Counselling Working Class Women

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Abstract

The prevalence of psychological problems has been found to be highest for working class women (Lorion & Felner, 1986), yet counsellors are often unprepared to counsel them effectively. This paper describes common characteristics and concerns of working class women clients, effective counselling approaches, and the difficulties and rewards for counsellors who deal with this population. Several research and training recommendations are presented.

Résumé

La fréquence de problèmes psychologiques a été identifiée comme étant plus élevée chez les femmes de la classe ouvrière (Lorion & Felner, 1986). Il reste que les conseillers sont souvent pris au dépourvu lorsqu'ils veulent intervenir efficacement en counseling avec elles. Cet article décrit des caractéristiques et des problèmes vécus couramment par leurs clientes, des femmes de la classe ouvrière, abordent des approches de counseling efficaces, ainsi que les difficultés et les aspects positifs, enrichissant pour les conseillers qui travaillent avec cette population. Plusieurs recommandations concernant les recherches et les programmes d'entrainement sont présentées.

The prevalence of psychological problems has been shown to be highest for working class people (Lorion & Felner, 1986), yet counsellors are frequently ill-prepared to provide services for members of this population (cf. Herr, 1989). Working class clients have limited access to mental health programs, and the counselling services they receive are often socially and culturally irrelevant (Herr, 1989). This paper focuses on female working class clients and their counselling needs. Drawing on the professional literature and our own experiences counselling working class women, the following topics will be discussed: characteristics and concerns of working class women; difficulties counselling this population; effective counselling approaches; and the impact on counsellors who work with this population. It is hoped that this discussion will prompt academic programs to better prepare counsellors to work with this underserved population.

Client Characteristics

The population of interest is known by various terms, e.g., socioeconomically disadvantaged (Lorion & Felner, 1986), at-risk (Herr, 1989), and working class or "pink collar" women (Pearl, 1980). These are women who are vulnerable to large amounts of stress because of their gender, race, and social and economic class (Herr, 1989). They are disadvantaged because of limited economic resources, limited educational opportunities, and the necessity of existing on pink-collar, clerical, or unskilled labor jobs, if they are employed. They also have limited social prestige and social influence. The working class population as a whole is not a homogeneous group; they come from all racial and ethnic backgrounds. However, women are disproportionately represented (Lorion & Felner, 1986).

Client Concerns

For the purposes of this paper, client concerns are discussed one at a time. However, it should be remembered that these issues interact to create a persistently high level of stress for the clients. Furthermore, the following list is not exhaustive. When disadvantaged individuals repeatedly fail in their attempts to enter the social and economic mainstream, they are likely to manifest a wide variety of problems including physical symptoms, stress-related diseases, mental disorders, chemical abuse, family difficulties, abuse, worries about dependency, the absence of a sense of leisure, and feeling out-of-control (Herr, 1989; Rodin & Ickovics, 1990). Finally, it should be noted that working class men face many of the same challenges. However, a detailed discussion of this group is beyond the scope of this paper.

Poverty. According to Wilson (1988), women are more likely than men to be poor. Poverty is a complex experience with extensive repercussions for the working class woman. For example, most medical and psychological problems have the highest rates of prevalence among the poor and disadvantaged (Kleinman, 1988). As Herr (1989) stated, "Poor people are not rich people without money. Their values, risk-taking, sense of self, sense of power, and focus on the past, present, and future are all conditioned by the environment in which they find themselves" (p. 152). This environment has been described by some authors (e.g., Arsenian & Arsenian, 1948) as a "tough culture," i.e., one characterized by a lack of education, jobs, and money. These constraints often mean that savings have to be diverted from what is desired to what is needed, and credit is expensive and short term when it can be obtained. Working class women often end up skimping on necessities, juggling bills, and borrowing money from relatives (Donovan, Jaffe, & Pirie, 1987). Furthermore, the welfare and tax systems do not reward the impoverished for working (Herr, 1989). The culture of poverty is a great disabler, limiting social and educational opportunities (Herr, 1989).

Unemployment and underemployment. The working class population includes the chronically unemployed, as well as unskilled and semi-skilled

workers. Some have little formal education; others have completed high school but have few academic skills; others have been unable to make use of an adequate education because of prejudice due to their gender, race, and/or lifestyle circumstances (Lorion & Felner, 1986). Women are more likely than men to face unemployment and underemployment and do so because of discrimination, lack of competitive skills, guilt, and low esteem (Herr, 1989).

Virtually all of the research concerning the consequences of unemployment have involved male blue collar workers (cf. Reynolds & Gilbert, 1991); however, a few studies of women and minorities have shown that these groups are most at risk of sinking into poverty when they lose their jobs, especially minority female heads of households (Donovan et al., 1987). In fact, because low income and minority women earn lower wages and have fewer economic resources than men, job loss often results in immediate poverty. The financial strain is further exacerbated by responsibility for young children.

Underemployment also puts working class women at high risk for serious physical problems (cf. Rodin & Ickovics, 1990) and mental health problems, especially depression and anxiety (Belle, 1982, 1987; Donovan et al., 1987). Donovan and her colleagues (1987) found that for white and Hispanic working class women, the five areas they regarded as critical to coping with job loss were loss of income, loss of fulfillment and self-esteem, strain on the family, loss of social support from the workplace, and time-management/loss of structure and purpose. Displaced workers must also cope with a lack of identity and purpose (Herr, 1989; Reynolds & Gilbert, 1991).

The changing nature of work is deepening the employment problems of working class women. Advances in technology are expected to threaten clerical jobs, which are the primary source of female employment in the United States and Canada (Herr, 1989). Furthermore, high technology industries are unlikely to absorb these displaced women because the industries comprise a fairly small proportion of total employment and their jobs require increasingly greater amounts of education and more complex job skills (Herr, 1989). The working class population may be less qualified because of academic underachievement. Herr (1989) found that three major factors related to school failure for both females and males were: 1) living in a low socioeconomic family, 2) being a member of a racial or ethnic minority group, and, 3) being from a home with weak educational support systems. In the future, unskilled jobs will be increasingly replaced by ones requiring higher levels of reading; computational skills; communication, problem-solving, and reasoning skills; and "general employability skills" such as selfdiscipline, reliability, and perseverance (Herr, 1989). These are areas in which working class women may find themselves seriously lacking.

Pregnancy. Whether unintentional or planned, pregnancy can compound financial, educational, and employment problems, and lead to low self-esteem, isolation, and family strain. Adolescent and young adult women are at high risk for unintended pregnancy. In the United States for example, trends show that one out of ten adolescent women becomes pregnant in her teen years, and 83% of these pregnancies are unintentional (Alan Guttmacher Institute, 1981; 1988). Annually in the U.S. almost 700,000 of the 3.3 million births are to adolescents; over 50% of these are to unwed mothers (Herr, 1989). Ninety-four percent of teen mothers who do not have abortions choose to keep their babies; about 50% of these women become pregnant again within three years (Herr, 1989).

One of the most far-reaching consequences of early childbearing is the disruption of the teen mother's education. This disruption leaves her lacking the necessary skills to compete in the job market. One study (Alan Guttmacher Institute, 1981) found that mothers giving birth before the age of 18 were only half as likely to graduate from high school as compared to those who postponed childbearing until after age 20. This lack of education results in family incomes that tend to be one-half that of women giving birth after age 20. Pregnant teens who remain in school often do not reach their potential, have motivational problems, and are at greater risk of school failure and drop-out (Gilchrist, Schinke, & Maxwell, 1987).

Herr (1989) cites a number of sobering statistics. For example, in the U.S., children living with one parent account for almost one in 10 households; almost all of these parents are women, and many are teenage mothers. Approximately 30% of all children are in single parent families, and one-half of all children will have spent some time in a single parent home before they reach the age of 18. Currently, about 50% of all Black children and 20% of Hispanic children are in single parent families. These single parent families are what Herr calls the "new poverty pockets;" one out of five children under 19 and one out of four children under six is living in poverty.

Families and abuse. Working class women clients frequently report problems in the family unit. Emotional, physical, and sexual abuse are prevalent. Many of the clients are either current or past victims; it has been found that women are more likely than men to experience violence and abuse (Herr, 1989; Rodin & Ickovics, 1990). The U.S. National Committee for the Prevention of Child Abuse reports that one in four females is abused while growing up. These individuals tend to perpetuate the abuse cycle, parenting and disciplining as their own parents or guardians did. Approximately 1,000,000 children are abused by their parents each year, and about one-third of all married couples are involved in spouse assault (Herr, 1989). Stressors that have been found to

contribute to abuse include low income, single parenting, isolation, lack of parenting and child development knowledge, and low self-esteem. As mentioned previously, there is also a pattern of young parents who themselves have young parents, e.g., a 17-year old mother of a two-year old child, who herself has 35-year old parents. Teen mothers tend to give birth to children who in turn become teen mothers (Herr, 1989).

Poor social support. Working class women often report a lack of significant role models who demonstrate healthy expression of emotions, effective conflict resolution behaviours, and the desire and/or ability to attain higher levels of educational achievement and subsequently better jobs and income.

Working class women are often isolated from their sources of support for reasons such as unreliable or poor day care and transportation, frequent changes in residence, failure to initiate social interactions, depression, and anxiety. Donovan et al. (1987) found that their sample of working class women regarded interaction with people outside their families as essential for relieving family stress during times of unemployment. Furthermore, they report that marital intimacy generally fails to be a source of social support for poor women because most often they are providing the support rather than receiving it from their families.

Low self-esteem. A great deal of the repeated failures experienced by working class women are due to low self-esteem, and these failures lead to further feelings of powerlessness and helplessness. For example, a client may value education but her esteem is too low to allow her to pursue a high school equivalent degree, a vocational-technical degree, or a college degree. Herr (1989) presented evidence that factors such as poverty, poor education, racism, and sexism combine to lower self-esteem and concomitant motivation, energy, and the perceived usefulness of engaging in long-range future planning. He also reported that in a program for single parents and displaced homemakers, the major issue they faced was the need to develop a sense of efficacy or confidence that they could do what was expected in a job setting.

Difficulties Counselling Working Class Women

"Pathologizing" the client. Approximately 50% of the population in the United States is white collar (Lorion & Felner, 1986), and this group has had a significant influence on the theories adopted by counsellors and researchers. Since a majority of practitioners come from white collar backgrounds, the degree to which they understand the other 50% of the population who are not in the white collar group is uncertain. For example, as mentioned earlier, research has shown that the prevalence of psychological disorders is highest in the most socioeconomically disadvantaged segments of our society (Lorion & Felner, 1986). Yet it has also

been shown that lower class clients are more likely to be perceived as emotionally disturbed than are middle class clients (Sladen, 1982).

Counsellors must be able to decide whether a particular presentation is indicative of some form of emotional or behavioural disorder or whether it is a relatively normal response to an environmental stress. For example, all of the authors have dealt with non-verbal clients. Our challenge was to determine why this was the case. Was it because of an emotional barrier, e.g., the problems were too overwhelming for the client? Was it cognitive, e.g., due to low intelligence or a concrete learning style? Was it environmental, e.g., the less said to a counsellor, the better? In another example, one of the authors was called out to assist some officers with a person described as a raving, paranoid lunatic. The client did look pretty agitated, walking around, shaking, and making statements like, "I'm afraid somebody's going to kill me. People are out to get me. You have to hide me!" The counsellor was faced with a dilemma of trying to assess whether this was due to some form of paranoid delusion or whether it represented a reaction to an environmental stress. What added to this dilemma was the client's statement that a loan shark was threatening harm. Was the client's behaviour more representative of the environment, or was it due to a true emotional or behavioural disorder?

Counsellor bias. The worlds which the client and the counsellor come from may be very different. Can the counsellor understand where the client is coming from and have a sense of familiarity with her reality base? Typically, counsellors do not live in the same communities/neighbourhoods as their clients and it can be difficult to develop an understanding of the client's reality.

Counsellors may also be unaware of their personal values and the degree to which they can be discrepant from their clients'. For example, how will they react to poor grammar; how will they feel when they come up against a cultural value that says that family is so important that a young woman should marry the father of her child even if they have a very poor relationship; or how will they respond to a value that says vocational-technical school is the highest goal to be achieved, and college is not desirable, realistic, or important? Cognitive restructuring may sometimes be necessary if counsellors experience guilt over the fact that they are more educated, have a better income, a steadier job, are more articulate, and if they regard themselves as somehow better off than their clients.

Herr (1989) suggests that American majority white cultural history is rooted in certain models that define the values and purposes of individual behaviour. One of these models states that hard work, risk-taking, and a belief in one's self will lead to success, defined as fame, wealth, and honour. If counsellors are operating from this model of the rugged individualist, they may experience conflict and frustration with their

clients who typically exert a great deal of effort for minimal gain, finding that many paths to their goals are blocked, and the range of their goal possibilities is severely limited (Lorion & Felner, 1986). Clearly, the counsellor cannot "blame" a failure to succeed solely on the working class client.

Environmental constraints. Several types of environmental constraints can hinder the effectiveness of counselling. Working class women are more likely to want to bring their children into sessions because they cannot afford day care, or the day care is unreliable. They may miss a lot of sessions or be late because of unreliable transportation or having to depend on public transporation. Another constraint is that these clients may come from a culture which typically devalues counselling. For example, talking to strangers about personal concerns is considered strange or bad. The clients may be viewed by their friends and families as weak, not in need of counselling, as just looking for an excuse to have problems, etc. They may be verbally and/or physically punished for attending counselling sessions. Often working class women are shuffled around in the mental health system from counsellors to psychiatrists to social workers, which adds to their suspicions about the benefits of counselling. All of these factors can combine to lead a counsellor to erroneously assume that the client is resistant to or disinterested in counselling. At the very least, these constraints make counselling difficult because of the lack of continuity and predictability.

Frequency and multiplicity of concerns. It is not unusual for a client to deal with six, seven, or eight major stressors at one time. In our clinical experience, we have found that many clients experience major disruptions on a daily to weekly basis. A lot of these crises occur because of poverty, unemployment, and unstable family environments. For example, many clients have to deal repeatedly with changing residences, with the failure of fathers to provide child support payments, and with threats of being thrown out of the house by relatives or partners. This list could go on. These daily crises cause disorientation, panic, and confusion for the client, and in the counselling relationship make long-range planning difficult to do and hard to follow through on.

Inadequacy of individual counselling. Because clients have multiple issues with numerous precipitating factors, counselling theories simply are not adequate. Effective counsellors need knowledge of legal issues, social service opportunities, medical agencies, school systems, and other kinds of community agencies; the counsellor also needs to know when and how to make a good referral. But referral is only part of the answer. Many clients have difficulty navigating agency bureaucracy and often give up when they experience obstacles. Bureaucracy is especially dense for clients who "fall through the cracks," i.e., they just fail to qualify for

social welfare programs, but in reality are living below the poverty level. It is twice as hard for them to link up with social services and to do all of the required paperwork. Therefore, it is not unusual for a counsellor to help a client complete an application to do a high school equivalent degree or an application for enrolling her children in day care services. The counsellor often serves as a liaison in such situations.

Lack of a research base. There is very little published research on counselling either female or male working class clients. Some of the existing research, as discussed earlier, suggests that the needs and responses of working class women may differ from those of men (Belle, 1982; Donovan et al., 1987). Research is needed that focuses on working class women and on the kinds of specific techniques that are effective in different counselling situations. Because of the basic lack of research interest, the training that counsellors receive is limited and leads to counsellor frustration and reduced effectiveness. One consequence may be a preponderance of negative treatment outcomes.

Counselling Approaches

Ironically, the few published studies of mental health interventions with disadvantaged individuals indicate that the very interventions that are likely to be most effective are also the ones which may be criticized as holding stereotypic and discriminating views of this population. Furthermore, counsellors who use these interventions may be criticized as unwilling to offer "real" treatment to their clients (Lorion & Felner, 1986). For example, Reynolds and Gilbert (1991) suggest that counsellors be directive or prescriptive, using behavioural techniques to guide clients to certain choices. Rappaport (1977) has criticized counsellors who use these approaches as "social control agents," claiming they operate to maintain the status quo. One challenge for counsellors, then, is to consider the multicultural issues that are ever present when counselling working class women whose lifestyles, values, and ambitions in life may be so different from their own, and to see these as vital differences rather than as substandard ones. The use of selective interventions that have some demonstrated effectiveness should be seen as respecting differences rather than as imposing one's own world view upon these clients. The following suggestions are based upon the professional literature and also upon our experiences as counsellors of working class women.

Informed consent. According to research (cf. Lorion & Felner, 1986), working class clients may hold many misconceptions about what counselling involves. Therefore, informed consent is especially crucial for these individuals. If the counsellor can address these misperceptions early in the counselling relationship, the clients may be more likely to stay longer in counselling. One important area involves the limits of confidentiality.

For example, we have had single mothers over the age of 18 express fears that we would report our "diagnoses" to their parents, who could then take their children away from them. Other areas include the structure of counselling, e.g., that it is a weekly event, that it has benefits even if the client is not in crisis, and that it is probably a good idea to talk with the counsellor before bringing a boyfriend or family member along for a session or two.

Assessment and goal setting. Because working class women are faced with significant environmental constraints, it is important that counsellors assess their immediate needs, both initially and in each subsequent session. When counsellors move too far beyond immediate concerns, such as where the client will sleep that night and how she will feed her children this month, and attempt instead to focus on "self-growth," "improving the client's social status," or some other meta-goal, the client may feel as if she has failed in counselling. Failure is the last thing these clients need when they face so much of it in their daily lives. What often happens in such cases is that the client terminates, and that may actually be her healthiest response.

We have found that one particularly useful theory for assessing client concerns is Maslow's Need Hierarchy. It provides a good reminder that the satisfaction of basic survival needs comes before self-actualization needs. Gathering information about client economic resources and the economic demands in their lives, information about how often they change residences, and about the bureaucratic delays and frustrations that they face will help a counsellor in setting general goals.

When selecting counselling goals, it is important that they be concrete and realistic, and that they address concerns that are immediate to the client's particular situation. The counsellor should actively involve the client in setting goals, discussing with her what they each see as immediate problems and possible solutions to work towards in counselling. Research (Lorion & Felner, 1986) indicates that the modal number of sessions for male and female working class clients is one. Therefore, while it is important during the initial meeting that counsellors assess needs and goals that could be addressed in subsequent sessions, they should also try to give the client something she can "take with her," in case she does not return.

Bloom's (1984) single-session model of psychotherapy may be helpful. The counsellor identifies a focal problem and uses the interview to start a problem-solving process that the client can later continue on her own. Bloom further suggests that the counsellor try not to be overly concerned with a precipitating event because it is more important to resolve the problem than to determine its cause. He also suggests that a counsellor not underestimate the client's strength, nor overestimate the client's self-awareness.

Interventions. We have found it effective to adapt crisis intervention models to our longer-term counselling relationships. These models can help the counsellor remember that the clients may not always need counselling for intrapsychic issues, i.e., they do not have a crisis-oriented approach to life, they have lives that are crisis-oriented. Furthermore, these models offer an action-oriented approach that can increase a client's sense of control over herself and her environment, helping to reduce the external locus of control orientation characteristic of these clients.

Psycho-educational approaches can be effective either alone or in conjunction with "intrapsychic" counselling. Danish and D'Augelli (1983) state that problems in functioning are due to a lack of knowledge, lack of skills, fear of risk-taking, lack of social support, or some combination of the four. Fully-functioning individuals are planful problemsolvers who are able to deal with life crises within the backing of a good social support system. Working class women can benefit from programs that emphasize information giving and self-awareness in a supportive environment; they may be especially receptive to informal settings (Ottomanelli & Halloran, 1982). Topics can include decision-making, goalsetting, risk assessment, building social support, stress management, time management, assertion training, communication skills, parenting skills, and self-sufficiency training (e.g., job interviewing skills).

Additional counsellor interventions include the use of everyday language. Counsellors should refrain from slipping into sophisticated "psychologise," which the clients do not understand and may not admit. With working class women "TV therapy" may be even more effective than bibliotherapy. The clients usually have access to TVs, and they watch Oprah Winfrey, Phil Donahue, Geraldo Rivera, etc. Having them react to issues from these shows is one way that they can participate outside of the counselling sessions. We have also found that our clients typically do not complete written homework assignments. This is not due to resistance to counselling as much as it is their environmental constraints. they may be living with people who criticize them for doing the homework; they may be self-conscious about their writing skills; they may not want to think through the assignments, etc. We have found that a more effective approach is to give them in-session assignments.

Another aspect of counselling that is very important is to provide the clients with positive reinforcement as one way to help them start to give encouragement to themselves. Finally, it was previously mentioned that client advocacy is important. Counsellors may have to help their clients make use of the informal and formal sources of support within their environment. If counsellors can connect clients with resources that address their immediate survival needs, then there may be time to address longer-term concerns during counselling.

Impact on Counsellors

Counsellors of working class women experience both frustrations and personal rewards. This discussion begins with the negative effects because they are frequent discussion topics among practitioners, and it is our opinion that these negative aspects can prevent a counsellor from experiencing the rewards of working with this population. The most prominent negative effect is the tendency for burnout and job dissatisfaction. To begin with, working class women typically cannot afford private counsellors. Therefore, the counsellor's experience with these clients will occur in some form of a social agency setting, which means that along with everything else, the counsellor has to deal with the bureaucracy characteristic of this setting. Counsellors may experience restricted freedom to construct the type of practice they would like to develop because of limits on the types of interventions that are authorized and/or funded. For example, one author moved to a major U.S. city about two years ago and initially found the community mental health system to be very comprehensive. There was funding for individual and group treatment; for children, couples, and families; and for acute and chronic cases. However, a year later, the state and city governments put the bulk of their funds into chronically mentally ill services, which meant that many programs with demonstrated effectiveness had to be eliminated. These cuts dramatically lowered morale, and a lot of talented counsellors ended up leaving their agency positions. Additional factors that can lead to frustration and burnout are the difficulties outlined earlier in this paper, e.g., the environmental constraints characteristic of the working class environment and the frequency and multiplicity of client concerns.

Despite the negative factors, there are also some important positive effects. First of all, the complexities of clients' situations provide a challenging and seldom boring experience. For example, in order to be able to intervene effectively in the variety of issues that these clients present, the counsellor has to become competent in different counselling styles and techniques, e.g., crisis intervention; directive and supportive therapy; couples and family counselling; grief counselling; etc. This makes working with this population a potentially tremendous learning experience, not only with respect to new counselling approaches, but also because it provides the counsellor with an opportunity to gain a new, more comprehensive perspective on the world in general. Another positive aspect of counselling working class women is that there is a great potential for intervening in a way that is of true significance in their lives. For example, teaching basic time management skills to a client who is so busy with day-to-day tasks that she neglects her children might profoundly affect that client and her family. Such a dramatic outcome might not be as likely with other client populations, and it can be very gratifying for the counsellor.

Final Recommendations and Conclusions

Research on all aspects of counselling working class women clients is greatly needed. As Rodin and Ickovics (1990) point out, theory-building based exclusively on studies of male samples may seriously restrict attention to a limited number of health-related factors. Future research should also be grounded in psychological theory. For example, Donovan et al.'s (1987) findings suggest that social support may be a moderator of the impact of unemployment; social support theory could inform some research (cf. Jung, 1984). Belle's (1982) work suggests that unemployment leads to a greater likelihood of depression and anxiety for working class women as compared with men. Sex-role theory might be used in future studies, as well as person-environment fit theory (Caplan, 1983).

Research should include multivariate analyses of the interactive effects of several variables on the well-being of working class women. Furthermore, these relationships should be studied cross-situationally as well as longitudinally; Rodin and Ickovics (1990) state that interactions between sex and age vary for health-related issues. Among the questions which should be addressed are: What aspects of white, middle class counselling models are most and least relevant for working class women? Which of the numerous client concerns are most crucial to their healthy functioning? Why do the "same" issues lead some working class women into the mental health system, while others function effectively without counselling? Is counselling the best way to resolve their concerns? Are certain counsellor styles more effective? For example, Kiesler's (1983) interpersonal theory differentiates dominant, nurturant, and submissive styles. Would a high dominance counsellor be more influential? And finally, what is counselling's unique contribution to the alleviation of concerns?

Training is necessary for counsellors of working class women. Exposure to the professional literature in conjunction with supervised field experiences will help counsellors develop an understanding for the working class woman's reality and needs. This will hopefully allow counsellors to anticipate and work through some of the difficulties associated with this population, leading to less frustration and improved effectiveness.

In closing, we would like to say that counselling alone cannot prevent the problems of working class women, especially those embedded in racial and social class discrimination and chronic poverty (Herr, 1989). However, some combination of counselling and activities for achieving social and political change may improve the quality of life for an historically underserved population.

References

The Alan Guttmacher Institute. (1981). Teenage pregnancy: the problem that hasn't gone away. New York: The Alan Guttmacher Institute.

- . (1988). Cited in The Annex Teen Clinic Statistics. Robbinsdale, MN.
- Arsenian, J., & Arsenian, J. M. (1948). Tough and easy cultures: A conceptual analysis. *Psychiatry*, 11, 377-385.
- Belle, D. (1982). The stress of caring: women as providers of social support. *Handbook of stress: Theoretical and clinical aspects*. New York: Free Press, 496-505.
- Bloom, B. L. (1984). Community mental health (2nd ed.). Monterey, CA: Brooks/Cole.
- Caplan, R. D. (1983). Person-environment fit: Past, present, and future. In C. L. Cooper (Ed.), Stress research: Issues for the eighties (pp. 35-77). New York: Wiley.
- Danish, S. J., & D'Augelli, A. R. (1983). Helping skills II: Life development interventions. New York: Human Sciences Press, Inc.
- Donovan, R., Jaffe, N., & Pirie, V. M. (1987). Unemployment among low income women. *Social Work*, 32, 301-305.
- Gilchrist, L. D., Schinke, S. P., & Maxwell, J. S. (1987). Life skills counseling for preventing problems in adolescence. *Journal of Social Service Research*, 10, 73-84.
- Herr, E. L. (1989). Counseling in a dynamic society. Alexandria, VA: American Association for Counseling and Development.
- Johnson, F. A. (1981). Ethnicity and interactional rules in counseling: Some basic considerations. In A. J. Marsella and P. B. Pederson (Eds.), Cross-cultural counseling and psychotherapy. New York: Pergamon Press, 63-84.
- Jung, J. (1984). Social support and its relation to health: A critical evaluation. Basic and Applied Social Psychology, 5, 143-169.
- Kiesler, D. J. (1983). The 1982 Interpersonal Circle: A taxonomy for complementarity in human transactions. *Psychological Review*, 90, 185-214.
- Kleinman, A. (1988). Rethinking psychiatry: From cultural category to personal experiences. New York: Free Press.
- Lorion, R. P., & Felner, R. D. (1986). Research on mental health interventions with the disadvantaged. In S. L. Garfield and A. E. Bergin (Eds.), Handbook of psychotherapy and behavior change: An empirical analysis (2nd ed.). New York: Wiley, 739-775.
- Ottomanelli, G., & Halloran, G. (1982). Patient expectations and participation in a poly drug treatment program: A replicated field process study. *International Journal of the Addictions*, 17, 1289-1311.
- Pearl, A. (1980). Dictionary of popular slang. New York: Jonathan David Publishers.
- Rappaport, J. (1977). Community psychology: Values, research and action. New York: Holt.
- Reynolds, S., & Gilbert, P. (1991). Psychological impact of unemployment: Interactive effects of vulnerability and protective factors on depression. *Journal of Counseling Psychology*, 38, 76-84.
- Rodin, J., & Ickovics, J. R. (1990). Women's health: Review and research agenda as we approach the 21st century. *American Psychologist*, 45, 1018-1034.
- Sladen, B.J. (1982). Effects of race and socioeconomic status on the perception of process variables in counseling. *Journal of Counseling Psychology*, 29, 560-566.
- Wilson, B. J. (1988). Women and poverty: A demographic overview. Women and Health, 13, 21-40.

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