Attributions on Treatment of Low Socioeconomic Status Clients and Counselor Training for Perspective Taking

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Abstract: As educators of mental health professionals, in medical schools and with devising unique multicultural training in counseling and psychotherapy, we have utilized various perspective taking training methods for students to gain insight into the plight of the 'other', specifically, those who are less fortunate in society. We wanted to investigate if the training of counselors and psychotherapists is lacking in this realm, especially when practicing in the real world and with the disadvantaged New York Metropolitan population that we so often intend to serve. We used qualitative research, with Epoche methodology to ensure intercoder relatability, to examine the link between psychotherapists' social class attributions and their experiences with low socioeconomic status (SES) clients. Interview questions inquired into the attributions of Ten (10) psychotherapists with different training levels concerning social class and treatment outcomes. Results revealed that psychotherapists view the issue of poverty from a situational or attributional perspective. That meant that psychotherapists might view clients as responsible for living in poverty and might not be empathetic to the clients. Based on our findings we hope that measures are taken by our colleagues (across the USA and internationally) to enhance perspective taking activities within curriculums.

Keywords: Poverty, Psychotherapy and Counselor Training, Social Class Attributions, Socioeconomic Status, Perspective Taking, Classism

Introduction

In the past years we were very proud of the various ways that we taught empathic understanding to medical students and to students in counselor training, especially with our unique perspective taking methodology, embedded in our unique curricula, enhanced by emerging technology, and especially infused into our e-mental health training (Gardere, Sharir & Maman, 2017). This is where students' perspective proved useful when training them to work with underserved populations, where they can learn about themselves and their environment. We felt that especially with e-mental health technology every trainee needed to tackle difficult questions: How do I perceive myself? How do others perceive me? This was helpful for us to ascertain how attributions on treatment of underserved or low socioeconomic clients manifested in our training. We needed students to get a true account of their environment, to gain a better understanding of what is really going on around them, in any given situation and in life and in general (Gardere, Sharir & Maman, 2017). However, the ever increasing rate of inequality in the USA and the exacerbated situation of poverty and homelessness in America's big cities in recent years led to a need for us to survey not only our graduates but graduates of other counselor training programs, in order to see to what extent the training is effective for students to gain insight into the plight of the 'other' during this trying time in our nation's history, specifically, to see how we can train students to best help those who are less fortunate in our society, now, and in the near future.

In the United States, people from a lower

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socioeconomic status are often discriminated against (Kraus & Stephens, 2012; Peterman, 2018). Discrimination often occurs because individuals base their decisions and actions on the way they perceive the world through their stereotypes and cognitive attributions (Thompson et al., 2014). People rely on cognitive attributions to make sense of the world and guide their decisions and actions (Thompson et al., 2014). These cognitive attributions can be internal about a person or external about a person's situation, for instance, their socioeconomic status. Thompson el al. (2014) stated that these social class attributions could be complex due to the belief in the United States that a person has many barriers to overcome to achieve success, but that success can be achieved with hard work. Additionally, there is an association between discrimination and socioeconomic status and mental health (Gamarel, Reisner, Parsons, & Golub, 2012). Clinicians who have classist attitudes towards people from a lower social class may communicate devaluing messages to their clients (Appio, Chambers, & Mao, 2013). The purpose of this qualitative study was to examine the links between psychotherapists' social class attributions and their experiences treating low socioeconomic status (SES) clients in actual clinical settings.

Social class has a strong impact on peoples' perception of others (Balmforth, 2009). The general public has demeaning attitudes towards people from a lower socio-economic class, and people often characterize these people as lazy, irresponsible, and amoral (Smith, Allen, & Bowen, 2010). According to Cozzarelli, Wilkinson, & Tagler (2001), attitudes towards low-income individuals are more negative than attitudes toward the middle class. Ali and Lees (2013) suggest that these negative reactions to low-income individuals are connected to the beliefs regarding the root causes of poverty. Americans acknowledge that there are many reasons for poverty but tend to assign more dispositional causes for poverty. They are more likely to believe that low-income individuals are lazy and unwilling to work, which implies a dispositional attribution for poverty. Conversely, believing that the low-income individuals are struggling in a difficult economic situation implies a situational attribution for poverty (Ali & Lees, 2013).

Psychotherapists can also make attributions based on their client's social SES, associating their clients' lower SES to negative attributes, such as being uneducated, unmotivated, and immoral (Foss, Generali, & Kress, 2011; Goodman et al., 2013). The therapeutic relationship can be impacted by the psychotherapist's cognitive attributions of social class (Dougall & Schwartz, 2011). In turn, the psychotherapists' perceptions and attributions about the issue of SES and social class can impact treatment (Dougall & Schwartz, 2011; Vontress, 2011).

Two research questions were developed to understand the way psychotherapists understand what it means to be poor and to work with clients from a low SES status: 1. How do psychotherapists describe what it means to be poor? 2. How do psychotherapists describe their experiences working with low SES people?

METHODS

In the study only pseudonyms are used to protect the privacy of the subjects interviewed. In addition we use the Epoche methodology which ensures intercoder relatability (Fischer, 2009; Merriam, 2009).

Research Paradigm

The theoretical framework for the study was the theory of attribution (Dweck, 2018) that can be used to examine the psychotherapists' social class attributions in clinical practice (Thompson et al., 2014). According to attribution theory, people try to predict and control their environments and prediction can be achieved by understanding the causes of behaviors (Dweck, 2018). The person observes behaviors that can be attributed to dispositional or situational factors (Henry, Reyna, & Weiner, 2004) where an individual's beliefs or causal attributions of social class can affect that person's interactions with others (Cozzarelli, Tagler, & Wilkinson, 2001).

Participants

Ten (10) psychotherapists were interviewed for this study. The study participants were recruited from various clinics in the New York area. They ranged in age from early twenties to early seventies, and included African Americans, Caucasians, and Jewish participants. Participants had varied levels of experience working with low SES clients. The range of experience was from four years to over thirty years. The study participants categorized themselves as having high, middle-high, middle, low-middle, or low types of SES backgrounds. The participants stated that they based their socioeconomic categorization on their understanding of the concept of socioeconomic status and in relation to their community.

Procedure

The study participants were told that the purpose of the study was to examine the experiences of psychotherapists that work with low SES clients, and that their responses could contribute to improve training of future psychotherapists. They were also notified that they could refuse to participate in the study or to withdraw their consent to participate at any stage of the interview process.

The procedures for recruitment were as follows. Potential participants were contacted utilizing network or snowball sampling techniques. After potential study participants stated that they agreed to participate in the study, they were sent the consent form by email. Psychotherapists were interviewed by phone to verify their suitability for the study. Upon verification, an interview time was scheduled. The scheduled interview lasted approximately 90 minutes. Prior to the start of the interview, the informed consent form was reviewed with study participants and all questions that the participants posed concerning the study and their role were answered. The participants were asked for permission to record the interview using a digital recorder. At the start of the interview, the following were discussed: the purpose of the study, the amount of time needed

for the interview, and plans for study results. After the data were transcribed, the interviewees provided any corrections to the transcribed information. After the study was completed, the study participants were emailed a two-page summary of the study results. These procedures were sufficient to protect the participants' rights and to ensure that the study was conducted in an ethical manner. No incentives were provided to the study participants.

Each of the 10 study participants was asked the same 6 questions in the same order. The study participants were interviewed once and the one-on-one interviews ranged from about 45 minutes to 80 minutes. The interview questions were developed based on the two research questions. The first three interview questions were designed to answer the first research question. The fourth, fifth, and sixth interview questions were designed to answer the second research questions. The questions were:

1. What does it mean to be poor in America?

2. What do you think causes poverty?

3. What do you think keeps a person in poverty and poor?

4. How do you perceive that social class impacts your relationship with the client?

5. How do you perceive that social class impacts your work as a psychotherapist?

6. What are some experiences of working with poor clients in your practice that characterizes your work with this population?

None of the scheduled participants withdrew from the study. There were no unusual circumstances during the data collection process. Each interview followed the same procedures and all interviews were conducted according to the guiding interview questions with no significant deviations from the interview topic and no significant interruptions.

DATA ANALYSIS

Ten interviews were transcribed and

then analyzed. The data were first arranged according to codes and then patterns were used to construct categories. The 10 interviews were first coded based on the participants' individual responses to the interview questions. Then the codes were grouped according to categories that emerged from the data. The way that a category was constructed was based on the overall ideas presented in the codes.

The data were coded according to themes and then the data from the different interview transcripts were compared. The process which employed Epoche methodology also incorporated organizing invariant qualities and themes and thus constructing textural description where each statement represents a segment of meaning (Merriam, 2009).

In order to conduct an analysis from two or more different participant case studies, the researcher used the cross-case synthesis technique to help confirm if the case studies were compatible (Yin, 2010). The data analysis was coded according to themes and then triangulated to strengthen the trustworthiness of the study (Yin, 2010).

RESULTS

Common themes were found in describing poverty. These included lacking necessities, the connection between poverty and being marginalized, the connection between welfare and poverty, and the issue of learned helplessness. Most of the study participants discussed the connection between multiple factors and poverty.

Study participants discussed the impact of poverty on lacking access to necessities such as food, education, a home, and resources. Three of the study participating, Ed, Henny, and Betty, stated that one of the ways that poverty impacts the person is through lack of food and inability to address their immediate needs. Ed stated, "Some people can't put fresh food on the table. Henny stated "There are people who don't have food on the table." Betty stated, "If they (her clients that are poor) don't get food stamps or something happens to the food stamps, they really will just not have food and have to go to a soup kitchen."

Study participants Ed, Dave, Fred, Ian, Candice, and Jane stated that poverty could impact the ability to get a quality education.

Fred, Dave, Candice, Ed and Allen discussed marginality via the connection between the structure and focus of American society and issue of poverty. Fred stated that, "Relationship between American society and poverty…things like individualism and the need to perhaps compete with the neighbors…maybe that's more pronounced here than other cultures," and Dave stated that, "The notion of market forces that are out there, 'have' and 'have-nots', on one hand you say, oh America the land of opportunities…sometimes people can't catch a break." Candice stated that, "We're a great individualist society, we strive to have what other people have and then have more. I think that social inequalities are based upon our own insecurities and misunderstandings… SI think that we've done that as a society, we've promoted that, we've promoted the inequality, we've promoted the inequities, the isolation in those kinds of situations."

Study participants Henny, Fred, and Jane discussed the connection between learned helplessness and poverty. Henny stated, "There are people that don't have the skills, or people have learned helplessness," and Fred stated that clients, "Adopt kind of like an attitude where no matter how hard we fight, you can't really get anywhere…learned helplessness kind of thing going on." Jane stated, "I think there could be that learned helplessness piece of well, this is what I got to do and there is nothing I can do to change that. My father was poor and his father was poor."

The participants focused on a number of themes in describing their experiences working with clients from a low SES background. These included perceptions of SES, avoiding biases, having empathy, impact of client stress and poverty, societal concerns, and client cases. Study participants Betty, Ian, Gertrude, Candice, Fred, and Jane discussed the way that they perceive SES differences, or lack of, between them and their clients and the possible impact on psychotherapy. Study participants Henny,

Jane, and Dave discussed the way they dealt with the issue of empathy for clients. Henny stated, "I think that I've always tried to be a bit more empathetic and objective when I'm working with clients…I find organizations that will help them pay for, let's say sessions or to help them with other things. I'll do a lot of the footwork and help them. Part of it is, I have to remind myself that I need to enable them, so I'll tell them what's available." Dave stated that when he started to work in the field of counseling he would want to say to his client, "Hey just get a job. What's with you? Then on the other hand understanding that, well part of the reason he can't get a job, that's why we're here." Conversely, Jane stated, "If my patient isn't showing up and then shows up three, four, five sessions later often with requests of his or her own, like can you write me a letter to try to get me out of jury duty… or even if there were no requests but they showed up because they have the latest crisis of the week, I felt as a psychotherapist it was very difficult for me to have that same level of empathy for them because they put me in a financially difficult position."

Study participants discussed the impact of stress and poverty on their relationship with their clients.

Study participants Allen, Gertrude, and Jane discussed societal issues in working with low SES clients. Allen said, "I said to the group one day when we were talking about shaping, and I said look at the projects. I said these young people in the projects all they see is drug dealers, drug abuse, incest, domestic violence, high school drop-out rate so high and this is all they're exposed to so that is all they know…we teach people to be poor. We teach people to be criminals."

Some of the participants discussed examples of cases that were successes or inspiring to them, others discussed difficulties coping with clients, and yet others discussed cases that typified the issue of low SES and poverty.

DISCUSSION

The study confirmed findings by Balmforth (2009) and Smith Allen, & Bowen (2010) that psychotherapists who work with people from a lower SES feel both challenged and rewarded, that the perception of poverty differs among mental health providers, and that people living in poverty face obstacles that can impact treatment. In relation to the research questions the results show that the plights of poor clients impact the psychotherapists' relationship with their clients. This form of impact on treatment is echoed in conclusions of Balmforth (2009) and Smith Allen, & Bowen (2010). The impact of poverty on clients is further stressed in conclusions by Vontress (2011), negative stereotypes in our results confirm conclusions by Kim & Cardemil (2012). This study did not disconfirm any other study findings.

The study extended current knowledge by showing that psychotherapists differed in the attributions (dispositional or situational) that they assigned to the issue of poverty and working with low income clients. In the Landmane and Reņģe (2010) study, social workers had dispositional attitudes towards the low income individuals. Other studies (Dougall & Schwartz, 2011; Thompsons et al., 2014) utilized videos to examine the perceptions of psychotherapists; this study used real life clinical cases. The study extended the current knowledge (Balmforth, 2009; Goodman et al., 2013; Goodman, Smyth, & Banyard, 2010; Kim & Cardemil, 2012; Santiago, Kaltman, & Miranda, 2013; Smith, 2013; Vontress, 2011) about the impact of psychotherapists' social class on their perception of clients. The participants from a lower SES background were more empathetic to their clients, whereas psychotherapists from a middle or high SES had more difficulties in understanding their clients concerns.

Lacking Necessities

All the study participants acknowledged the impact of poverty on lacking necessities that included food, education, housing, and resources. They stated that lacking necessities impacted their clients.

Being Marginalized

Some of the participants discussed the issue of marginality where homelessness and poverty

are becoming more accepted and how that can be dangerous for American society. This connected to an increased need for welfare and government interventions and its impact on the low income individuals and possible upward mobility.

Social Class Attributions

The participants made social attributions based on their understanding of the issue of poverty and their clients. These clients would not learn new skills so they could improve their lives.

Psychotherapist's Attributions of Low SES Clients

Social cognitive attributions may impact the way psychotherapists perceive their clients and the way that psychotherapists understand and ascribe meaning to a low SES client's presenting problems (Dougall & Schwartz, 2011; Thompson et al., 2014). Psychotherapists may make attributions based on their client's social class, relating their clients' lower SES to personal deficits (Goodman, et al., 2013; Lott, 2012). The participants discussed the ways that their perceptions influenced their work with their clients who were from a lower SES, the issues of bias and lack of empathy, and their appreciation of clients' daily struggles. Other issues discussed were the impact of social class attribution on perception of clients, coping with clients, and issues impacting clients, along with difficulties of working with clients.

Influence of Perceptions of Low SES Clients.

Attributions can influence the perceptions of psychotherapists' and the therapeutic process (Dougall & Schwartz, 2011). The participants discussed the ways that their perception of the issue of social class influenced their work with their clients.

Bias and Lack of Empathy

Social class attributions can lead to psychotherapist bias and an increasing or decreasing sense of empathy. Some of the participants related the issue of empathy to monetary issues but indicated that they try to address their biases by listening to their clients

and understanding that the clients were not afforded the same opportunities as they had.

Daily Struggles

The clients' daily struggles and resulting stress impacted their relationship with their psychotherapists. These daily struggle can create an environment of stress, resentment, and frustration that can impact the therapeutic alliance and treatment effectiveness.

Impact of Social Class Attribution on Perception of Clients

The participants' social class attribution impacted the way they perceived their work with their clients. The participants either focused on their clients' concerns or on the difficulties coping with clients from a low SES background and focused on the ability of some of their clients to cope with environmental and situational stressors.

Coping with Clients

Some of the participants focused on the difficulties of coping with their clients, money issues with a need to subsidize clients or the impact of working in dangerous neighborhoods.

Issues Impacting Clients and Difficulties Working with Clients

The participants raised other issues that were divided into issues impacting their clients and difficulties they encountered working with clients. Some discussed the importance of engaging his clients while others focused on the impact of working with clients from a lower SES background and frustrations with possibly unpleasant work environment.

LIMITATIONS OF THE STUDY

The study had two limitations. First, with only 10 participants transferability might be a concern. This limitation addresses the inclusion and exclusion criteria for the study participants. The study sample included a small sample of 10 practitioners who provide psychotherapy psychotherapists and did not include the majority of psychotherapists in the New York City area. The study represented only

psychotherapists who work with clients from a lower SES background in community clinics. This sample might not represent the way that the excluded psychotherapists experience their work with clients. Consequently, the study is limited by the small sample size and perspective of the psychotherapists interviewed for the study.

Additionally, the study was based solely on limited number of interviews and observations. This issue was addressed by using bracketing bias and epoche. Bracketing bias refers to addressing problems related to misconceptions that might impact the research process (Fischer, 2009). Epoche is the process by which the researcher removes or become aware of prejudices and viewpoints about the subject under investigation (Merriam, 2009). Any potential bias arising from the study could come from experience working with clients from a lower SES background.

CONCLUSION

Future studies could investigate the difference in attributions between psychotherapists from a low or middle class and those psychotherapists from a high social class concerning the issue of poverty and working with clients from a low SES background. There were not sufficient psychotherapists from a high social class background to investigate this issue thoroughly. The second recommendation is to explore the ways that psychotherapists perceive their difficulties in working with their clients from a lower SES background. Some psychotherapists focused on the impact of poverty on clients' difficulties, whereas others focused on their own difficulties interacting with their clients.

There are two recommendations for practice and practical training. The first recommendation is that psychotherapists work with their clinics to accommodate clients from a lower SES background and offer flexibility in scheduling and their treatment practices. The psychotherapist would need to demonstrate to the clinic the advantage of accommodating these clients with increased treatment compliance. The second recommendation is to have additional training for clinicians about the way poverty impacts clients and the possible impact on the treatment process.

Lacking Necessities and Being Marginalized

We advise psychotherapists to change their perception and even advocate for the prevention of homelessness and poverty and for welfare and government interventions.

Bias and General Lack of Empathy for SES Clients and their Daily Struggles

We would like to see that perception of the issue of social class will not negatively influence psychotherapists as far as their work with their clients, and that they become cognizant of their daily struggles.

Impact of Social Class Attribution on Perception of Clients and Coping with Clients

We advise psychotherapist to be aware of the social class attribution factor and that it might impact the way they perceive their clients. In this realm they should move to just cope with their clients to a deeper understanding of their plight, with money issues and having to live in dangerous neighborhoods. Psychotherapist will need to internalize the fact that in today's ever-changing economy it is conceivable that at any moment people from all walks of life could find themselves having to work in a place that is either unpleasant or be in situations that involve a form of hardship, especially to someone who is well-trained and could be working elsewhere. However, from our vast clinical experiences we found that the rewards of working with underserved and underrepresented populations may outweigh any unpleasant working circumstances. And the work environment can actually be used as a platform for advocating for better settings, for both the psychotherapist and the client. As psychotherapists who believe in social responsibility we often find ourselves as advocates for change. We recently assisted with the efforts of a local social entrepreneur who refurbished a clinic in an underserved location where we sometime work. If more

psychotherapists become advocates for change it will benefit us all. Here are some final recommendations:

- Based on the findings, this study has implications for positive social change in a few areas. The first implication has to do with the various ways that we will have to enhance our current perspective taking curricula in counselor training.

- We hope that our colleagues will read about our findings and be revising the curricula with our pedagogical innovation with this new realm of perspective taking, meaning, they will have attempt to dig deeper into the plight (or possible happiness) of our less fortunate in society.

- As we pointed out in our research a few years ago this can only be achieved through the process of looking at problems from multiple viewpoints and when we are able to make appropriate changes in our lives based on our own perspective taking and the feedback that we receive from peers (Gardere, Sharir, & Maman, Y. (2017). As socially responsible professionals we encouraged clients and by proxy our trainees in counseling and psychotherapy to interact and communicate with one another, and to engage with their wider community, however, following the results of this study we have realized that there is a need to dig deeper within our humanity as mental health professional and educators. We will need to evoke a greater sense of compassion and understanding in our students.

- The second implication is that the study can result in greater awareness of the impact of poverty on clients, and this can be incorporated into training of students and psychotherapists. This could have a potential impact at the individual and organizational levels concerning possible changes in service delivery for clients.

- The third implication is that the study could result in reduced bias and misconceptions concerning the issue of poverty and working with clients from a lower SES

background. The psychotherapist could address environmental issues impacting the client and not just symptoms of the disorder. Additionally, there could be an impact in possible changes to federal and local policies concerning the care of people from a lower SES background.

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