black identity development model that describes the process of accepting and affirming a Black identity in an American context by moving from Black self-hatred to Black self-acceptance (Vandiver, 2001). Additionally, the Nigrescence model was developed as a racial identity model for African Americans, five of the six attitudes that are assessed (i.e., assimilation, miseducation, self-hatred, anti-White, and multiculturalist inclusive) are not unique to Black populations and the sixth attitude (i.e., afrocentricity) can be reconceptualized for non-Black populations (Worrell et al., 2017). Moreover, items from the CRIS were reworded for the CERIS-A to capture ethnic-racial attitudes for different minority groups (Worrell et al., 2017). The next section will discuss each of the seven constructs used within the CERIS-A.
The assimilation subscale assesses the conceptualization of identity in nationalistic terms rather than ethnonationality terms (Worrell et al., 2017). Meaning, choosing American as a descriptor instead of African American, Asian American, or European American (Worrell et al., 2017). The miseducation subscale assesses individuals’ endorsement of stereotypes about their ethnic-racial group; specifically, a respondent’s broad acceptance of societal stereotypes regarding ethnic-racial membership (whether positive or negative). The CERIS-A does not assess specific stereotypes but rather based on general terms (Worrell et al., 2017). A sample question item from this subscale is “I think many of the stereotypes about my ethnic/racial group are true” (Worrell et al., 2017).

The self-hatred subscale assesses individuals’ dislike of the ethnic-racial group to which they belong (Worrell et al., 2017). The anti-dominant subscale assesses the extent to which individuals whether majority or minority, dislike the dominant group (Worrell et al., 2017). Worrell et al. (2017) indicated that when developing the CERIS-A they were cognizant that dominant groups change across countries and contexts. Ethnocentricity, the fifth subscale is a reconceptualization of the afrocentricity on the CRIS scale (Worrell et al., 2017). It assesses the extent that the values from the ethnic-racial groups they belong to should inform their lives and that no single nationalist identity can be easily captured across all ethnic-racial groups (Worrell et al., 2017).

The multiculturalist inclusive subscale assesses a combination of a strong connection to one’s racial group as well as the willingness to engage with another cultural group in society and value the perspectives that the ethnic-racial group brings (Worrell & Gardner-Kitt, 2006). The final subscale, ethnic-racial salience, assesses the extent to which race is important to an
individual’s self-concept (Worrell et al., 2017). Additionally, Hernandez (2015) referenced that salience was based on assessing the degree to which individuals consider race in their daily lives.

Internal consistency and validity evidence for these scales were determined for African American, Asian American, European American, and Latino(a) American populations (Worrell et al., 2017). Sabani and Ponterotto (1992) referenced that instruments assessing ethnic-racial minority constructs demonstrate poor psychometric properties. However, the CRIS scale was examined and supported several psychometric studies (Gardner-Kitt & Worrell, 2007; Sussman, Beaujean, Worrell, & Watson, 2013; Worrell, Andretta, & Woodland, 2014; Worrell, Mendoza-Denton, Telesford, Simmons, & Martin, 2011). Subsequently, the CRIS was described as an exemplar cultural identity instrument, which was the basis for development of the CERIS-A (Worrell et al., 2017). Based on the CERIS-A demonstrating strong internal consistency coefficients and structural validity in all ethnic-racial groups, it is suggested that the CERIS-A would be useful in measuring ERI attitudes multidimensionally across all ethnic-racial groups in the United States (Worrell et al., 2017).

Summary

This review of literature provided insight into defining the significant areas of interest about racial identity development, impostor phenomenon, and counseling self-efficacy. Racial Identity Development Theory, Impostor Phenomenon Theory, and Self-Efficacy Theory were explained as the foundations for the conceptual framework. The history of racial identity development (Cross, 1971; Parham & Helms, 1981; Helms, 1990; Phinney, 1996; Atkinson, Morten, & Sue, 1989; Sellers, Rowley, Chavous, Shelton, & Smith, 1997; Roskowski, 2010; Buchanan & Selmon, 2008; Okech & Harrington, 2002; Awad, 2007; Felder, Stevenson, &
Gasman, 2014; Van Dinther, Dochy, & Segers, 2011), Impostor Phenomenon (Clance & Imes, 1978), and counseling self-efficacy (Larson et al., 1992; Larson & Daniels, 1998; Melchert, Hays, Wiljanen, & Kolocek, 1996; Thompson, 1986) were explained and defined, and rationales for using the Cross Ethnic-Racial Identity Scale-A (CERIS-A), Clance Impostor Phenomenon Scale (CIPS), and the Counseling Self-Estimate Inventory Scale (COSE) were presented. Moreover, IP characteristics and minority status stress were examined in the literature to determine any additional factors among the variables. Because the purpose of this study was to explore the relationship among racial identity development, impostor phenomenon, and counseling self-efficacy among counseling graduate students of color, the literature review was divided into three main categories: racial identity development, impostor phenomenon, and counseling self-efficacy. The next chapter will present methodology.
Chapter 3

METHODOLOGY

The purpose of this study was to explore the relationships among racial identity development, impostor phenomenon, and counseling self-efficacy among counseling graduate students of color. The following research questions were used to provide a frame of inquiry for this study and each research question pertained to counseling graduate students of color:

1. What are the relationships among racial identity attitudes, impostor phenomenon, counseling self-efficacy?
2. Does the impostor phenomenon predict each component of counseling self-efficacy (microskills, attending to counseling process, dealing with difficult client behaviors, cultural competence, and awareness of one’s own values)?
3. Do elements of racial identity attitudes (assimilation, miseducation, self-hatred, anti-dominant, ethnocentricity, multiculturalist inclusive, and ethnic-racial salience) predict impostor phenomenon?
4. Do racial identity attitudes have indirect effects on counseling self-efficacy, as mediated by impostor phenomenon?

This study utilized a non-experimental survey design to examine the relationships among racial identity development, impostor phenomenon, and counseling self-efficacy variables. A non-experimental survey design is a study in which information is obtained from a population or sample of individuals by means of self-report. Self-report is defined as collecting a series of
responses from participants posed by the researcher. The basis for using survey research is that the information collected will be based on empirical data (Kelly, Clark, Brown, & Sitzia, 2003). The advantages of utilizing a survey design are that it can focus on a wide range of topics, data can be used for many purposes, and much information is gathered within a brief time frame (Kelly et al., 2003). The disadvantage of a survey design is that the data obtained may lack detail or depth on the topic, there are difficulties in securing a high response rate from participants, it can be hard to control the data, and some data can be neglected by the researcher (Kelly et al., 2003). The following section will describe the correlational method used for the study.

**Correlational Method**

A correlational method was used to assess interrelationships among the discussed variables. A correlation is measured by a statistic called the correlation coefficient, which indicates the strength of the linear association between the variables being studied (Mukaka, 2012). There are a variety of correlational methods, such as Pearson correlation coefficient (i.e., Pearson’s r), Spearman’s rank-order correlation, analysis of variance (ANOVA), Structural Equation Models (SEMs), simple regression, and multiple regression. The advantage of correlational designs is that comparison groups are not needed, relationships among variables can be investigated with a single set of participants without concern for controlling for extraneous variables (Belkin & Kleist, 2017). This study will use a bivariate correlational analysis, Pearson correlation coefficient and multiple regression to understand the relationships among the variables (i.e., racial identity development, impostor phenomenon, and counseling self-efficacy).

**Pearson Correlation Coefficient**. Measures of relationships refers to the extent to which a researcher can explain the relationships between two variables, often referred to as a correlation (Belkin & Kleist, 2017). The most common correlation coefficient is the Pearson product-moment
correlation coefficient also known as the Pearson’s r (Belkin & Kleist, 2017). Pearson’s r reveals the strength and direction (i.e., positive or negative) of linear relationships between two variables (Belkin & Kleist, 2017; Hauke & Kossowski, 2011). Specifically, are the variables linearly related depending on whether the slope is positive or negative [i.e., correlational or anticorrelation] (Hauke & Kossowski, 2011). The values can range from -1 for a perfect negative linear relationship to a +1 for a perfect positive relationship or a zero indicating no relationship between the variables (Laerd, 2015). When there is no relationship between variables, they are either unrelated, uncorrelated, orthogonal, or independent. Additionally, correlations can only describe the relationship, instead of to prove cause and effect (Hauke & Kossowski, 2011).

**Multiple Regression.** Regression analysis is a way of predicting an outcome variable from one or several predictor variables [multiple regression] (Field, 2014). Moreover, multiple regression is a predictive analysis and the method of studying the separate and collective contributions of one or more independent variables X, to the variation of a dependent variable Y (Field, 2014). There are a variety of types of multiple regression analyses that a researcher can use to explore the interrelationship among a set of variables (Pallant, 2010). The main types are: standard, hierarchical or stepwise (Pallant, 2010). This study will use hierarchical regression analysis, which it is based on theory and predictors are entered into the model in order of their importance in predicting the outcome (Pallant, 2010; Laerd Statistics, 2015). For example, you can use multiple regression to understand whether exam performance can be predicted based on revision time, test anxiety, lecture attendance, course studied and gender (Laerd Statistics, 2015). The continuous dependent variable would be exam performance and the continuous independent variables are revision time, test anxiety, lecture attendance, course studied and gender (Laerd
Statistics, 2015). The multiple regression analysis will help determine how much of a variation in exam performance can be explained by the independent variables (Laerd Statistics, 2015). For this study, the objective was to use a multiple regression analysis to study the separate and collective variations of the racial identity (i.e. independent variable, x score) and the impostor phenomenon (i.e. independent variable, x score) to the contributions of the counseling self-efficacy [i.e. dependent variable, y score] (Wampold & Freund, 1987).

Methods of Data Collection

Data Collection

This section will discuss the following: participants, recruitment methods, instruments, and sample and respondents.

Participants. The target population for the study was graduate students of color in either a master’s or doctoral counseling (i.e., counseling psychology, clinical psychology, clinical mental health, counseling, counselor education and supervision, rehabilitation counseling, marriage and family therapy, and school counseling) programs within the United States.

Recruitment. Recruitment of participants included an email solicitation to master and doctoral counseling students of color through various counseling LISTSERVS (i.e., counsdoc-owner@lists.niu.edu, counsmaster-owner@lists.niu.edu, CESNET-L@listserv.kent.edu, ACCA-L@list.kennesaw.edu, membership@asaccta.membercliks.net, the Association of University and College Counseling Center Outreach [AUCCCO], and the Association of University and College Counseling Center Directors [AUCCCD]). In addition, an email solicitation was sent directly to training directors and program coordinators of graduate counseling programs throughout the United States. Students were directed that the criteria for participation are: (1) a graduate student
studying from any of the following majors: counselor education and supervision, school counseling, clinical mental health, counseling psychology, rehabilitation counseling, marriage and family therapy, or clinical psychology and (2) a graduate student who identifies as either Black/African American, Asian or Asian American, Hispanic or Latino(a) American, Native Hawaiian or Pacific Islander, American Indian or Alaskan Native, Middle Eastern or Arab American, or multiracial.

Convenience and snowball sampling (Belkin & Kleist, 2017) was utilized when emailing directors of university counseling centers (i.e., Northern Illinois University’s (NIU) Counseling & Consultation Services, The Couple & Family Therapy Clinic NIU, NIU’s Psychological Services Center, NIU’s Community Counseling Training Center, Aurora University’s Counseling Services, University of Oregon Counseling Center, University of San Diego Counseling Center, Georgetown University Counseling Psychiatric Services, Arizona State University Counseling Services, University of South Florida Counseling Center, The Ohio State University Counseling Center, Governors State University, Illinois State University’s Student Counseling Services, and Benedictine University’s Counseling Center). A copy of the email can be found in Appendix A.

To protect the privacy of the participants, the database password known only to the researcher was used. Permission to initiate the research study and distribution of the survey to students and faculty was obtained through the NIU Institutional Review Board (IRB). Participants were informed that no identifiable information or IP address will be obtained from the survey and anyone may exit the survey at any time for any reason. A copy of the informed consent can be found in Appendix D. Participants can remain anonymous, but after completing
the survey, they were encouraged to provide their email address and name to the researcher, so
that they can be entered in a randomly chosen drawing for a $50 gift card.

Sample and Respondents. For this study, the researcher used nonprobability (i.e.,
convenience, snowball sampling, or quota) sampling for recruitment and selection of participants
(Belkin & Kleist, 2017). Nonprobability sampling is a technique in which samples are gathered
in a process that does not give all individuals in the population equal chances of being selected
(Belkin & Kleist, 2017). Convenience sampling is the most common type of sampling method
used in counseling research due to limited response rates for survey designs (Belkin & Kleist,
2017). However, Belkin and Kleist (2017) shared that this type of sampling method is at risk for
limited generalizability. Moreover, convenience sampling is a method in which a researcher
collects data from participants in whatever way is most convenient to access data (Belkin &
Kleist, 2017), whereas snowball sampling is like a chain reaction in which participants refer
another person they know and then that person will refer another person to participate (Belkin &
Kleist, 2017). This method is usually employed when participants are hard to find or because the
groups of individuals are rare (Belkin & Kleist, 2017).

Sample Size. One aim of quantitative research is generalizability. As such, if the sample
size is too small, the study will not be generalizable and cannot be repeated, which would not
have scientific value (Pallant, 2010). In addition, sample size indicates that your findings point to
what really exists in the population, not just specific to the sample (O’Rourke, Psych, & Hatcher,
2013). Based on the a-priori sample size online calculator, the power analysis was conducted to
determine the number of participants needed to retain good statistical power (Soper, 2017).
Moreover, a sample has statistical power when it is large enough to reflect what actually exists in
the population. Indicating that a sample is large enough to find statistically significant associations between variables (i.e., Type I error avoided), but not large enough to find what really exists in the population [i.e., Type II error committed] (O’Rourke, Psych, & Hatcher, 2013). The target sample size was 95 participants to have reasonable statistical power (Soper, 2017).

**Instrumentation.** This study used an online Qualtrics survey as a means of gathering information regarding racial identity development, impostor phenomenon, and counseling self-efficacy among counseling graduate students of color. Qualtrics is a survey software that allows users to complete a survey online and for researchers to conduct data analysis. The survey was approximately 20-25 minutes and participants could complete the survey from either a mobile device or a computer. Participants were informed that no identifiable information or IP addresses will be acquired from the survey and anyone may exit the survey at any time for any reason. Each of the survey instruments were distributed via email (a copy of the email can be found in Appendix A). The email consisted of an introductory page providing a brief explanation of the study and the criteria for inclusion (see recruitment for details).

The instruments used in this study included the following: (a) a demographic questionnaire developed by the researcher, (b) the Cross Ethnic-Racial Identity Scale-Adult [CERIS-A] (Worrell et al., 2017), (c) the Clance Impostor Phenomenon Scale [CIPS] (Clance & Imes, 1978), and (d) the Counseling Self-Estimate Inventory Scale [COSE] (Larson et al., 1992), which is approximately 92 items, including an informed consent (a copy of the informed consent can be found in Appendix E). Details about each instrument will be discussed in the following section.
Demographic Questionnaire. A 6-item demographic questionnaire requested information about the participants’ age, gender identity, race/ethnicity, degree status, program of study/area of specialization, and location of their program. A copy of the demographic form is found in Appendix G.

Counseling Self-Estimate Inventory Scale (COSE). The COSE instrument is intended to assess the development of self-efficacy among counselors-in-training (Larson et al., 1992). The COSE consists of five subscales: microskills (12 items), attending to counseling process (10 items), dealing with difficult client behaviors (7 items), cultural competence (4 items), and awareness of one’s own values (4 items) for a total of 37 items (Lent, Hill, & Hoffman, 2003). A sample item is “I am confident that I will be able to conceptualize my client’s problems” (microskills). To score the scale, each item is a Likert item with response options ranging from 1= (Strongly Disagree) to 6= (Strongly Agree) to indicate degree of confidence completing various counseling related tasks. The possible maximum score obtained is 222 and minimum possible score is 37; higher scores indicate higher self-efficacy beliefs (Larson et al., 1992). Scores closer to one indicate strongly disagree and scores closer to six indicated strongly agree. The COSE has evidence of good construct validity as well as internal consistency values of alpha reported as .62 (awareness of values), .78 (cultural competence), .80 (difficult client’s behaviors), .87 (processing), and .88 (microskills), with alpha for the total (composite) instrument reported as .93 (Larson et al., 1992). For the test-retest reliability, the scores were reasonably stable over a three-week interval, with correlations ranged from .32 to .65 (Larson et al., 1992). Overall, Larson et al. (1992) showed that the COSE scale has internal reliability and validity, with evidence that the measurement assesses clinically relevant aspects of counseling
self-efficacy. The researcher requested and received written permission from Dr. Lisa Larson, professor of Counseling Psychology at Iowa State University, to use the COSE in this study (Appendix H). A copy of the survey instrument can be found in Appendices K.

Clance Impostor Phenomenon Scale (CIPS). The CIPS instrument was developed to measure impostor phenomenon in the following areas: fear of evaluation, feeling less capable than peers, fear that success cannot be repeated, feelings of inadequacy, and self-monitoring behaviors (Roskowski, 2010, p. 118). The survey consists of a 20-item, self-report 5-point Likert scale instrument with response options ranging from 1= (not at all true) to 5= (very true) to indicate the degree of impostor phenomenon. (Clance & Imes, 1978; Chrisman, Pieper, Clance, Holland, & Glickauf-Hughes, 1995). Sample items include “I have often succeeded on a test or task even though I was afraid that I would not do well before I took the test” and “I can give the impression that I am more competent than I really am” (Clance & Imes, 1978). Scores on the CIPS can range from 20 to 100, with 41-60 indicating moderate impostor phenomenon experiences, and scores ranging from 61-80 indicating a presence of impostor phenomenon experiences (Clance & Imes, 1978; Chrisman, Pieper, Clance et al., 1995). The CIPS has evidence of good construct validity as well as internal consistency with alpha scores ranging from .84 to .96 (Chrisman et al., 1995). The researcher requested and received written permission from Dr. Pauline Rose Clance, ABPP to use the CIPS (Appendix J). A copy of the survey instrument can be found in Appendices L.

Cross Ethnic-Racial Identity Scale-Adult (CERIS-A). The CERIS-A is an expansion of the Nigrescence model and is based on the Cross Racial Identity Scale [CRIS] (Vandiver et al., 2002). In addition, the CERIS-A is a measure of cultural attitudes for use with all ethnic and
racial groups in the United States (Worrell et al., 2017). The CERIS-A was used to examine racial identity development in this study. The scale consists of a self-report 29-item 7-point scale with response options ranging from 1= (Strongly Disagree) to 7= (Strongly Agree) to indicate degree of confidence completing various counseling related tasks that assesses a participant’s cultural identity attitudes (Vandiver et al., 2002; Worrell et al., 2015). The seven subscales include assimilation (4 items: 2,7,11 and 17), miseducation (4 items: 3,13,18 and 29), self-hatred (4 items: 4, 10, 16 and 27), anti-dominant (4 items: 6,15, 20, and 26), ethnocentricity (4 items: 8, 14, 21 and 25), multiculturalist inclusive (4 items: 5,9,23 and 28), and ethnic-racial salience ethnic identity (4 items: 12,19,22 and 24; Vandiver et al., 2002; Worrell et al., 2015). Sample items include “I think many of the stereotypes about my ethnic/racial group are true,” “when I look in the mirror sometimes I do not feel good about the ethnic/racial group I belong to,” and “life in America is good for me” (Vandiver et al., 2002; Worrell et al., 2015). The subscale scores are obtained by summing the four items that make up each of the seven subscales and calculating the mean for the subscale; the mean scores can range from 1 to 7 (Vandiver et al., 2002; Worrell et al., 2017). Vandiver et al. (2002) and Worrell et al. (2017) referenced that was evidence of internal consistency with alpha scores ranging from .92 to .94 for all racial/ethnic groups and noted that none of the subscales are reversed scored. The researcher received written permission from Dr. Frank Worrell to use the CERIS-A (Appendix I). Literature indicates that all three of the measures being used for this study are well-known instruments in counseling and multicultural research (Chrisman et al., 1995; Lent et al., 2003; Padilla, 2004; Worrell et al., 2017). A copy of the survey instrument can be found in Appendices M.
Procedure for Data Analysis

The procedure for data analysis was based on the following: descriptive statistics, assumptions, Pearson correlation, and multiple regression analysis to investigate the predictive effect of racial identity development and impostor phenomenon scores on the outcome of counseling self-efficacy. The Statistical Package for the Social Sciences (SPSS) software was used for data preparation, gather descriptive statistics, and to conduct the bivariate correlation and regression analyses. Prior to data analysis, the data set was screened for either incomplete cases or missing values (i.e., a question not answered within the survey; Field, 2014). Screening is defined as a process of inspecting the data for errors and correcting them prior to statistical analysis (Field, 2014). Screening data also entails checking the raw data to identify outliers (Field, 2014). Outliers are a data point (i.e., observations) distant from the mass data points (Field, 2014). Outliers can be influenced by variations or experimental error. Once the data was screened, Cronbach’s alpha was conducted to determine internal consistency of the instruments. Next, a descriptive statistical analysis was conducted, and the descriptive statistics were used to describe the participants of the study (i.e., number of participants, age, gender identity, race/ethnicity identity, type of degree, area of specialization, and location of program). In addition, the mean scores, the standard deviation, and the subscale mean scores for all the variables in the study were calculated. The following assumptions were considered prior to analysis: linearity, homoscedasticity, multicollinearity, outliers, leverage points, influential points, residuals normally distributed, model fit, and sample size. Moreover, a summary of the demographic information, see Table 2. Once each of the assumption tests is evaluated and the
distribution has been determined to be normally distributed, the next step was to analyze the data set in SPSS.

Researcher Positionality

Despite my own professional background, I struggled with cognitive distortions and unrealistic beliefs that impacted my academic productivity and interactions with peers and professors. It was not until a fellow classmate gave a name to what I was feeling, impostor phenomenon that I understood what I was feeling. I may not have felt like an impostor, but I gained clarity and validation, which seemed to minimize my stressful transition of being a college student. In addition, to my surprise, I started hearing other graduate students express similar experiences, and even though they did not call it impostor phenomenon; they fit the definition. Additionally, I noticed that the impostor phenomenon impacted students who varied in age, ethnicity, race, and socio-economic class. As such, I became interested in exploring the influences of racial identity development and counseling self-efficacy in relation to impostor phenomenon that may contribute to a counselor’s development. My belief is that counselors who are impacted by impostor phenomenon are unable to see themselves positively or develop confidence to grow as a professional counselor due to their racial identity development or their own belief about themselves as a competent counselor.

Kets de Vries (2005) indicated that people of color experience a myriad of obstacles within higher education that can contribute to IP, such as a lack of or limited mentoring, a lack of faculty or students who identify as minorities, or a pressure to be extraordinaire. In an article by Huber et al. (2008), it was emphasized that it is important to challenge the dominant discourse of higher education beliefs and create a space for people of color as well as re-evaluating admission
requirements within higher education to help support success for people of color (Huber et al., 2008). Another consideration could be that students of color do not feel prepared or feel competent.

Additionally, Tang et al. (2004) stated that understanding the occurrence of the imposter phenomenon among counselors and the influence of this phenomenon on counselor development could have implications for graduate training programs. Investigating the relationship among one’s racial identity development, counseling self-efficacy and IP would support the dissection of the evaluation process for candidates, updating training and supervision curriculum, thus giving a positive impact for retaining students and preparing competent counselors. Therefore, my belief is that an advantage for completing this study is that counselor education programs can understand the importance of incorporating the following areas of study: racial identity development, imposter phenomenon and counseling self-efficacy within curriculum, training, and supervision. Furthermore, supporting the development of a counselor-in-training’s self-efficacy/competency and preparation upon graduation will support the well-being of our clients.

Summary

In this chapter, the survey design, description of the participants and the sampling method were provided. Data collection procedures were described, and the instruments used for data collection were also discussed. The study used an online Qualtrics survey that included a demographic questionnaire, Cross Ethnic-Racial Identity Scale-Adult (CERIS-A), the Clance Impostor Phenomenon Scale (CIPS), and the Counseling Self-Estimate Inventory Scale (COSE). Furthermore, a description of the data analysis procedures in the study was provided. A Pearson’s correlation and hierarchical regression analyses were performed to examine the
predictive effect of racial identity attitudes and impostor phenomenon scores on the outcome of counseling self-efficacy.
Chapter 4

RESULTS

Historically, counseling literature has explored the dynamics between the counselor and the client’s racial identity, but there is limited research exploring the counselor’s racial identity and the development of counseling self-efficacy (Crockett & Hays, 2015; Holcomb-McCoy, Hines, & Johnston, 2008; Owens, Bodenhorn, & Bryant, 2010; Tomlinson-Clarke, 2013). To address this gap, the study examined the relationships among racial identity development, impostor phenomenon, and counseling self-efficacy among counseling graduate students of color. The following research questions were used to provide a frame of inquiry for this study and each research question pertains to counseling graduate students of color: (1) What are the relationships among racial identity attitudes, impostor phenomenon, and counseling self-efficacy? (2) Does the impostor phenomenon predict each component of counseling self-efficacy (microskills, attending to counseling process, dealing with difficult client behaviors, cultural competence, and awareness of one’s own values)? (3) Do elements of racial identity attitudes (assimilation, miseducation, self-hatred, anti-dominant, ethnocentricity, multiculturalist inclusive, and ethnic-racial salience) predict impostor phenomenon? (4) Do racial identity attitudes have indirect effects on counseling self-efficacy, as mediated by impostor phenomenon? The statistical application SPSS version 25 was used to analyze the data. This chapter consists of
five sections: (1) reliability of scores; (2) description of participants; (3) data screening; (4) analyses examining each research question and a summary of the results.

Reliability of Scores

This section provides information regarding the reliability of scores. In the field of social sciences, it is best practice to report estimates of score reliability (Kline, 2016). For scores from an instrument to be reliable, they must be consistent, accurate, and uniform across time, observers, and samples and be free from random and unexplained error (Wasserman & Bracken, 2013). Coefficient (Cronbach’s) alpha is the most common measure to determine if scores from an instrument are reliable, which also indicates that responses are consistent across the items measured (Kline, 2016).

Kline (2016) suggests the following guidelines for interpretation of alpha: .90 is considered “excellent,” .80 “very good,” and values about .70 are “adequate.” In the present study, reliability of scores from each instrument: Cross Ethnic-Racial Identity Scale-Adult (CERIS-A), Clance Impostor Phenomenon Scale (CIPS), and Counseling Self-Estimate Inventory Scale (COSE). Alpha coefficients, means, and standard deviations for, CERIS-A, CIPS, and COSE are shown in Table 2.

<table>
<thead>
<tr>
<th>Instrument</th>
<th>Coefficient alpha</th>
<th>Items</th>
<th>$M$</th>
<th>$SD$</th>
</tr>
</thead>
<tbody>
<tr>
<td>COSE</td>
<td>.75</td>
<td>37</td>
<td>134.07</td>
<td>14.91</td>
</tr>
<tr>
<td>CERIS-A</td>
<td>.85</td>
<td>29</td>
<td>109.81</td>
<td>21.05</td>
</tr>
<tr>
<td>CIPS</td>
<td>.93</td>
<td>20</td>
<td>56.31</td>
<td>16.88</td>
</tr>
</tbody>
</table>
The COSE scale consists of 37 Likert items. Higher scores indicate more confidence completing various counseling-related tasks. The total score could range from 37-222, with higher scores indicating higher self-efficacy beliefs. The mean score of the COSE was 134.07 (SD=14.91) indicating high self-efficacy beliefs. The reliability estimate was .75 indicating adequate internal consistency. The CERIS-A scale consists of 29 Likert items. The mean score of the CERIS-A was 109.81 (SD=21.05). The reliability estimate was .85 indicating very good internal consistency. The CIPS scale consists of 20 Likert items. The total score could range from 20-100, with 41-60 indicating moderate impostor phenomenon experiences, and scores ranging from 61-80 indicating a presence of impostor phenomenon experiences. The mean score of the CIPS was 56.31 (SD=16.88). The reliability estimate was .93 indicating excellent internal consistency. The findings of this study indicated that imposter feelings were present at moderate levels or more (81.2%) among the counseling trainees, the highest score was 95. Furthermore, 97% of the counseling students presented with high counseling self-efficacy scores, the highest score was 176.

Description of Participants

The target population was graduate students of color in either a master’s or doctoral counseling programs (i.e., counseling psychology, clinical psychology, clinical mental health, counseling, counselor education and supervision, rehabilitation counseling, marriage and family therapy, and school counseling) within the United States. All participants agreed to participate in this study after being solicited through word of mouth and various counseling Listservs (i.e., counsdoc-owner@lists.niu.edu, counsmaster-owner@lists.niu.edu, CESNET-L@listserv.kent.edu, ACCA-L@list.kennesaw.edu, membership@asaccta.membercliks.net, the
Association of University and College Counseling Center Outreach [AUCCCO], and the Association of University and College Counseling Center Directors [AUCCCD]). In addition, an email solicitation was sent directly to training directors and program coordinators of graduate counseling programs throughout the United States. Inclusion criteria for participation were: (1) a graduate student studying from any of the following majors: counselor education and supervision, school counseling, clinical mental health, counseling (master), counseling psychology, rehabilitation counseling, marriage and family therapy, or clinical psychology and (2) a graduate student who identifies as either African, African American/Black, Asian, Asian American, Hispanic or Latinx, Native Hawaiian or Pacific Islander, American Indian or Alaskan Native, Middle Eastern or Arab American, or multiracial/multiethnic. One hundred and sixty-three participants attempted to complete the online survey, and due to incomplete or missing data only 122 participants were included in this study.

Demographic data were collected to describe the participants. Demographic data indicated that of the 122 participants 110 (90.2%) were women, 10 (8.2%) were men, and 1 participant self-identified as genderqueer. Most of the participants (n=47 or 38.5%) self-identified their race as African American/Black, 35 (28.7%) self-identified as Native Hawaiian/Pacific Islander, 17 (13.9%) self-identified as Hispanic/Latinx, 10 (8.2%) self-identified as multiracial/multiethnic, 7 (5.7%) self-identified as Asian American, 2 (1.6%) self-identified as Asian, 2 (1.6%) self-identified as Middle Eastern, 1 (.8%) self-identified as American Indian or Alaskan Native, and 1 (.8%) self-identified as African. The age of participants ranged from 22 to 67, with the mean age being 34 years old.
There were 63 (51.6%) of the 122 participants who indicated they were seeking a master’s degree (i.e., M.A., M.S., M.S. Ed) and 59 (48.4%) of the 122 participants were seeking a doctoral degree (i.e., Ph.D, Ed.D, or Psy.D). In addition, most participants reported an area of specialization of counselor education and supervision 48 (39.3%), 28 (23%) clinical mental health, 11 (9%) school counseling, 10 (8.2%) clinical psychology, 10 (8.2%) marriage and family therapy, 9 (7.4%) counseling psychology, 4 (3.3%) counseling (master), and 2 (1.6%) rehabilitation. Furthermore, the location of programs varied throughout the United States with the majority (n=48 or 39.3%) from the Midwest, 18 (14.8%) from the South East, 17 (13.9%) from the Northeast, 16 (13.1%) from the South West, 9 (7.4%) from the Mid-Atlantic, 8 (6.6%) from the West, and 6 (4.9%) from the North West. Regarding number of years in the program, most of the participants (n=43 or 35.2%) indicated two years, 32 (26.2%) indicated three years, 31 (25.4%) indicated one year, and 14 (11.4%) indicated over six years in their program. In addition, there were two participants who did not indicate the number of years in their program. The frequencies and percentages of the demographic variables in the study are provided in Table 3.
Table 3

Frequency Distributions for Demographic Variables

<table>
<thead>
<tr>
<th>Variable</th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gender</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Women</td>
<td>110</td>
<td>90.2</td>
</tr>
<tr>
<td>Men</td>
<td>10</td>
<td>8.2</td>
</tr>
<tr>
<td>Genderqueer</td>
<td>1</td>
<td>0.8</td>
</tr>
<tr>
<td>Race/Ethnicity</td>
<td></td>
<td></td>
</tr>
<tr>
<td>African</td>
<td>1</td>
<td>0.8</td>
</tr>
<tr>
<td>African American/Black</td>
<td>47</td>
<td>38.5</td>
</tr>
<tr>
<td>American Indian/Alaskan Native</td>
<td>1</td>
<td>0.8</td>
</tr>
<tr>
<td>Asian</td>
<td>2</td>
<td>1.6</td>
</tr>
<tr>
<td>Asian American</td>
<td>7</td>
<td>5.7</td>
</tr>
<tr>
<td>Hispanic/Latinx</td>
<td>17</td>
<td>13.9</td>
</tr>
<tr>
<td>Middle Eastern</td>
<td>2</td>
<td>1.6</td>
</tr>
<tr>
<td>Multiracial/Multiethnic</td>
<td>10</td>
<td>8.2</td>
</tr>
<tr>
<td>Native Hawaiian/Pacific Islander</td>
<td>35</td>
<td>28.7</td>
</tr>
<tr>
<td>Degree</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ph.D/Ed.D/Psy.D</td>
<td>59</td>
<td>48.4</td>
</tr>
<tr>
<td>M.A./M.S./M.S.Ed</td>
<td>63</td>
<td>51.6</td>
</tr>
<tr>
<td>Area of Specialization</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Counselor Education and Supervision</td>
<td>48</td>
<td>39.3</td>
</tr>
<tr>
<td>School Counseling</td>
<td>11</td>
<td>9.0</td>
</tr>
<tr>
<td>Rehabilitation Counseling</td>
<td>2</td>
<td>1.6</td>
</tr>
<tr>
<td>Counseling Psychology</td>
<td>9</td>
<td>7.4</td>
</tr>
<tr>
<td>Clinical Psychology</td>
<td>10</td>
<td>8.2</td>
</tr>
<tr>
<td>Marriage and Family Therapy</td>
<td>10</td>
<td>8.2</td>
</tr>
<tr>
<td>Counseling</td>
<td>4</td>
<td>3.3</td>
</tr>
<tr>
<td>Clinical Mental Health</td>
<td>28</td>
<td>23.0</td>
</tr>
<tr>
<td>Location of Program</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Northeast</td>
<td>17</td>
<td>13.9</td>
</tr>
<tr>
<td>Mid-Atlantic</td>
<td>9</td>
<td>7.4</td>
</tr>
<tr>
<td>Midwest</td>
<td>48</td>
<td>39.3</td>
</tr>
<tr>
<td>South East</td>
<td>18</td>
<td>14.8</td>
</tr>
<tr>
<td>South West</td>
<td>16</td>
<td>13.1</td>
</tr>
<tr>
<td>West</td>
<td>8</td>
<td>6.6</td>
</tr>
<tr>
<td>North West</td>
<td>6</td>
<td>4.9</td>
</tr>
<tr>
<td>Number of years in program</td>
<td></td>
<td></td>
</tr>
<tr>
<td>One years</td>
<td>31</td>
<td>25.4</td>
</tr>
<tr>
<td>Two years</td>
<td>43</td>
<td>35.2</td>
</tr>
<tr>
<td>Three years</td>
<td>32</td>
<td>26.2</td>
</tr>
<tr>
<td>Four years</td>
<td>6</td>
<td>4.9</td>
</tr>
<tr>
<td>Five years</td>
<td>3</td>
<td>2.5</td>
</tr>
<tr>
<td>Six years</td>
<td>2</td>
<td>1.6</td>
</tr>
<tr>
<td>Seven years</td>
<td>1</td>
<td>0.8</td>
</tr>
<tr>
<td>Eight years</td>
<td>1</td>
<td>0.8</td>
</tr>
<tr>
<td>Ten years</td>
<td>1</td>
<td>0.8</td>
</tr>
</tbody>
</table>
Data Screening

The data set was screened for accuracy of data entry, outliers, missing values, normality of distribution, and linearity prior to analysis. The original data set included 163 participants. However, it was determined that for each scale assessed, cases with fewer than 70% of missing items completed would be omitted. Composite scores were computed for the, CERIS-A, CIPS, and COSE scales by calculating mean scores of their respective scale items. Outliers were examined and considered to not be extreme. Kurtosis and skewness statistics did not indicate substantial departures for normality. Additionally, four variables (i.e., counseling process, difficult behaviors, ethnocentricity, and ethnic-racial salience) were approximately normally distributed, as assessed by a visual inspection of histograms and tests of normality analysis. In Table 4 the skewness and kurtosis for each variable are shown.

**Table 4**

*Skewness and Kurtosis Values for Subscale Scores*

<table>
<thead>
<tr>
<th>Scale</th>
<th>Subscale</th>
<th>Skewness</th>
<th>Kurtosis</th>
</tr>
</thead>
<tbody>
<tr>
<td>COSE</td>
<td>Microskills</td>
<td>-0.384</td>
<td>-0.708</td>
</tr>
<tr>
<td></td>
<td>Counseling Process</td>
<td>0.033</td>
<td>-0.763</td>
</tr>
<tr>
<td></td>
<td>Difficult Behaviors</td>
<td>0.135</td>
<td>0.163</td>
</tr>
<tr>
<td></td>
<td>Cultural Competence</td>
<td>0.125</td>
<td>0.473</td>
</tr>
<tr>
<td></td>
<td>Values</td>
<td>0.714</td>
<td>-0.207</td>
</tr>
<tr>
<td>CERIS-A</td>
<td>Assimilation</td>
<td>0.358</td>
<td>-1.213</td>
</tr>
<tr>
<td></td>
<td>Miseducation</td>
<td>-0.011</td>
<td>-0.952</td>
</tr>
<tr>
<td></td>
<td>Self-Hatred</td>
<td>0.169</td>
<td>-1.474</td>
</tr>
<tr>
<td></td>
<td>Anti-Dominant</td>
<td>0.377</td>
<td>-1.043</td>
</tr>
<tr>
<td></td>
<td>Ethnocentricity</td>
<td>0.036</td>
<td>-0.194</td>
</tr>
<tr>
<td></td>
<td>Multiculturalist Inclusive</td>
<td>-0.751</td>
<td>-0.548</td>
</tr>
<tr>
<td></td>
<td>Ethnic-Racial Salience</td>
<td>0.046</td>
<td>-0.530</td>
</tr>
<tr>
<td>CIPS</td>
<td>CIPS Total Score</td>
<td>0.296</td>
<td>-0.562</td>
</tr>
</tbody>
</table>
Graphical methods, such as a histogram, box-plot, or a stem-and-leaf plot, can serve as a useful tool in checking normality, however normality tests are more of a formal procedure in checking normality (Razali & Wah, 2011). One of the most common normality test procedure in statistical software is the Shapiro-Wilk (SW) test (Razali & Wah, 2011). The Shapiro-Wilk test was originally restricted for a sample size of less than 50 and to detect departures from normality due to either skewness or kurtosis (Razali & Wah, 2011). The results from the Shapiro-Wilk test indicated that counseling process, difficult behaviors, ethnocentricity, and ethnic-racial salience subscales were normally distributed, and the residuals of the nine other subscales were normally distributed. The Shapiro-Wilk tests of normality are shown in Table 5 for each variable.
Table 5

*Shapiro-Wilk Tests of Normality for Subscale Scores*

<table>
<thead>
<tr>
<th>Scale</th>
<th>Subscale</th>
<th>$X^2$</th>
<th>df</th>
<th>$p$</th>
</tr>
</thead>
<tbody>
<tr>
<td>COSE</td>
<td>Microskills</td>
<td>.962</td>
<td>122</td>
<td>.002</td>
</tr>
<tr>
<td></td>
<td>Counseling Process</td>
<td>.979</td>
<td>122</td>
<td>.055</td>
</tr>
<tr>
<td></td>
<td>Difficult Behaviors</td>
<td>.985</td>
<td>122</td>
<td>.187</td>
</tr>
<tr>
<td></td>
<td>Cultural Competence</td>
<td>.960</td>
<td>122</td>
<td>.001</td>
</tr>
<tr>
<td></td>
<td>Values</td>
<td>.936</td>
<td>122</td>
<td>&lt;.001</td>
</tr>
<tr>
<td>CERIS-A</td>
<td>Assimilation</td>
<td>.891</td>
<td>122</td>
<td>&lt;.001</td>
</tr>
<tr>
<td></td>
<td>Miseducation</td>
<td>.969</td>
<td>122</td>
<td>.007</td>
</tr>
<tr>
<td></td>
<td>Self-Hatred</td>
<td>.885</td>
<td>122</td>
<td>.000</td>
</tr>
<tr>
<td></td>
<td>Anti-Dominant</td>
<td>.920</td>
<td>122</td>
<td>.000</td>
</tr>
<tr>
<td></td>
<td>Ethnocentricity</td>
<td>.990</td>
<td>122</td>
<td>.508</td>
</tr>
<tr>
<td></td>
<td>Multiculturalist Inclusive</td>
<td>.891</td>
<td>122</td>
<td>.000</td>
</tr>
<tr>
<td></td>
<td>Ethnic-Racial Salience</td>
<td>.981</td>
<td>122</td>
<td>.080</td>
</tr>
<tr>
<td></td>
<td>CIPS Total Scores</td>
<td>.977</td>
<td>122</td>
<td>.034</td>
</tr>
</tbody>
</table>

In addition, the collinearity statistic Variance Inflation Factor (VIF) was used to evaluate the assumption of multicollinearity. Multicollinearity occurs when there is correlation between predictor variables in a model (Tabachnick & Fidell, 2007). The VIF estimates the amount of variance regression coefficients are inflated due to the multicollinearity of a model (Gingham & Fry, 2010). There was no evidence of multicollinearity, as assessed by tolerance values greater than 0.1. Lastly, to test the assumption of linearity of the data, the researcher evaluated the histograms and boxplots. Appendices P-R demonstrated that there is no significant reason to believe the data set is not meeting linearity.
Figure 1: Histograms for subscale scores from COSE scale.
Figure 2: Histograms for subscale scores from CERIS-A scale.
Figure 3: Histogram for subscale scores from CIPS scale.
Beyond the demographic data and respondents’ results, the focus of this study examined four research questions. The following summarizes the results of the research questions.

**Research Question 1**

What are the relationships among racial identity attitudes, impostor phenomenon, and counseling self-efficacy among counseling graduate students of color? A Pearson’s product-moment correlation was carried out to assess the relationships among CERIS-A subscales, CIPS scores, and COSE subscales. One hundred and twenty-two participants were recruited. There were twenty-three statistically significant correlations and the largest correlation was .701 or 49% shared variance between racial identity attitudes and counseling self-efficacy. In addition, a Spearman’s rank-order correlational analysis was carried out to assess the relationship among study variables. All correlations were in agreement with the Pearson’s correlation except for the CIPS total scores (see Table 6), which indicated a small negative correlation with the cultural competence (COSE) subscale.

**Table 6**

<table>
<thead>
<tr>
<th></th>
<th>Assimi</th>
<th>ME</th>
<th>SH</th>
<th>AD</th>
<th>Ethno</th>
<th>MI</th>
<th>ERS</th>
<th>CIPS</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Microskills</strong></td>
<td>-.405**</td>
<td>-.545**</td>
<td>-.520**</td>
<td>-.640**</td>
<td>-.041</td>
<td>.665**</td>
<td>.206*</td>
<td>-.061</td>
</tr>
<tr>
<td><strong>Counseling Process</strong></td>
<td>.437**</td>
<td>.578**</td>
<td>.488**</td>
<td>.591**</td>
<td>.300**</td>
<td>-.390**</td>
<td>-.032</td>
<td>.029</td>
</tr>
<tr>
<td><strong>Difficult Behavior</strong></td>
<td>.000</td>
<td>.048</td>
<td>.084</td>
<td>.097</td>
<td>.255**</td>
<td>.184*</td>
<td>.248**</td>
<td>.140</td>
</tr>
<tr>
<td><strong>Cultural Competence</strong></td>
<td>.078</td>
<td>.080</td>
<td>-.020</td>
<td>.026</td>
<td>.236**</td>
<td>.144</td>
<td>.032</td>
<td>-.186*</td>
</tr>
<tr>
<td><strong>Values</strong></td>
<td>.436**</td>
<td>.537**</td>
<td>.421**</td>
<td>.465**</td>
<td>.186*</td>
<td>-.441**</td>
<td>-.073</td>
<td>-.129</td>
</tr>
</tbody>
</table>

Note. Assimi=Assimilation, ME=Miseducation, SH=Self-Hatred, AD=Anti-Dominant, Ethno=Ethnocentricity, MI=Multiculturalist Inclusive, ERS=Ethnic-Racial Salience, CIPS=CIPS Total Score, * = statistically significant at p <.05 level, ** = statistically significant at p < .01
The first correlation to discuss is the relationship between microskills (COSE) subscale and CERIS-A subscales. There was a small positive correlation among Microskills and Difficult Behaviors, \( r(120) = .282, p < .002 \) and Microskills and Ethno-Racial Salience, \( r(120) = .229, p < .011 \). There was a moderate positive correlation between Microskills and Cultural Competence, \( r(120) = .369, p < .005 \) and a moderate negative correlation among Microskills and Values, \( r(120) = -.338, p < .005 \), Microskills and Assimilation, \( r(120) = -.377, p < .0005 \), Microskills and Miseducation, \( r(120) = -.493, p < .0005 \), and Microskills and Self-Hatred, \( r(120) = -.494, p < .0005 \). There was a strong negative correlation between Microskills and Anti-Dominant, \( r(120) = -.693, p < .0005 \), and Microskills and Multiculturalist had a strong positive correlation, \( r(120) = .701, p < .0005 \).

The next correlation is between Counseling Process (COSE) subscale and CERIS-A subscales. There was a moderate positive correlation among Counseling Process and Difficult Behavior, \( r(120) = .361, p < .0005 \), Counseling Process and Assimilation, \( r(120) = .406, p < .0005 \), Counseling Process and Self-Hatred, \( r(120) = .475, p < .0005 \), and Counseling Process and Multiculturalist, \( r(120) = .347, p < .0005 \). For Counseling Process and Miseducation, \( r(120) = .578, p < .0005 \), Counseling Process and Values, \( r(120) = .575, p < .0005 \), and Counseling Process and Anti-Dominant, \( r(120) = .629, p < .0005 \), there were a strong positive correlation. Counseling Process and Ethnocentricity showed a small positive correlation, \( r(120) = .280, p < .002 \).

Furthermore, the Difficult Behavior (COSE) subscale and CERIS-A subscales were statistically significant. Difficult Behavior and Cultural Competency had a strong positive correlation, \( r(120) = .501, p < .0005 \). Whereas, Difficult Behavior and Ethnocentricity, \( r(120) = .222, p < .0005 \), Difficult Behavior and Multiculturalist, and Difficult Behavior and Ethno-Racial
Salience, $r(120) = .231$, $p < .0005$ had small positive correlations, $r(120) = .260$, $p < .0005$. In addition, Cultural Competency (COSE) subscale and CERIS-A subscales showed small positive correlations for three variables that were statistically significant, Cultural Competence and Values, $r(120) = .187$, $p < .0005$, Cultural Competence and Ethnocentricity, $r(120) = .251$, $p < .0005$, and Cultural Competence and Multiculturalist, $r(120) = .205$, $p < .0005$.

Additionally, Values (COSE) subscale was statistically significant with the CERIS-A subscales. There was a moderate positive correlation between Values and Assimilation, $r(120) = .431$, $p < .0005$ and Values and Self-Hatred, $r(120) = .438$, $p < .0005$. A strong positive correlation between Values and Miseducation, $r(120) = .544$, $p < .0005$, Values and Anti-Dominant, $r(120) = .514$, $p < .0005$, and Values and Ethnocentricity had a small positive correlation, $r(120) = .186$, $p < .041$. In contrast, Values and Multiculturalist had a moderate negative correlation, $r(120) = -.388$, $p < .0005$ (see Table 7).

Table 7

<table>
<thead>
<tr>
<th>Pearson Correlation Matrix</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th></th>
<th>Assimi</th>
<th>ME</th>
<th>SH</th>
<th>AD</th>
<th>Ethno</th>
<th>MI</th>
<th>ERS</th>
<th>CIPS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Microskills</td>
<td>-.377**</td>
<td>-.493**</td>
<td>-.494**</td>
<td>-.627**</td>
<td>-.029</td>
<td>.701**</td>
<td>.229*</td>
<td>-.051</td>
</tr>
<tr>
<td>Counseling Process</td>
<td>.406**</td>
<td>.578**</td>
<td>.475**</td>
<td>.629**</td>
<td>.280**</td>
<td>-.347**</td>
<td>.011</td>
<td>.575</td>
</tr>
<tr>
<td>Difficult Behavior</td>
<td>.017</td>
<td>.096</td>
<td>.118</td>
<td>.132</td>
<td>.222*</td>
<td>.260**</td>
<td>.231*</td>
<td>.093</td>
</tr>
<tr>
<td>Cultural Competence</td>
<td>.110</td>
<td>.123</td>
<td>.041</td>
<td>.053</td>
<td>.251**</td>
<td>.205*</td>
<td>.045</td>
<td>-.176</td>
</tr>
<tr>
<td>Values</td>
<td>.431**</td>
<td>.544**</td>
<td>.438**</td>
<td>.514**</td>
<td>.186*</td>
<td>-.388**</td>
<td>-.102</td>
<td>-.159</td>
</tr>
</tbody>
</table>

Note. Assimi=Assimilation, ME=Miseducation, SH=Self-Hatred, AD=Anti-Dominant, Ethno=Ethnocentricity, MI=Multiculturalist Inclusive, ERS=Ethnic-Racial Salience, CIPS=CIPS Total Score, * = statistically significant at $p < .05$ level, ** = statistically significant at $p < .01$
Research Question 2

To address research question 2, “Does the impostor phenomenon predict each component of counseling self-efficacy (microskills, attending to counseling process, dealing with difficult client behaviors, cultural competence, and awareness of one’s own values) among counseling graduate students of color?” a series of multiple regression analyses were carried out using the counseling self-efficacy subscales as outcomes, and CIPS scores as a predictor. Age and gender were used as control variables. Table 8 shows the results of these regressions. When microskills was considered as the outcome, the CIPS scores (with age and gender as covariates) did not lead to a statistically significant increase in $R^2$, with ($\Delta R^2 = .001, \beta = .004, p = .964$). However, when cultural competence and values (COSE) subscales were considered as outcomes, there was a marginally significant increase in $R^2$ provided by CIPS total scores ($p = .050, p = .055$). Furthermore, age and gender did not significantly predict any outcome (each $p > .05$, see Table 8).

Table 8

Hierarchical Multiple Regression Predicting (COSE) Subscales from CIPS Total Scores, Age, and Gender (N = 120)

<table>
<thead>
<tr>
<th>Regression 1 (Microskills)</th>
<th>B</th>
<th>SE(B)</th>
<th>$\beta$</th>
<th>$t$</th>
<th>$p$</th>
<th>$\Delta R^2$</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td>0.016</td>
<td>0.008</td>
<td>0.181</td>
<td>1.919</td>
<td>0.058</td>
<td></td>
</tr>
<tr>
<td>Gender</td>
<td>-0.185</td>
<td>0.219</td>
<td>-0.077</td>
<td>-0.845</td>
<td>0.400</td>
<td></td>
</tr>
<tr>
<td>CIPS Total Scores</td>
<td>0.005</td>
<td>0.103</td>
<td>0.004</td>
<td>0.045</td>
<td>0.964</td>
<td>0.000</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Regression 2 (Counseling Process)</th>
<th>B</th>
<th>SE(B)</th>
<th>$\beta$</th>
<th>$t$</th>
<th>$p$</th>
<th>$\Delta R^2$</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td>-0.017</td>
<td>0.009</td>
<td>-0.177</td>
<td>-1.873</td>
<td>0.064</td>
<td></td>
</tr>
<tr>
<td>Gender</td>
<td>-0.035</td>
<td>0.243</td>
<td>-0.013</td>
<td>-0.142</td>
<td>0.887</td>
<td></td>
</tr>
<tr>
<td>CIPS Total Scores</td>
<td>-0.019</td>
<td>0.114</td>
<td>-0.016</td>
<td>-0.166</td>
<td>0.868</td>
<td>0.000</td>
</tr>
</tbody>
</table>

(Continued on following page)
<table>
<thead>
<tr>
<th>Regression 3</th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>(Difficult Behavior)</td>
<td>B</td>
<td>SE(B)</td>
<td>β</td>
<td>t</td>
</tr>
<tr>
<td>Age</td>
<td>0.004</td>
<td>0.005</td>
<td>0.081</td>
<td>0.852</td>
</tr>
<tr>
<td>Gender</td>
<td>0.005</td>
<td>0.129</td>
<td>0.004</td>
<td>0.038</td>
</tr>
<tr>
<td>CIPS Total Scores</td>
<td>0.057</td>
<td>0.060</td>
<td>0.091</td>
<td>0.949</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Regression 4</th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>(Cultural Competence)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Age</td>
<td>0.001</td>
<td>0.005</td>
<td>0.025</td>
<td>0.261</td>
</tr>
<tr>
<td>Gender</td>
<td>-0.005</td>
<td>0.124</td>
<td>-0.004</td>
<td>-0.042</td>
</tr>
<tr>
<td>CIPS Total Scores</td>
<td>-0.115</td>
<td>0.058</td>
<td>-0.187</td>
<td>-1.983</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Regression 5</th>
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<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>(Values)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Age</td>
<td>-0.003</td>
<td>0.007</td>
<td>-0.046</td>
<td>-0.490</td>
</tr>
<tr>
<td>Gender</td>
<td>-0.111</td>
<td>0.176</td>
<td>-0.058</td>
<td>-0.634</td>
</tr>
<tr>
<td>CIPS Total Scores</td>
<td>-0.159</td>
<td>0.082</td>
<td>-0.184</td>
<td>-1.940</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Regression 6</th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>(COSE Total Scores)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Age</td>
<td>0.043</td>
<td>0.134</td>
<td>0.031</td>
<td>0.321</td>
</tr>
<tr>
<td>Gender</td>
<td>-1.532</td>
<td>5.207</td>
<td>-0.028</td>
<td>-0.294</td>
</tr>
<tr>
<td>CIPS Total Scores</td>
<td>-0.823</td>
<td>1.665</td>
<td>-0.048</td>
<td>-0.494</td>
</tr>
</tbody>
</table>

Note. N=120, * = statistically significant at p <.05 level, $R^2=.038$ (microskills), $R^2=.030$ (counseling process), $R^2=.011$ (difficult behaviors), $R^2=.038$ (cultural competence), $R^2=.033$ (values), $R^2=.004$ (COSE Total Scores)

The histogram and scatter plot of the residuals on the predicted values are shown below in Figure 4 and Figure 5. These plots indicate approximate normality of residuals and lack of heteroscedasticity of residuals.
Figure 4: Histogram and scatter plots of predicted values on residuals for COSE subscales (and COSE total scores). (Continued on following page).
Figure 4: Continued
Research Question 3

To address research question 3, “Do elements of racial identity attitudes predict the impostor phenomenon among counseling graduate students of color?” a multiple regression
analysis was carried out using the CIPS total scores as outcomes, and CERIS-A subscales scores as a predictor. Age and gender, and COSE subscales scores were used as control variables. Table 9 shows the results of the regression. When CIPS total scores were considered as the outcome, the CERIS-A subscales (with age and gender as covariates) did not lead to a statistically significant increase in $R^2 (\Delta R^2 = .055)$. In addition, when adding COSE subscales as a covariate the results did not lead to a statistically significant increase in $R^2 (\Delta R^2 = .052)$, see Table 9. The histogram and scatter plot of the residuals on the predicted values are shown below in Figure 6 and Figure 7. These plots indicate approximate normality of residuals and lack of heteroscedasticity of residuals.

Table 9
Hierarchical Multiple Regression Predicting CIPS Total Scores from (CERIS-A), Age, Gender, and COSE Subscales (N=120)

<table>
<thead>
<tr>
<th>Regression 1</th>
<th>B</th>
<th>SE(B)</th>
<th>β</th>
<th>t</th>
<th>p</th>
<th>ΔR²</th>
</tr>
</thead>
<tbody>
<tr>
<td>Block 1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>0.072</td>
</tr>
<tr>
<td>Age</td>
<td>-0.020</td>
<td>0.008</td>
<td>-0.251</td>
<td>-2.630</td>
<td>0.010*</td>
<td></td>
</tr>
<tr>
<td>Gender</td>
<td>-0.144</td>
<td>0.202</td>
<td>-0.065</td>
<td>-0.712</td>
<td>0.478</td>
<td></td>
</tr>
<tr>
<td>Block 2</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>0.055</td>
</tr>
<tr>
<td>Assimilation</td>
<td>-0.030</td>
<td>0.094</td>
<td>-0.019</td>
<td>-0.137</td>
<td>0.649</td>
<td></td>
</tr>
<tr>
<td>Miseducation</td>
<td>-0.013</td>
<td>0.094</td>
<td>-0.019</td>
<td>-0.137</td>
<td>0.891</td>
<td></td>
</tr>
<tr>
<td>Self-Hatred</td>
<td>0.143</td>
<td>0.079</td>
<td>0.269</td>
<td>1.799</td>
<td>0.075</td>
<td></td>
</tr>
<tr>
<td>Anti-Dominant</td>
<td>-0.076</td>
<td>0.087</td>
<td>-0.134</td>
<td>-0.868</td>
<td>0.387</td>
<td></td>
</tr>
<tr>
<td>Ethnocentricity</td>
<td>-0.063</td>
<td>0.106</td>
<td>-0.070</td>
<td>-0.596</td>
<td>0.552</td>
<td></td>
</tr>
<tr>
<td>Multiculturalist</td>
<td>0.112</td>
<td>0.085</td>
<td>0.174</td>
<td>1.310</td>
<td>0.193</td>
<td></td>
</tr>
<tr>
<td>Ethnic-Racial Salience</td>
<td>0.038</td>
<td>0.084</td>
<td>0.051</td>
<td>0.455</td>
<td>0.650</td>
<td></td>
</tr>
</tbody>
</table>

Regression 2

<table>
<thead>
<tr>
<th>Regression 2</th>
<th>B</th>
<th>SE(B)</th>
<th>β</th>
<th>t</th>
<th>p</th>
<th>ΔR²</th>
</tr>
</thead>
<tbody>
<tr>
<td>Block 1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>0.164</td>
</tr>
<tr>
<td>Age</td>
<td>-0.016</td>
<td>0.008</td>
<td>-0.198</td>
<td>-2.055</td>
<td>0.042*</td>
<td></td>
</tr>
<tr>
<td>Gender</td>
<td>-0.160</td>
<td>0.199</td>
<td>-0.072</td>
<td>-0.803</td>
<td>0.424</td>
<td></td>
</tr>
<tr>
<td>Microskills</td>
<td>-0.200</td>
<td>0.177</td>
<td>-0.217</td>
<td>-1.130</td>
<td>0.261</td>
<td></td>
</tr>
</tbody>
</table>

(Continued on following page)
Table 9 (continued)

<p>| | | | | | |</p>
<table>
<thead>
<tr>
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<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Counseling Process</td>
<td>0.028</td>
<td>0.136</td>
<td>0.034</td>
<td>0.206</td>
<td>0.837</td>
</tr>
<tr>
<td>Difficult Behavior</td>
<td>0.301</td>
<td>0.204</td>
<td>0.190</td>
<td>1.475</td>
<td>0.143</td>
</tr>
<tr>
<td>Cultural Competence</td>
<td>-0.364</td>
<td>0.190</td>
<td>-0.223</td>
<td>-1.917</td>
<td>0.058</td>
</tr>
<tr>
<td>Values</td>
<td>-0.161</td>
<td>0.136</td>
<td>-0.139</td>
<td>-1.183</td>
<td>0.240</td>
</tr>
<tr>
<td>Block 2</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>0.052</td>
</tr>
<tr>
<td>Assimilation</td>
<td>-0.004</td>
<td>0.064</td>
<td>-0.008</td>
<td>-0.058</td>
<td>0.954</td>
</tr>
<tr>
<td>Miseducation</td>
<td>0.020</td>
<td>0.096</td>
<td>0.030</td>
<td>0.213</td>
<td>0.831</td>
</tr>
<tr>
<td>Self-Hatred</td>
<td>0.111</td>
<td>0.079</td>
<td>0.210</td>
<td>1.414</td>
<td>0.160</td>
</tr>
<tr>
<td>Anti-Dominant</td>
<td>-0.136</td>
<td>0.093</td>
<td>-0.239</td>
<td>-1.453</td>
<td>0.149</td>
</tr>
<tr>
<td>Ethnocentricity</td>
<td>0.010</td>
<td>0.107</td>
<td>0.012</td>
<td>0.097</td>
<td>0.923</td>
</tr>
<tr>
<td>Multiculturalist</td>
<td>0.1545</td>
<td>0.097</td>
<td>0.240</td>
<td>1.590</td>
<td>0.115</td>
</tr>
<tr>
<td>Ethnic-Racial Salience</td>
<td>0.017</td>
<td>0.084</td>
<td>0.023</td>
<td>0.204</td>
<td>0.839</td>
</tr>
</tbody>
</table>

Note. N=120, * = statistically significant at p <.05 level, \( R^2 = .127 \) (Regression 1), \( R^2 = .216 \) (Regression 2)

Figure 6: Histogram and scatter plots of predicted values on residuals for CIPS total scores.

Figure 7: Scatter plots of standardized residuals on predicted values for CIPS total scores.
Research Question 4

To address research question 4, “Do racial identity attitudes have indirect effects on counseling self-efficacy, as mediated by impostor phenomenon among counseling graduate students of color?” results indicated no statistically significant relationship between any of the racial identity subscales and impostor phenomenon. Because these relationships are necessary conditions for impostor phenomenon to mediate indirect relationships between racial identity and counseling self-efficacy, it was clear that mediation was not evident here. Therefore, to examine whether racial identity attitudes had a direct effect on counseling self-efficacy a hierarchical regression analysis was carried out, regressing the COSE subscales scores (and total scores) on the CERIS subscales scores. Age and gender were used as control variables. There were ten statistically significant predictors for the COSE subscale (and COSE total scores). The next section will discuss the results of each regression analyses, see Table 10.

Table 10

Hierarchical Multiple Regression Predicting COSE Subscales (and COSE Total Scores) from (CERIS-A) Subscale Scores, Age, and Gender (N=120)

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<tr>
<th>Regression 1</th>
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<th>t</th>
<th>P</th>
<th>ΔR²</th>
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<tr>
<td>Age</td>
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### Table 10 (continued)

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<th>Regression 6 (COSE Total Scores)</th>
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</table>

Note: N=120, *= statistically significant at p <.05 level, $R^2=.626$ (Regression 1), $R^2=.455$ (Regression 2), $R^2=.188$ (Regression 3), $R^2=.173$ (Regression 4), $R^2=.366$ (Regression 5), $R^2=.265$ (Regression 6)
The first outcome entered was microskills (regression 1), and the anti-dominant and multiculturalist inclusive (CERIS-A) subscales led to a statistically significant increase in $R^2$ ($\Delta R^2 = .588$), with anti-dominant ($\beta = -.362$, $p = 0.001$) and multiculturalist inclusive ($\beta = .470$, $p = 0.001$) subscales significantly predicting the outcome. The second outcome entered was counseling process (regression 2) and miseducation and anti-dominant (CERIS-A) subscales which led to a statistically significant increase in $R^2$ ($\Delta R^2 = .425$), with miseducation ($\beta = .269$, $p = 0.016$) and anti-dominant ($\beta = .436$, $p = 0.001$) subscales emerging as significant predictors. The third outcome entered was difficult behavior (regression 3), where the CERIS-A subscales significantly increased the explained variation ($\Delta R^2 = .184$). Here, the multiculturalist inclusive (CERIS-A) subscale emerged as significant ($\beta = .481$, $p = 0.001$). The fourth outcome entered was cultural competence (regression 4), and ethnocentricity and multiculturalist (CERIS-A) subscales that led to a statistically significant increase in $R^2$ ($\Delta R^2 = .167$), with ethnocentricity ($\beta = .240$, $p = 0.039$) and multiculturalist inclusive ($\beta = .334$, $p = 0.011$). The fifth outcome entered was values (regression 5), and miseducation (CERIS-A) subscale led to a statistically significant increase in $R^2$ ($\Delta R^2 = .364$), with miseducation ($\beta = .327$, $p = 0.007$). The final outcome entered was COSE total scores, and the miseducation and multiculturalist inclusive (CERIS-A) subscales led to a statistically significant increase in $R^2$ ($\Delta R^2 = .257$), with miseducation ($\beta = .278$, $p = 0.031$) and multiculturalist inclusive ($\beta = .501$, $p = 0.001$). The histogram and scatter plot of the residuals on the predicted values are shown below in Figure 8 and Figure 9. These plots indicate approximate normality of residuals and lack of heteroscedasticity of residuals.
Figure 8: Histogram and scatter plots of predicted values on residuals for COSE subscales (and COSE total scores). (Continued on following page).
Figure 8: continued
Figure 9: Scatter plots of standardized residuals on predicted values for COSE subscales (and COSE total scores).
Summary

This study explored the amount of variance in racial identity attitudes, impostor phenomenon scores, and counseling self-efficacy subscale scores while controlling for age and gender. An analysis of the demographic data was examined, which indicated that 110 of the 122 participants were women, 47 self-identified as African American/Black, and 63 held a master’s degree. In addition, many participants reported an area of specialization in Counselor Education and Supervision, they were from the Midwest and have been in their graduate program for two years. This study also examined the reliability of the instruments used within the study and established that the instruments demonstrated good reliability.

The Pearson’s correlation showed that a relationship exists between racial identity attitudes and counseling self-efficacy, and impostor phenomenon and counseling self-efficacy. Through further analysis of the coefficient of determination, which helps determine how much variance is shared among the two variables (Pallant, 2010), the Pearson’s correlation showed twenty-three correlations. A notable finding was that 49% shared variance between microskills (COSE) subscale and the multiculturalist inclusive (CERIS-A) subscale.

In addition, a series of hierarchical multiple regression analyses demonstrated that impostor phenomenon scores did appear to show a marginally significant predictor of the cultural competence and values (COSE) subscales among counseling graduate students of color. Similarly, a hierarchical multiple regression analysis between the COSE subscales (and COSE total scores) and the CERIS-A indicated that the CERIS-A subscales were a statistically significant contributor. On the contrary, racial identity attitude subscales were not found as
significant predictors of impostor phenomenon scores, or when COSE subscales were added as a covariate
The purpose of this study was to explore the relationships among racial identity development, impostor phenomenon, and counseling self-efficacy among counseling graduate students of color. This chapter includes a statement of problem, review of methodology, summary of results, and discussion of the findings. Implications are then presented followed by limitations, recommendations for future research, contributions and conclusion. The following research questions were used to provide a frame of inquiry for this study and each research question pertains to counseling graduate students of color:

1. What are the relationships among racial identity attitudes, impostor phenomenon, counseling self-efficacy?
2. Does the impostor phenomenon predict each component of counseling self-efficacy (microskills, attending to counseling process, dealing with difficult client behaviors, cultural competence, and awareness of one’s own values)?
3. Do elements of racial identity attitudes (assimilation, miseducation, self-hatred, anti-dominant, ethnocentricity, multiculturalist inclusive, and ethnic-racial salience) predict impostor phenomenon?
4. Do racial identity attitudes have indirect effects on counseling self-efficacy, as mediated by impostor phenomenon?
Statement of the Problem

Generally, previous studies have found a relationship between contributing factors (i.e., quality of supervision (Daniels & Larson, 2001; Larson & Daniels, 1998; Larson, Suzuki, Gillespie, Potenza, Bechtel, & Toulouse, 1992; Leach & Stoltenberg, 1997), training experience (Larson & Daniels, 1998; Melchert et al., 1996), counselor age (Watson, 2012), or social desirability (Larson et al., 1992) to the development of counseling self-efficacy among counselors-in-training (Melchert et al., 1996). Although, there is limited research directly examining the role of racial identity development or impostor phenomenon to the development of counseling self-efficacy among counseling graduate students of color, there is also limited literature exploring the experiences of counseling students of color (Regis, 2016). The present investigation was conducted to examine the role of racial identity development, impostor phenomenon, and counseling self-efficacy among counseling graduate students of color as measured by the Cross Ethnic-Racial Identity Scale-Adult (Worrell et al., 2017), Clance Impostor Phenomenon Scale (Clance & Imes, 1978), and Counseling Self-Estimate Inventory (Larson et al., 1992).

Review of the Methodology

This study examined graduate students of color in either a master’s or doctoral counseling program (i.e., counseling psychology, clinical psychology, clinical mental health, counseling, counselor education and supervision, rehabilitation counseling, marriage and family therapy, and school counseling) within the United States. A non-experimental survey design was used to examine the relationships among racial identity attitudes, impostor phenomenon, and counseling self-efficacy variables. Data were obtained by administering an online survey that consisted of the following instruments: (a) a demographic questionnaire developed by the
researcher, (b) the Cross Ethnic-Racial Identity Scale-Adult (CERIS-A), (c) the Clance Impostor Phenomenon Scale (CIPS), and (d) the Counseling Self-Estimate Inventory Scale (COSE). A Pearson’s correlation and a series of multiple regression analyses were performed to examine the relationships and predictive effect of racial identity attitudes and impostor phenomenon scores on the outcome of counseling self-efficacy. In the next section, a summary of the results and discussion of the findings are reviewed.

Summary of Results

This study examined the relationships among racial identity attitudes, impostor phenomenon, and counseling self-efficacy, four research questions provided a frame of inquiry and two research questions were supported. The first research question sought to measure the relationships among racial identity attitudes, impostor phenomenon, and counseling self-efficacy. The Pearson’s correlational analysis found that there was a relationship between racial identity attitudes subscales and counseling self-efficacy subscales. Moreover, the correlation between microskills (COSE) subscale and the multiculturalist inclusive (CERIS-A) subscale had a strong positive correlation. In addition, there was a strong positive correlation between microskills (COSE) subscale) and anti-dominant (CERIS-A) subscale and a strong negative correlation between counseling process (COSE) subscale and anti-dominant (CERIS-A) subscale. On the contrary, the only significant correlation between racial identity attitudes and impostor phenomenon, was the small negative relationship between the cultural competence (COSE) subscale and impostor phenomenon scores.

The second research question examined the predictive relationship between CIPS total scores and COSE subscales (and COSE total scores), controlled by age and gender. The findings indicated that impostor phenomenon does not predict counseling self-efficacy, except when
considering the cultural competence and value (COSE) subscales. Moreover, each of these subscales indicated a marginal significance. In addition, the third research question examined the predictive relationship between racial identity attitudes and CIPS total scores, controlled by age and gender and found that racial identity attitudes does not predict impostor phenomenon.

Lastly, the fourth research question attempted to examine racial identity attitudes and counseling self-efficacy as mediated by impostor phenomenon. However, because a mediational link was not evident, the direct effects of racial identity attitudes on counseling self-efficacy were examined. The results emphasized that racial identity attitudes play an integral role in the development of counseling self-efficacy among counseling graduate students of color.

Discussion of the Findings

Discussion of Findings for Research Question 1

In answering the first research question, what are the relationships among racial identity attitudes, impostor phenomenon, and counseling self-efficacy among counseling graduate students of color. This study found that there were twenty-three correlations among racial identity attitudes, impostor phenomenon, and counseling self-efficacy. In fact, most correlations were between racial identity attitudes and counseling self-efficacy and a notable finding was that there was a 49% shared variance between the multiculturalist inclusive (CERIS-A) subscale and the microskills (COSE) subscale. This finding suggests that there is a positive relationship between a counseling graduate student of color who feels their clinical responses towards their client are effective (i.e., Microskills) and who have a strong connection with their racial group, along with other cultural groups in society (i.e., Multiculturalist Inclusive subscale).
Research has not examined the relationship between racial identity development and the development of counseling self-efficacy. However, this study suggests that there is a link between feeling connected to your racial group and feeling effective in session. In addition, a link between having a willingness to engage with another cultural group and feeling confident that you are effective in session. Moreover, when examining the racial/cultural identity development model (Atkinson, Morten, & Sue, 1989), an individual would be in the fifth phase, meaning an individual has a strong commitment and desire to eliminate all forms of oppression and accept all aspects of cultures (West-Olatunji et al., 2007; Sue & Sue, 2016; Wijeyesinghe & Jackson, 2012).

Similarly, this study found that there was a strong negative correlation, (or a 39% shared variance) between the anti-dominant (CERIS-A) subscale and the microskills (COSE) subscale. Notably the findings indicated that the more a counseling student of color dislikes an individual from the dominant group, the less they feel confident in their effectiveness during a session. This is important, as Van Dinther, Dochy, and Segers (2011), referenced that symptoms such as tension could signify failure and debility, whereas a positive mood state strengthens someone’s self-efficacy. Additionally, Van Dinther, Dochy, and Segers (2011) noted that as people have the capacity to modify their own thinking and feeling, students with a high sense of self-efficacy can view a state of tension as energizing in the face of a performance, whereas those who have self-doubts interpret their tension as debilitating.

As mentioned, most of the findings indicated that there was a relationship between racial identity and counseling self-efficacy, however, there was evidence that there was a small negative correlation (or a 3% shared variance) between the cultural competence (COSE) subscale
and impostor phenomenon scores. These results indicate that counseling graduate students of color who score higher on impostor phenomenon influence their ability to handle issues of diversity. This finding is consistent with Cokley and colleagues (2013) who referenced that elements of IP can increase a students’ doubt. In addition, racial identity components can contribute to the perception of self and with the increased pressure to be accepted (Cokley et al., 2013). Although, research is limited regarding the dyad between impostor phenomenon and racial identity development, Cokley et al. (2013) believed that people of color were susceptible to the impostor phenomenon, similar to the various studies conducted on middle- and upper-middle class professional White women (p. 85). Therefore, feelings of doubt or pressure could impact an individual in moving beyond the first phase of the racial/cultural identity development model (Atkinson, Morten, & Sue, 1989) that suggests individuals will accept the majority societal definitions about their marginalized status in society (West-Olatunji et al., 2007; Sue & Sue, 2016) and can create ambivalence or cultural conflict.

**Discussion of Findings for Research Question 2**

The second research question explored was does impostor phenomenon predict each component of counseling self-efficacy among counseling graduate students of color. The findings are discussed in terms of confidence in demonstrating basic counseling skills (i.e., microskills), counseling process, managing difficult client behaviors, ability to handle issues of diversity (i.e., cultural competence), awareness of personal biases (i.e., values), and overall impostor phenomenon experiences. Consistent with previous research (Clance, 1985; Roskowski, 2010), the findings indicated that there was a negative relationship between impostor phenomenon and counseling self-efficacy. Moreover, this study reflected that there was a
negative relationship between the impostor phenomenon scores and the cultural competence and values (COSE) subscales. Stating that higher scores of impostor phenomenon among counseling graduate student of color will decrease the ability to handle issues of diversity and having the confidence in being able to manage personal biases. Furthermore, these results make sense in that when a counselor (especially a counselor-in-training) experiences feelings of shame, fear of failure, or an intense amount of distress (a sign of impostor phenomenon) (Clance, 1985; Clance & Imes, 1978; Harvey & Katz, 1985; Kets de Vries, 2005; Kolligan & Sternberg, 1991; Sonnak & Towell, 2001), confronting difficult topics, such as diversity issues or examining personal biases can be impacted during session among counseling graduate students of color.

Despite the influence of impostor phenomenon on the cultural competence and values (COSE) subscales, other factors such as racial identity development may have reduced the impact of impostor feelings on the other COSE subscales (i.e., microskills, counseling process, or managing difficult behaviors). For example, Sellers, Copeland-Linder, Martin, and Lewis, (2006) indicated that having a positive racial identity has been linked to lower levels of stress, depressive symptoms, and increased psychological well-being. However, Cokley et al. (2013) indicated that minority groups are more susceptible in developing impostor phenomenon in regards to academic performance. Interestingly, in this study, 97.5% of the participants scored high on the counseling self-estimate inventory scale and 81.2% showed a moderate or high presence of impostor phenomenon.

Discussion of Findings for Research Question 3

This was the first study to explore the relationship between racial identity attitudes and impostor phenomenon among counseling graduate students of color. In addition, there is limited
theoretical support and sparsely available in the literature. In this study, impostor phenomenon did not statistically predict racial identity attitudes among counseling graduate students of color. Previous studies examining the relationship between racial/ethnic identity and impostor phenomenon (Ahlfeld, 2009; Austin et al., 2009; Cokley et al., 2013; Copeland-Linder, Martin, & Lewis, 2006; Ewing et al., 1996; Lige, Peteet, & Brown 2017; Kwan, 2015; McClain et al., 2016; Peteet, Montgomery, & Weekes, 2015; Porter & Washington, 1993, 1979) have indicated that minority groups do experience impostor phenomenon at different levels. Specifically, Asian American students develop impostor phenomenon more than African Americans and Latinx Americans due to perfectionistic tendencies, dealing with academic stress from the model minority beliefs and parental expectations (Cokley et al., 2013).

While this study examined racial identity attitudes and impostor phenomenon among counseling graduate students of color, previous studies focused on specific racial groups. Ewing et al. (1996) focused on African American graduate students. Ewing et al. (1996), indicated similar findings in that impostor feelings were not related to one’s status of racial identity attitudes. However, the researchers proposed that other factors, such as academic self-concept or an individual’s worldview are better predictors of an individual experiencing impostor feelings than racial identity attitudes (Ewing et al., 1996). Furthermore, this study indicated that high levels of self-confidence will attribute to lower levels of experiencing impostor feelings in graduate school (Ewing et al., 1996). Similarly, Austin et al. (2009) and Ewing et al. (1996) referenced that the knowledge and implications of being a student of color may be associated with positive feelings of IP. As mentioned, despite results indicating that IP scores were prevalent among the participants, IP does not predict racial identity attitudes. Other factors, such
as academic performance or a specific racial group, such as Asian Americans could indicate statistical significance with IP.

Discussion of Findings for Research Question 4

Research question four, explore whether racial identity attitudes have indirect effects on counseling self-efficacy, as mediated by impostor phenomenon. The data indicated that there were no relationships between racial identity attitudes and impostor phenomenon, therefore, the conditions for impostor phenomenon to mediate indirect relationships between racial identity attitudes and counseling self-efficacy was not evident. However, an investigation to examine whether racial identity attitudes had a direct effect on counseling self-efficacy was conducted. It was found that racial identity attitudes were a predictor of counseling self-efficacy. A significant finding was that 62.2% of the variance for microskills (counseling self-efficacy) can be explained by the racial identity attitudes subscales (predictor variables). Specifically, there was a negative correlation between anti-dominant (racial identity attitudes) and microskills (counseling self-efficacy). Indicating that higher counseling self-efficacy beliefs decreases a counselors dislike for the dominant group. Whereas, when a counselor-in-training feels confident in demonstrating basic counseling skills (i.e, microskills), there is a positive correlation with their racial group and willingness to engage with another cultural group.

Moreover, this was the first study to explore the relationships between racial identity attitudes, counseling self-efficacy, and counseling graduate students of color. Importantly, it seems that an increased racial identity attitude, such as multiculturalist inclusive can impact a counselor-in–trainings knowledge and skills to deal with challenging clients. However, on the contrary, the counseling process (COSE) subscale (actions between a client and a counselor) can
positively impact the development of anti-dominant attitudes (i.e., the dislike for the dominant group). These findings add to the gap in literature by providing additional evidence that performance accomplishments are authentic successes in dealing with a situation (Van Dinther, Dochy, & Segers, 2011) and racial identity is a strong protective factor that may bolster positive coping responses (Cokley et al., 2013; Greene, Way, & Pahl, 2006; Rowley, Sellers, Chavous, & Smith, 1998). Therefore, when supporting graduate students of color in developing counseling self-efficacy, it would be important to focus on basic counseling skills (i.e., microskills), in relation to them working with a member from the dominant group or assessing their connection with their own racial group.

Implications for Counselor Training Programs

As mentioned, exploring the constructs racial identity development, impostor phenomenon, and counseling self-efficacy would normalize and validate experiences among students of color and increase awareness among counselor educators about the relationships. In fact, the results suggested the value of exploring racial identity development and counseling self-efficacy. For example, exploring topics with students of color early in training, such as what does it feel like working with a client from a dominant group. Another example would be encouraging counselor educators to evaluate knowledge and skill development through instructional learning to increase awareness of personal assumptions/values/biases, and creating opportunities for experiential training activities, such as felt experiences or cultural immersion experiences among students of color (Denevi & Pasten, 2006; DeRicco & Sciarra, 2005; Kim & Lyons, 2003). Similarly, receiving necessary instruction and guidance in counseling interventions that take racial identity development into context would be beneficial. For example, utilizing tools such as
the addressing framework to enable counselors in recognizing and understanding cultural influences from a multidimensional lens [i.e., age, developmental disabilities, religion, ethnicity, socioeconomic status, sexual orientation, indigenous heritage, national origin, and gender] (Hayes, 2001). Another implication might be to ensure that counselor trainees of color have an opportunity to work with diverse faculty or mentoring programs that support opportunities for racial identity development and counseling self-efficacy.

In addition, to move forward as a profession, it is necessary for counselor educators to recognize the importance of racial identity development and counseling self-efficacy among graduate students of color. One recommendation would be for counselor educators and supervisors to infuse racial identity development topics throughout the curriculum to support developmental growth and learning about self and others. Similarly, limiting discussions about racial identity development to multicultural classes or waiting until practicum could enforce minority status stress or a lack of confidence (Fries-Britt & Griffin, 2007; Smedley, Myers, & Harrell, 1993). Therefore, it is vital that counselor educators work intentionally to transform their environments and promote inclusion and diversity in training, supervision, mentoring relationships, and instruction to support counseling graduate students of color. Williams (2016) referenced the importance of seeking to ensure equitable minority representation by addressing the disparity of faculty and staff of color within counselor education and supervision programs. In addition, Worthington, Mobley, Franks, & Tan (2000) suggested that supervisors and educators consider teaching students about the importance of understanding both individualistic and collectivist orientation to be able to better address diverse populations, especially as it relates to racial identity development, impostor phenomenon, and counseling self-efficacy.
It might also prove beneficial for counselor education programs to encourage mentoring, observational learning, and network programs (or social support on campus) among students and faculty of color, as this would reinforce the fact that social support (i.e., peers) and validation is a method of reducing anxiety or stress (due to symptoms of impostor phenomenon) or supporting the development of counseling self-efficacy within racially different groups (Kirby, White, & Aruguete, 2007; Malcom & Dowd, 2011; Sue, Capodilupo, & Holder, 2008). Moreover, from a universalistic approach to educational research, Betz (2007) noted that teaching interventions should be rooted in self-efficacy theory, such as, performance, vicarious learning or modeling, physiological and affective states, and social persuasion to support developmental growth in the area of counseling self-efficacy.

Limitations

Despite the contributions of the current study, limitations exist. One of the limitations are the researcher recruited participants through listservs, other online resources, and personal networking. Therefore, this study may have excluded counseling graduate students of color who were not identified using the snowball sampling method. Given the difficulty recruiting counseling graduate students of color it is possible that a fully representative sample of population was not obtained. Moreover, generalizability of the findings may have been impacted.

The fact this study is non-experimental, collected by survey and a self-report measure, could pose a problem when it comes to accuracy of results, as all measures involved participant’s perceptions. Therefore, responses may not accurately reflect participants’ lived experiences and the researcher is unable to determine accuracy of the respondent’s answers. In addition, regardless of anonymity, students may have provided socially desirable responses, especially for
those on the CERIS-A scale and CIPS, due to the nature of some of questions (e.g. Self-Hatred and Anti-White items, or “sometimes I’m afraid others will discover how much knowledge or ability I really lack”). Jann, Krumpal, and Wolter (2019) referenced using conventional approaches, such as wording or filtering techniques, or mixed-mode design to alleviate or avoid response biases to assist with data collection.

Recommendations for Future Research

With the new understanding that racial identity development does predict counseling self-efficacy, it would be important for future research to explore the role of a connection with one’s race (i.e., multiculturalist inclusive attitudes) or a dislike for the dominant group (i.e., anti-dominant attitudes) as contributing factor to counseling self-efficacy and racial identity development among counseling graduate students of color. Subsequently, utilizing a phenomenological analysis would assist with understanding the lived experiences of counseling graduate students of color and determining what factors contribute to the relationship between racial identity development and counseling self-efficacy. Similarly, exploring if there is a difference between master and doctoral students of color in relation to racial identity development and counseling self-efficacy and examining if the number of years in a program impacts the development of racial identity, impostor phenomenon or counseling self-efficacy. In addition, future research would benefit from examining one specific racial/ethnic group in relation to racial identity development, impostor phenomenon, and counseling self-efficacy. Notably, future research would benefit from investigating the role of diversity issues and the sense of self-doubt. Lastly, another recommendation would be to examine the development of
racial identity, impostor phenomenon, and counseling self-efficacy among counselor education programs or those specific to other counseling disciplines (i.e., counseling psychology, clinical psychology, or marriage and family).

Conclusion

One of the greatest strengths of this study is that it utilized a national (diverse geographical locations) dataset of counseling graduate students of color. The results of this study contributed to the existing literature on the influence of racial identity attitudes, impostor phenomenon, and counseling self-efficacy among counseling graduate students of color. Furthermore, this is the first study to both explore the relationship between racial identity attitudes and counseling self-efficacy and exclusively looking at graduate students of color from varying racial identities.

In conclusion, this study examined the relationship among racial identity development, impostor phenomenon, and counseling self-efficacy among counseling graduate students of color. The results found that impostor phenomenon does not predict racial identity development. However, racial identity development and impostor phenomenon predict counseling self-efficacy. Indicating that it is imperative for counseling training programs to explore the role of racial identity development and impostor phenomenon early to support the development of counseling self-efficacy among students of color. In addition, this study contributed to the gap in literature regarding counseling graduate students of color and this research is necessary with the increasingly racially diverse students of color pursuing graduate programs in mental health. Therefore, increasing and expanding upon diversity and inclusion through mentorship (experience), training, and supervision will lead to a greater degree of counseling self-efficacy
among counseling graduate students of color and client outcome, along with normalizing and validating the experience of counseling graduate students of color.
REFERENCES


APPENDIX A

RECRUITMENT EMAIL
Greetings!

I hope this email finds you well.

My name is Erica Wade and I am a Doctoral Candidate in the Department of Counseling, Adult & Higher Education majoring in Counselor Education and Supervision CACREP counseling program at Northern Illinois University. I am writing to request your participation in a research study that is intended to explore racial identity development, counselor self-efficacy, and impostor phenomenon among counseling graduate students of color.

Criteria for participation are:

- A graduate student who identifies as either Black or African American, Asian or Asian American, Hispanic or Latinx American, Native Hawaiian or Pacific Islander, American Indian or Alaskan Native, Middle Eastern or Arab American, or multiracial/multiethnic and majors in: counselor education and supervision, school counseling, clinical mental health, counseling psychology, rehabilitation counseling, marriage and family therapy, or clinical psychology

Participants are asked to complete an online 92-item survey that will take approximately 15-20 minutes to complete, from either a mobile device or a computer.

If you are interested in participating, please follow the link below:

https://niu.az1.qualtrics.com/jfe/form/SV_06tc7bOd704rz25

Please be assured that your responses will remain anonymous and confidential. At no time should you add your name to the survey. Your participation is voluntary and you may exit the survey at any time for any reason.

If you have any additional questions concerning this study, you can contact Erica Wade at z956718@students.niu.edu or Dr. Teresa Fisher, at TAFisher@niu.edu or Dr. Dana Isawi, at disawi@niu.edu, Dissertation co-Chairs (IRB #HS18-0188). If you would like further information regarding your rights as a research participant, you can contact the Office of Research Compliance at Northern Illinois University at 815-753-8588.

Thank you for considering my request!

Sincerely,

Erica Wade, M.S., LCPC, ACS
APPENDIX B

REMINDER EMAIL
Hello,
Thank you to all who have participated. Below is a friendly reminder requesting participants for my survey. If you are interested in participating, please follow the link below:
https://niu.az1.qualtrics.com/jfe/form/SV_06tc7bOd704rz25

Have a good evening!!! Erica

Recruitment email:
My name is Erica Wade and I am a Doctoral Candidate in the Department of Counseling, Adult & Higher Education majoring in Counselor Education and Supervision CACREP counseling program at Northern Illinois University.
I am writing to request your participation in a research study that is intended to explore racial identity development, counselor self-efficacy, and impostor phenomenon among counseling graduate students of color.
Criteria for participation are:

- A graduate student who identifies as either Black or African American, Asian or Asian American, Hispanic or Latinx American, Native Hawaiian or Pacific Islander, American Indian or Alaskan Native, Middle Eastern or Arab American, or multiracial/multiethnic;
- and majors in: counselor education and supervision, school counseling, clinical mental health, counseling psychology, rehabilitation counseling, marriage and family therapy, or clinical psychology

Participants are asked to complete an online 92-item survey that will take approximately 15-20 minutes to complete, from either a mobile device or a computer.
If you are interested in participating, please follow the link below:
https://niu.az1.qualtrics.com/jfe/form/SV_06tc7bOd704rz25

Please be assured that your responses will remain anonymous and confidential. At no time should you add your name to the survey. Your participation is voluntary, and you may exit the survey at any time for any reason.
If you would like to be selected for a $50 gift card, participants can provide their email address to be included in a random drawing.
If you have any additional questions concerning this study, you can contact Erica Wade at z956718@students.niu.edu or or Dr. Teresa Fisher, at TAFisher@niu.edu or Dr. Dana Isawi, at disawi@niu.edu, Dissertation co-Chairs (IRB# HS18-0188). If you would like further information regarding your rights as a research participant, you can contact the Office of Research Compliance at Northern Illinois University at 815-753-8588.
Thank you for considering my request and please share this email with your classmates!
Hello,
Thank you again to all who have participated!
Below is final reminder requesting participation in my study. Additional information about the survey is below. Please select the link to participate:
https://niu.az1.qualtrics.com/jfe/form/SV_06tc7bOd704rz25
Also, please pass along the email to your colleagues and fellow classmates
Sincerely,
Erica
APPENDIX D

EMAIL SOLICITATION-TRAINING DIRECTORS AND PROGRAM COORDINATORS
Dear Training Director/Program Coordinator:

I hope this email finds you well.

My name is Erica Wade and I am a Doctoral Candidate in the Department of Counseling, Adult & Higher Education majoring in Counselor Education and Supervision CACREP counseling program at Northern Illinois University. I am writing to request your support in the recruitment of participants for a research study that is intended to explore racial identity development, counselor self-efficacy, and impostor phenomenon among counseling graduate students of color. The criteria for participation is:

- A graduate student who identifies as either Black or African American, Asian or Asian American, Hispanic or Latinx American, Native Hawaiian or Pacific Islander, American Indian or Alaskan Native, Middle Eastern or Arab American, or multiracial/multiethnic and majors in a graduate level counseling program, such as counselor education and supervision, clinical psychology, counseling psychology, counseling (master), school counseling, marriage and family therapy, or rehabilitation counseling.

Participants are asked to complete an online 92-item survey that will take approximately 15-20 minutes to complete, from either a mobile device or a computer.

Please be assured that responses will remain anonymous and confidential and participants can exit the survey at any time for any reason.

If participants have questions concerning this study, they can contact Erica Wade at z956718@students.niu.edu or Dr. Teresa Fisher, at TAFisher@niu.edu or Dr. Dana Isawi, at disawi@niu.edu, Dissertation Co-Chairs (IRB #HS18-0188). If they would like further information regarding their rights as a research participant, they can contact the Office of Research Compliance at Northern Illinois University at 815-753-8588.

The survey link is provided below:

https://niu.az1.qualtrics.com/jfe/form/SV_06tc7bOd704rz25

Thank you for your time.

Sincerely,

Erica Wade, M.S., LCPC, ACS
APPENDIX E

INFORMED CONSENT
I agree to participate in the research study exploring influences of one’s racial identity development and impostor phenomenon as it relates to counselor self-efficacy among counseling graduate students of color, being conducted by Erica Wade, doctoral candidate in Counselor Education and Supervision in the Department of Counseling, Adult & Higher Education at Northern Illinois University.

I have been informed that the purpose of the study is:
1. To explore master and doctoral students’ experiences of the impostor phenomena, racial identity development, and counselor self-efficacy;
2. To increase strategies and support for counselors and supervisors in how to understand the impacts of impostor phenomenon, racial identity development, and counselor self-efficacy among counseling graduate students of color;
3. To determine what specialized skills support counselor competency;
4. To determine if racial identity development, impostor phenomenon, and counselor self-efficacy contribute to counselor competency and the counseling profession.

I understand that if I agree to participate in this study, I will be asked to:
1. Complete an online survey, totaling 92 items;
2. Complete an online survey that will take approximately 10-15 minutes to complete.

I am aware that my participation is voluntary and may be withdrawn at any time without penalty or prejudice. If I have any additional questions concerning this study, I may contact Erica Wade at z956718@students.niu.edu or 815-901-3769 or Dr. Teresa Fisher, at TAFisher@niu.edu or Dr. Dana Isawi, at disawi@niu.edu. Dissertation co-Chairs. I understand that if I would like further information regarding my rights as a research subject, I may contact the Office of Research Compliance at Northern Illinois University at (815) 753-8588.

I understand that the intended benefits of this study include:
1. Expansion of the knowledge base and empirical research regarding the field of counselor education and supervision;
2. Empirical data about the counselor competency of a professional counselor.

I have been informed that potential risks and/or discomforts I could experience during this study include nothing more harmful than the completion of any other daily activity related to using an electronic device to complete the survey instrument. I understand that all information gathered during this experiment will be kept confidential by:
1. Not collecting IP addresses from respondents;
2. Maintaining data results on computers requiring a password which only the researcher has access to;
3. Not collecting personally identifiable information on the questionnaire;
4. Destroying the data in compliance with university policy on research compliance.

I understand that my consent to participate in this project does not constitute a waiver of any legal rights or redress I might have because of my participation, and I acknowledge that I have read and understand the information contained in this consent form.

I understand that, by clicking the "Agree" button, I am providing my informed consent to participate in this study.
APPENDIX F

END OF SURVEY INSTRUCTIONS
Thank you for participating in this survey. Please be assured that your responses will remain anonymous and confidential. If you are willing, please forward the link or the email containing the link to your classmates, as this will help ensure a representative sample.

If you are experiencing any emotional distress related to completing this survey, please consult with a counselor either at your university counseling center or a mental health provider in your area.

Additionally, if you would like to participate in a random drawing for a $50 gift card, please send your email to z956718@students.niu.edu

Also, if you are interested in receiving a copy of the results of the study you may reach me via email at z956718@students.niu.edu
APPENDIX G

DEMOGRAPHIC QUESTIONNAIRE
1. Age
2. Gender Identity
   a. Man
   b. Woman
   c. Transgender
   d. Non-binary
   e. Self-identify: _______________
3. Racial/Ethnic Identity
   a. African American/Black
   b. American Indian or Alaskan Native
   c. Asian
   d. Asian American
   e. Hispanic/Latinx
   f. Native Hawaiian or Pacific Islander
   g. Middle Eastern
   h. Arab American
   i. Multiracial
   j. Self-identify: _______________
4. What degree are you seeking?
   a. Ed.D/Ph.D/Psy.D
   b. MA/MS/MS.Ed
5. Area of specialization?
   a. Clinical Psychology
   b. Clinical Mental Health
   c. Counselor Education and Supervision
   d. Counseling (master)
   e. Counseling Psychology
   f. Marriage and Family Therapy
   g. Rehabilitation Counseling
   h. School Counseling
   i. Other (self-identify): _____________________
6. Location of your program?
   a. Northeast
   b. Mid-Atlantic
   c. Midwest
   d. South East
   e. South West
   f. West
   g. North West
APPENDIX H

PERMISSION OF AUTHOR TO USE COSE
May 29, 2018

Dear Ms. Wade,

Thank you for your interest in using The Counseling Self-Estimate Inventory (COSE). I am happy to grant you permission to use the instrument for **one year for one study**.

I have attached a copy of the instrument and a list of references in which the COSE has been used. The instructions read for people to indicate their answers on the instrument. An alternative that we are doing is to use answer sheets so the inventories can be reused. Also there is no place for the person to indicate demographics and identification. You need to include this on a separate sheet of your own design.

The following items on the COSE are reversed scored: Items 2, 6, 7, 9, 16, 18, 19, 21, 22, 23, 24, 26, 27, 28, 31, 33, 35, 36, & 37.

The factors consist of the following items:

- **Factor 1: Microskills**: Item 1, 3, 4, 5, 8, 10, 11, 12, 14, 17, 32, 34.
- **Factor 2: Counseling Process**: Items 6, 9, 16, 18, 19, 21, 22, 23, 31, 33.
- **Factor 3: Dealing with Difficult Client Behaviors**: Items 15, 20, 24, 25, 26, 27, 28.
- **Factor 4: Cultural Competence**: Items 29, 30, 36, 37.
- **Factor 5: Values**: Items 2, 7, 13, & 35.

I recommend use of the total score rather than the factor scores separately. I have also included some reliability information and validity information for you regarding the measure. If this is a dissertation, please do not include the measure in your published dissertation since it is copyrighted.

Best wishes in your research endeavors.

Warmly,

Lisa McLarson, Ph.D.
APPENDIX I

PERMISSION OF AUTHOR TO USE CERIS-A
Hi Erica,

Thanks for your interest in our scale — you can certainly use it for your dissertation. The manual for the CERIS-A is attached. Best wishes in your study, we would appreciate you sharing your findings with us.

Frank
APPENDIX J

PERMISSION OF AUTHOR TO USE CIPS
Dear Erica,

I am replying to your IP request on behalf of Dr. Clance. You have permission to use and make copies of the scale (CIPS) and I have attached it along with the scoring. **Also please read the permission form, included with the scale, and reply with your consent.** I have further included an IP Reference list (not all inclusive) for your use to make available for participants if they want to know more about the IP and you could refer them to Dr. Clance’s website: <http://www.paulineroseclance.com>

Thank you for your interest in the Impostor Phenomenon!

Sincerely,

Andra
APPENDIX K

COUNSELING SELF-ESTIMATE INVENTORY (COSE)
General Instructions: This is not a test. There are no right or wrong answers. Rather, it is an inventory that attempts to measure how you feel you will behave as a counselor in a counseling situation. Please respond to the items as honestly as you can so as to most accurately portray how you think you will behave a counselor. Do not respond with how you wish you could perform each item—rather answer in a way that reflects your actual estimate of how you will perform as a counselor at the present time.

Below is a list of 37 statements. Read each statement, and then indicate the extent to which you agree or disagree with that statement, using the following alternatives:

1= Strongly Disagree
2= Moderately Disagree
3= Slightly Disagree
4= Slightly Agree
5= Moderately Agree
6= Strongly Agree
APPENDIX L

CLANCE IMPOSTOR PHENOMENON SCALE (CIPS)
For each question, please circle the number that best indicates how true the statement is of you. It is best to give the first response that enters your mind rather than dwelling on each statement and thinking about it over and over.

1. I have often succeeded on a test or task even though I was afraid that I would not do well before I undertook the task.
   
   1                                    2                                    3                                    4                                    5
   (not at all true) (rarely) (sometimes) (often) (very true)

2. I can give the impression that I’m more competent than I really am.
   
   1                                    2                                    3                                    4                                    5
   (not at all true) (rarely) (sometimes) (often) (very true)

3. I avoid evaluations if possible and have a dread of others evaluating me.
   
   1                                    2                                    3                                    4                                    5
   (not at all true) (rarely) (sometimes) (often) (very true)

4. When people praise me for something I’ve accomplished, I’m afraid I won’t be able to live up to their expectations of me in the future.
   
   1                                    2                                    3                                    4                                    5
   (not at all true) (rarely) (sometimes) (often) (very true)

5. I sometimes think I obtained my present position or gained my present success because I happened to be in the right place at the right time or knew the right people.
   
   1                                    2                                    3                                    4                                    5
   (not at all true) (rarely) (sometimes) (often) (very true)

6. I’m afraid people important to me may find out that I’m not as capable as they think.
   
   1                                    2                                    3                                    4                                    5
   (not at all true) (rarely) (sometimes) (often) (very true)

7. I tend to remember the incidents in which I have not done my best more than those times I have done my best.
   
   1                                    2                                    3                                    4                                    5
   (not at all true) (rarely) (sometimes) (often) (very true)

8. I rarely do a project or task as well as I’d like to do it.
   
   1                                    2                                    3                                    4                                    5
   (not at all true) (rarely) (sometimes) (often) (very true)

9. Sometimes I feel or believe that my success in my life or in my job has been the result of some kind of error.
   
   1                                    2                                    3                                    4                                    5
   (not at all true) (rarely) (sometimes) (often) (very true)
10. It’s hard for me to accept compliments or praise about my intelligence or accomplishments.

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11. At times, I feel my success has been due to some kind of luck.

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12. I’m disappointed at times in my present accomplishments and think I should have accomplished much more.

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13. Sometimes I’m afraid others will discover how much knowledge or ability I really lack.

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14. I’m often afraid that I may fail at a new assignment or undertaking even though I generally do well at what I attempt.

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<td>rarely</td>
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15. When I’ve succeeded at something and received recognition for my accomplishments, I have doubts that I can keep repeating that success.

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<td>rarely</td>
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16. If I receive a great deal of praise and recognition for something I’ve accomplished, I tend to discount the importance of what I’ve done.

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<td>rarely</td>
<td>sometimes</td>
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17. I often compare my ability to those around me and think they may be more intelligent than I am.

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<tr>
<td>not at all true</td>
<td>rarely</td>
<td>sometimes</td>
<td>often</td>
<td>very true</td>
</tr>
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18. I often worry about not succeeding with a project or examination, even though others around me have considerable confidence that I will do well.

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<tbody>
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<td>sometimes</td>
<td>often</td>
<td>very true</td>
</tr>
</tbody>
</table>

19. If I’m going to receive a promotion or gain recognition of some kind, I hesitate to tell others until it is an accomplished fact.

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<td>sometimes</td>
<td>often</td>
<td>very true</td>
</tr>
</tbody>
</table>
20. I feel bad and discouraged if I’m not “the best” or at least “very special” in situations that involve achievement.

1 (not at all true) 2 (rarely) 3 (sometimes) 4 (often) 5 (very true)

Note: From The Impostor Phenomenon: When Success Makes You Feel Like A Fake (pp. 20-22), by P.R. Clance, 1985, Toronto: Bantam Books. Copyright 1985 by Pauline Rose Clance, Ph.D., ABPP. Reprinted by permission. Do not reproduce without permission from Pauline Rose Clance, drpaulinerose@comcast.net
APPENDIX M

CROSS ETHNIC-RACIAL IDENTITY SCALE: ADULT (CERIS-A)
Frank C. Worrell, Beverly J. Vandiver, William E Cross, Jr., and Peony E. Fhagen

**Instructions:** Read each item and indicate *to what degree it reflects your own thoughts and feelings with regard to the ethnic/racial group that you identify with*, using the 7-point scale below. There are no right or wrong answers. Base your responses on your opinion at the present time. **To ensure that your answers can be used, please respond to the statements as written,** and indicate your response by selecting your choice.
APPENDIX N

INSTITUTIONAL REVIEW BOARD APPLICATION
Exempt Determination

26-Jul-2018
Erica Wade
Counseling, Adult and Higher Education

RE: Protocol # HS18-0188 "Counselor Self-efficacy Re-examined: Components of Racial Identity Development and Impostor Phenomena among counseling graduate students of color"

Dear Erica Wade,

Your application for institutional review of research involving human subjects was reviewed by Institutional Review Board #1 on 26-Jul-2018 and it was determined that it meets the criteria for exemption 2.

Although this research is exempt, you have responsibilities for the ethical conduct of the research and must comply with the following:

Amendments: You are responsible for reporting any amendments or changes to your research protocol that may affect the determination of exemption and/or the specific category. This may result in your research no longer being eligible for the exemption that has been granted.

Record Keeping: You are responsible for maintaining a copy of all research related records in a secure location, in the event future verification is necessary. At a minimum these documents include: the research protocol, all questionnaires, survey instruments, interview questions and/or data collection instruments associated with this research protocol, recruiting or advertising materials, any consent forms or information sheets given to participants, all correspondence to or from the IRB, and any other pertinent documents.

Please include the protocol number (HS18-0188) on any documents or correspondence sent to the IRB about this study.

If you have questions or need additional information, please contact the Office of Research Compliance, Integrity, and Safety at 815-753-8588.
APPENDIX O

SCATTERPLOT MATRIX OF CORRELATIONS AMONG STUDY VARIABLES
APPENDIX P

BOXPLOTS FOR SUBSCALE SCORES FROM COSE SCALE
APPENDIX Q

BOXPLOTS FOR SUBSCALE SCORES FROM CERIS-A SCALE
APPENDIX R

BOXPLOTS FOR SUBSCALE SCORES FROM CIPS SCALE