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*Old Dominion University*

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HOW COUNSELORS ARE TRAINED TO WORK WITH BISEXUAL CLIENTS  
IN CACREP-ACCREDITED PROGRAMS

by

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A Dissertation Submitted to the Faculty of  
Old Dominion University in Partial Fulfillment of the  
Requirements for the Degree of

DOCTOR OF PHILOSOPHY

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August 2013

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## ABSTRACT

### HOW COUNSELORS ARE TRAINED TO WORK WITH BISEXUAL CLIENTS IN CACREP-ACCREDITED PROGRAMS: A CONTENT ANALYSIS

Laurie Bonjo  
Old Dominion University, 2013

In spite of recent progress toward addressing the need for cultural competence with lesbian and gay-identified clients, bisexual-identified clients continue to be marginalized in the principles, theories, and methods of studying sexuality as well as in the training provided by counselor educators. A descriptive content analysis was conducted to determine what is currently taught about bisexuality and bisexual-identified clients in CACREP-accredited counseling programs. Instructors teaching multicultural counseling in CACREP-accredited programs were asked to provide syllabi, as well as information on textbooks and supplemental materials. Combining constructionism with queer theory and elements of post-positivism, I explore the magnitude to which bisexuality is addressed.

Qualitative analysis provided insight into the essence of the information provided to counselors-in-training concerning bisexuality and the needs of bisexual-identified clients. Using the critical lens provided by queer theory and the tripartite model of multicultural counseling competencies, the results of this study suggest that increased attention to training regarding bisexual-identified clients should be included in counselor education curriculum and materials.

## Dedication

This dissertation is for Forrest and Eden, as well as all of my students. It is also for all of the bisexual people and the people who love them. It is for the counselors and counselor educators who believe in inclusive education and inclusive practice.



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sisters, Hollie Walker and Meredith Menerey were the cheerleaders that reminded me that this dissertation has always been my destiny. Nehemiah Hodges, thank you for your support and love. Finally, I would like to thank my clients and my students for reminding me to make the world a better place for all of us.

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## CHAPTER I

### INTRODUCTION

Counselor education encompasses more than teaching students basic academic content such as developmental and counseling theory, counseling skills, or group therapy techniques; it incorporates multicultural competency and social justice advocacy into research, teaching and practice (ACA, 2005; Lewis, Arnold, House, & Torporek, 2003; Shin, 2008). Accordingly, the Association for Multicultural Counseling and Development (AMCD) generated Multicultural Competencies (MCCs), which exist as a public document that describes best practices relevant to the education, training, and practice of mental health professionals pertaining to multicultural constructs and the diverse identities of clients who come to counseling (Arredondo, 2003; Arredondo et al., 1996; Pope-Davis & Coleman, 1997). The MCCs are structured around a tripartite model which includes three major domains that are essential for counselors-in-training to develop competency with diverse clients: self-awareness, knowledge, and skills.

Recently, counseling research and training have begun to specifically address the need for cultural competence with lesbian and gay-identified clients. An example of this is the set of competencies introduced by the Association for Lesbian, Gay, Bisexual and Transgender Issues in Counseling (Harper, Finnerty, Martinez, Brace, Crethar, Loos, Harper, Hammer, 2013). However, in spite of this progress, bisexual-identified clients continue to be marginalized in the principles, theories, and methods of studying sexuality (Fairington, 2005; Rust, 2002) as well as in the training provided by counselor educators. Because counselors often receive very little or no training specific to working

with bisexual people (Pelling & Kocarek; Murphy, Rawlings, & Howe, 2002), their ability to provide competent services to this group is limited.

The dearth in research on sexuality and the lack of training provided are linked. Klein, Sepekoff, and Wolf noted over 25 years ago (1985, p. xv): “The history of research into bisexuality until now could almost be characterized as nonexistent.” For counselor educators to be able to provide counselors-in-training with the tools necessary to offer competent services to bisexual-identified clients, future research should further explore important distinctions between the experiences of bisexual-identified clients and lesbian and gay-identified clients and apply this understanding to counselor education and training (Human Rights Commission of San Francisco & Ulrich, 2011; Pelling & Kocarek, 2003; Miller et. al., 2007; Murphy, Rawlings, & Howe, 2002; Phillips, 2000; Shin, 2008).

### **Bisexual Population**

In spite of myths suggesting that bisexual people are rare, there is research that indicates this is not the case. Kinsey reported that 46% of adult males register as bisexual—an extraordinarily high estimate (Kinsey et al 1948/1998; 1953/1998; Gebhard & Johnson, 1979/1998). While this is now recognized as an exaggeration, subsequent research repeatedly confirms that the proportion of people with a bisexual orientation (when defined as those who are able to relate to more than one gender sexually and emotionally) is greater than the proportion of individuals on the exclusively homosexual side of the binary (Miller et. al., 2007; Rust, 1999). Results from a national probability sample indicate that 3.1% of all adults identify as bisexual compared to 2.5% of all adults

who currently identify as lesbian and gay (Herbenick et al., 2010). Further, the same study determined that 4.9% of all adolescents identify as bisexual compared to 1.0% of adolescents who identify as gay or lesbian. Egan, Edelman and Sherrill (2007) surveyed 768 lesbians, gays and bisexuals and found that 48.9% of the sample identified as bisexual compared to 51.1% of the population who identified as lesbian/gay. Thus, bisexual-identified individuals represent a substantial portion of the population.

Quantitative data supports the claim that bisexual-identified people exist in substantial numbers and also that bisexual identity is both connected to and distinct from lesbian and gay experience (Bronn, 2001; Bostwick, Boyd, Hughes & McCabe, 2010; Diamant, Wold, Spritzer, & Gelberg, 2000; Gebhard & Johnson, 1979/1998; Jorm, Korten, Rodgers, Jacomb, and Christensen, 2002; King, Semlyen, Tai, Killaspy, Osborn, Popeluk, & Nazareth, 2008; Kinsey et al 1948/1998; 1953/1998; Koh & Ross, 2006; Rust, 2000; Saewyc et. al., 2007). Thus, bisexual-identified individuals experience unique challenges associated with their bisexuality. However, currently there is a paucity of research on *how* bisexual and monosexual experiences differ, as well as on what experiences facilitate or impede bisexual identity development and mental health. This lack of information leads to minimal mention of and virtual invisibility of bisexuality in the most commonly used textbooks directed at counseling diverse clients.

### **Bisexual Identity and Biracial Identity**

Comparing bisexual identity to biracial identity may provide some degree of context. Multicultural theory provides a foundation for identity models that are distinct from monoracial identities and specific to bi-racial and multi-racial identities (Bilodeau



& Renn, 2005; Dworkin, 2002; Garbarini-Phillipe, 2010; Hall & Pramaggiore, 2001; Kerwin & Ponterotto, 1995; Poston, 1990; Renn, 2007, 2010; Viager, 2011). Research on bi-racial identity development has shown that bi-racial identity development is more complex than mono-racial identity development (Dworkin, 2002; Garbarini-Phillipe, 2010; Hall, 2001; Poston, 1990; Renn, 2007, 2010; Root, 1990; Viager, 2011). This leads to the understanding that the needs of bi-racial clients are both different from and related to the experiences of mono-racial individuals. By extension, it could be argued that there would also be differences in the experiences of bisexual people in contrast to the experiences of monosexual individuals (Alimahomed, 2010; Atkins, 1998; Balsam & Mohr, 2007; Breno & Galupo, 2010; Brooks et al, 2010; Brown, 2002; Burleson, 2005; Califia, 2005; Collins, 2004; Crabtree et al, 2010; D'Augelli & Patterson, 2001; Dworkin, 2001, 2002; Evans, 2003; Floyd & Stein, 2002; Fox, 2003; Fox, 2004; Garber, 1995; Grady, 2008; Gurevich, Bailey, & Brower, 2009; Herek & Garnet, 2007; Mullick & Wright, 2001; Nichols, 1988; Rust, 2000; Scherrer, 2006; Troiden, 1989; Utz, 1991).

### **Multicultural Counseling Competency and Social Justice Advocacy Applied to Bisexuality in Counselor Education**

Multicultural counseling competency is constructed to meet the needs of a growing and diverse society. Incorporating attention to bisexuality into multicultural counseling competency requires some shifts in focus. First, counselor education programs need to observe the tripartite model of multicultural counseling competency with regard to facilitating the development of self-awareness, knowledge and skills (Arrendondo et.

al., 1996) relevant to sexual identity development. In particular, multicultural counseling competency linked with social justice advocacy (Ancis & Rasheed, 2005; Fouad, 2006) related to bisexuality should be incorporated into counselor education. This requires that counselor educators teach counselors-in-training how to advocate for bisexual individuals at the client, community and public levels (ACA, 2005; Lewis et. al., 2003; Miller, et. al., 2007; Ross, Dobinson & Eady, 2010; Shin, 2008; Spanierman & Poteat, 2005). While a number of methods for promoting such awareness and advocacy are possible, the foundation for much learning lies in the textbooks used (Fouad, 2006; Pieterse, Evans, Risner-Butner, Collins & Mason, 2008). For this to happen, textbooks used in multicultural counseling courses need to be inclusive of bisexuality and the needs of bisexual-identified clients. Therefore, the purpose of this dissertation study is to determine whether the information and training practices currently offered in multicultural counseling textbooks and courses is adequate to prepare counselors-in-training for work with this population.

### **Purpose Statement**

The primary purpose of this study is to gain an understanding of how CACREP-accredited counselor education programs are currently training counselors to be culturally competent with bisexual-identified clients. The secondary purpose of the study is to determine if the current training strategies for working with bisexual-identified clients are adequate in relation to the standards and competencies developed by a range of professional counseling organizations, in relation to the current body of literature on bisexuality and bisexual-identified clients and in relation to information provided about

other marginalized groups. A third and final purpose of the study is to find out what, specifically, is being taught about bisexual-identified clients in CACREP accredited programs.

I am drawn to this dissertation research because I have identified as bisexual for over 20 years and I am currently a doctoral student in a counselor education program; my purpose in pursuing this dissertation research is to explore the work that counselor educators are currently doing to prepare their students to work with bisexual-identified clients. I do this with the over-arching intention of pointing out the gaps so that counseling competence with bisexual individuals becomes more accessible and widespread.

### **Description of the Problem**

Numerous scholars have examined cultural identity development and counselor educators have applied this awareness to counselor training (Cass, 1979; Cross, 1971, 1991; Helms, 1990; Helms & Cook, 1995; D'Augelli, 1994). Cultural identity models are tools used by counselors to gain insight into client development. Cultural identity models generally focus on the psychosocially constructed process of defining the self (Evans, Forney, and Guido-DiBrito, 1998; Helms, 1993, 1995). The traditional models in both categories (psychosocial and cognitive structural) are stage models.

Cultural identity models were first applied to individuals who affiliated themselves with one side or the other of a dualist notion of a construct; that is to say one is "either" this "or" that. This dualistic way of being is sometimes referred to as "a binary." By definition, a binary is a noun consisting of, involving, or indicating "two"

(<http://dictionary.reference.com/browse/binary>). Following a binary or dualistic notion of identity means that a person is, for example, “either” gay *or* straight, Black *or* White, rich *or* poor, old *or* young. Individuals who subscribe to one or the other side of a binary construct are referred to as “mono.” For example, individuals who are either Black or White are mono-racial. Individuals who are either straight or gay are monosexual (Califia, 2005). Focusing on the binary poles of these constructs leaves out those people who are some mixture of, or in the middle of, these identity poles. The tendency to focus on the dualistic notions of a construct leaves counselors with little understanding of those individuals who occupy the spaces between the binary poles, as in the case of bisexual-identified individuals (Evans, 2003).

When cultural identity models are applied to mono-cultural identity development, growth is seen as linear and occurs in a stepwise progression. Alternatively, updated non-binary models describe identity development as an elliptical, nonlinear, process that occurs over a lifetime; identities intersect and are capable of influencing the development of other identities. For example, gender identity development intersects with racial identity development and SES to influence career success (Hoffman, 2006). Consistent with such intersectionality, using Cass’ model, Halpin and Allen (2004) demonstrated a positive correlation between psychosocial well-being and gay identity development.

Research conducted by Cass (1979) and Halpin and Allen (2004) clearly demonstrates that psychosocial well-being increases as an individual progresses through the stages of gay identity development. This provides solid rationale for counselors to understand and support healthy gay identity development. While it is reasonable to

assume that this correlation is also true for bisexual-identified people, the faulty assumption that gay identity models sufficiently represent bisexual experience underestimates the degree of minority stress and complexity of identity development for individuals whose identity exists somewhere on a continuum between binary poles (Bostwick, Boyd, Hughes & McCabe, 2004; Diamant & Wold, 2003; Dworkin, 2001; Evans, 2003; Guidry, 1999; Herek, 2004; Israel & Mohr, 2004; Miller, Andre, Ebin, & Bessanova, 2007; Mohr, Israel, & Sediacek, 2001; Phillips, 2004; Samjii, 2007; Waldo, 1999; Wright & Perry, 2006). Similarly, biracial identity development is more complex than monoracial identity development (Collins, 2004). Individuals whose identity exists between binary poles—whether the dualism centers around race or sexual identity or gender or another construct— can benefit from the support of counselors who understand both the differences and similarities experienced by these individuals in relation to their monoracial or monosexual peers (Califia, 2005; Collins, 2000; Grady, 2008).

### **Researcher Commitment and Bias**

My personal commitment to this research along with the biases I bring to this study may provide context and further rationale for the study's purpose. It is responsible and trustworthy in qualitative research to be transparent (Corbin & Strauss, 2008; Patton, 2002; Hill, Knox, Thompson, Williams, Hess, & Ladany, 2005), so I present my potential biases about this research up front. Bisexual-identified people are marginalized and underrepresented in scholarly discourse around sexuality (Fairington, 2005; Rust, 2002) as well as in the training provided by counselor educators to counselors in training. I have long-term experience with lack of understanding applied to bisexual identity in

counseling. In the late 1980's, I came out for the first time as bisexual. I attempted to share my experiences with a counselor who admitted she had no experience with bisexuality. Unfortunately, this experience became commonplace for me.

Throughout my life, I have had to teach my counselors about what it means for me to be bisexual. This limited the work that could be done in the counseling relationship. I have become a vocal advocate for bisexual-identified youth because, as a school counselor, I want young bisexual people to be represented and to experience a level of inclusion I did not have while growing up bisexual. During my master's program at a large, mid-Atlantic university, I volunteered as a trained LGBTQ mentor and I sat on the Diversity Enhancement Committee. While working as a school counseling intern from September 2008-June 2009, I had several students come out to me as bisexual—in addition to those who came out to me as lesbian and gay. Since I began my work teaching as a graduate assistant in fall 2010, I have been an out faculty member at the university where I am working toward my PhD. I participate in a university-wide visibility initiative in which the university posts a picture of the teacher along with their chosen LGBTQQIA status.

I have recently begun teaching as substitute faculty at a different location, and I have once again made my bisexual identity known to my students. Again, this has resulted in several students disclosing to me that they are bisexual. As a bisexual-identified counselor educator, I have made myself visible to my students for a number of reasons. I want people to know that bisexual people do exist, and that we are as diverse as any other population—and one way for that to happen is for me to allow myself to be

visible, to be known as bisexual by the people immediately surrounding me. I consider this advocacy at the individual level (Lewis et al, 2003). In each location where I have taught after receiving my master's degree, my openness has resulted in being informally identified as a resource for bisexual students and the people who care for them. In addition to this informal role, I have given numerous talks at the local, state, and international levels regarding bisexuality.

Hence, I state openly that I engage in this dissertation research as an act of advocacy. I believe it is essential for multicultural counseling coursework to be inclusive of bisexuality and that counselor educators need to be prepared to teach counselors-in-training how to work with bisexual-identified clients. Prior to developing training for educators and counselors, however, it is important to ascertain that there is, in fact, a gap in the training currently being provided. My hope is that pointing out the gap in our awareness will lead to further research that will in turn inform future training provided in counselor education programs.

Social justice advocacy presupposes the self-awareness, knowledge, and skills developed through the tripartite model of multicultural competency (Arrendondo et al, 1996; Lewis et. al., 2003). Advocacy is a response to marginalization that can be accomplished at the individual, community, institution, and/or public policy levels (Lewis et. al., 2003). This dissertation research is an example of advocacy that could function at multiple levels by shedding light on a gap in counseling awareness and training, by providing visibility to the broader community of bisexual-identified people and by indicating the need for increased inclusion of bisexuality in multicultural

counseling courses (Diamant & Wold, 2003; Evans, 2003; Feldman, 2009; Harper, 2010; Lewis et al., 2003; Miller et. al., 2007; Ragins, Singh, & Cornwell, 2007; Phillips, 2000; Ross, Dobinson, & Eady, 2010; Samji, 2007; Waldo, 1999; Weitzman, 2006).

### **Definitions**

For the sake of clarity, four key concepts will be defined here. These are bisexuality and bi-invisibility, or bisexual invisibility, diversity and multicultural, and pluralism.

#### **Bisexuality**

Inconsistency in how words are defined can impact our understanding of constructs and labels. Lack of attention to bisexuality in research may be partly due to inconsistent definitions of bisexuality, reinforcing stereotypes, inaccurate assumptions, and bi-erasure (i.e., assuming that bisexuals do not “really” exist, but are instead simply confused) (Barker & Landridge, 2008; Burleson, 2005; Califia, 2005; Diamant & Wold, 2003; Evans, 2003; Feldman, 2009; Harper, 2010; Phillips, 2000; Miller et. al., 2007; Ragins, Singh, & Cornwell, 2007; Ross, Dobinson, & Eady, 2010; Samji, 2007; Waldo, 1999; Weitzman, 2006). In 1985, Klein, Sepekoff, and Wolf created a comprehensive and inclusive model of sexual identity known as the Klein Grid, but they did not describe how bisexual identity development happens or factors that facilitate or impede bisexual identity development. The Klein Grid is distinguished from the Kinsey Scale (Gebhard & Johnson, 1979/1998; Kinsey et al 1948/1998; 1953/1998) by its bi-positive and multi-axial characteristics. For the purpose of this paper, bisexuality is defined using the multi-



axial Klein model (Klein, Sepekoff, & Wolf, 1985). It involves a constellation of the following: sexual attraction to more than one gender, sexual behavior with more than one gender, sexual fantasies with more than one gender, emotional preference for more than one gender, social preference for more than one gender, self-identification, and engagement in hetero/gay lifestyle. Choosing to ignore the possibility that there are more bisexually-oriented individuals than there are monosexually-oriented individuals contributes to the minority stressor *bi-invisibility*.

### **Bi-invisibility**

*Bi-invisibility* refers to the systematic erasure of bisexuality as a legitimate identity (Barker & Landridge, 2008; Burleson, 2005; Miller et. al., 2007; Ross, Dobbins, & Eady, 2010; Samji, 2007). Since the beginning of modern mental health research, emphasizing the binary and instead casting bisexuality as a non-legitimate long-term identity have been mutually reinforcing social trends. For example, Freud suggested that bisexuality was an immature stage of sexual identity (Freud & Strachey, 2000). Later, Kinsey gathered a substantial body of evidence regarding bisexual behavior but rejected the bisexual label (Kinsey et al 1948/1998; 1953/1998; Gebhard & Johnson, 1979/1998). These legacies have stigmatized bisexuality in the mental health community and resulted in a lack of awareness, understanding, and best practices.

There are many widely-held misconceptions that contribute to bi-invisibility (Blasinghame, 1992; Dworkin, 2001; Grady, 2008; Kessler, 1991; Klesse, 2005; Miller et. al, 2007; Mulick & Wright, 2001; Ross, Dobinson & Eady, 2010). For example, the popular myth that the number of bisexual-identified people is negligible contributes to the

erasure of bisexuality from public awareness. The result is bi-invisibility expressed in everything from jokes and other forms of humor suggesting that bisexuals don't exist, to regular surveys in public media to determine "if there really *are* bisexuals out there," to other notions that discount or discredit bisexuality as a legitimate sexual identity (Blasinghame, 2001; Brewster & Moradi, 2010; Burleson, 2005; Califia, 2005; Dworkin, 2001; Grady, 2008; Kessler, 1991; Miller et. al., 2007; Mulick & Wright, 2001). The latter is illustrated by the popular ideas that *bisexuals are really just confused* or *bisexuals are just doing it to get attention* or *bisexuals are lying*. The pervasive erasure, discrimination, stigmatization and lack of validation experienced by bisexual-identified people may be part of the underlying cause for their lack of inclusion in the counseling literature. At the same time, these negative experiences related to bisexuality are important contributors to mental health disparities associated with bisexual identity (Brewster & Moradi, 2010; Dworkin, 2001; Klesse, 2005; Miller et. al, 2007; Ross, Dobinson & Eady, 2007).

### **Diversity and Multicultural**

This dissertation study incorporates concepts related to the terms *diversity* and *multicultural*. CACREP refers to the distinctiveness and uniqueness that exists among and between human beings as *diversity* (CACREP, 2009). As a group, bisexuals are diverse; additionally, the presence of bisexuals contributes to the diversity of human sexuality. Relatedly, the term *multicultural* indicates the diversity of racial, ethnic, and cultural heritage along with these other factors: socioeconomic status; age; gender; sexual

identity; and religious and spiritual beliefs, as well as physical, emotional, and mental abilities. Bisexual-identified individuals are presumably included in this list.

### **Pluralism**

Bisexual-identified individuals are part of the letter strand that is used to refer to members of the queer community (LGBTQQIA). As such, bisexuals experience interdependence with other members of that community. CACREP defines the term *pluralism* as referring to a circumstance of society in which numerous distinct ethnic, racial, religious, and social groups coexist and collaborate with the goal of interdependence that enriches each group. This definition is based on the premise that all members of society benefit when diverse groups have access to full participation in the dominant culture, yet are supported as they sustain their differences. As members of the queer community, bisexual individuals participate in cultural pluralism. On one level, this can be seen as the queer community seeking full participation in the dominant culture with the associated desire to sustain differences that are specific to queer identity. On another level, bisexuals are seeking full participation in the queer community while maintaining a discrete bisexual identity within that community. In addition to the definitions I have provided for the terms *bisexuality* and *bi-invisibility* (or *bisexual invisibility*), *diversity* and *multicultural*, and *pluralism*, there are several other definitions that are pertinent to this dissertation study. I will now present the terms used to describe non-heterosexual people.

### Terms Used to Refer to Non-heterosexuals

Sexual identity possibilities should be endless, and no one possibility should exclude or take privilege over another (Califia, 2005; Guidry, 1999; Miller, Andre, Ebin, & Bessanova, 2007; Samjii, 2007). However, the past has imprinted traditional and current discourse on the queer community with variations of a letter strand that privileges the placement of lesbian and gay identities, and thereby further reinforced through implication an identity hierarchy with the monosexual identities lesbian and gay at the top. ALGBTIC handles this by employing the term GLBT in its writing, and using the order LGBT in the title of the organization. Although this indicates some degree of awareness of the privilege associated with being first, ALGBTIC's approach still privileges monosexual identity by consistently placing lesbians and gays at the front of the list. Ideally, it would be possible to constantly shift the letters in the strand, but for purposes of simplicity, this paper will use the letter strand "LGBTQQIA" consistently in that order and as interchangeable with the term "queer community." For purposes of clarity, I will now define each of the words represented in that strand.

The broader community of which bisexuals are part can be defined by the letter strand the strand LGBTQQIA, for Lesbian, Gay, Genderqueer/Genderfuck, Transgender, Bisexual/BiPoly/BiQueer, Queer, Questioning, Intersex, and Ally (see Atkins, 1998; Balsam & Mohr, 2007; Burleson, 2005; Califia, 2005; Garber, 1995; Rust, 2000; Weed & Schorr, 1997). The term *lesbian* refers to a woman-identified individual who seeks emotional, spiritual and/or physical relationships with other woman-identified people; *gay* refers to an individual who is male-identified who seeks to be emotionally, spiritually

and/or physically involved with other people who are male-identified. Some people associate other words with the “G” in addition to the word *gay*. For example, *genderqueer* usually refers to individuals whose gender expression is consciously not consistent with conventional standards for masculine and feminine behavior and *genderfuck* usually refers to an individual whose gender expression is a political commentary on the conventions of a gender binary system; *bisexual*, *bipoly* and *biqueer* are terms that generally refer to individuals who experience sexual, emotional and physical attraction to both sexes or to many genders; *transgender* refers to individuals whose gender identity is not adequately described by the sex they were assigned at birth; *queer* is considered (more often by the younger generation) to be an umbrella term that refers to all individuals in the letter strand collectively—thus, I identify as queer first and, when I need to be more specific, I say that I am bisexual; *questioning* refers to individuals who are exploring their queer potential; *intersex* refers to individuals whose biological birth does not correspond with conventional expectations of male/female anatomy or genetics (some intersexuals consider themselves transgender and some do not; however, the older term, hermaphrodite, is considered by many to be offensive); *ally* refers to individuals who take a proactive interest in social justice and consider themselves agents of change relevant to sexual orientation.

## **ALGBTIC**

I will now review pertinent discourse generated by ALGBTIC, one of the divisions of ACA. Similar to AMCD, ALGBTIC is a division of ACA (<http://www.algbtic.org/>). ALGBTIC is a professional organization whose mission is multifaceted and aligns with

the goals of this dissertation study. For example, ALGBTIC's central goal is to generate greater awareness and understanding of gay, lesbian, bisexual, and transgender (GLBT) issues among members of the counseling profession and related helping occupations. This is intended to improve standards and delivery of counseling services provided to LGBTQIA clients and communities. ALGBTIC's mission statement supports counselors' developing awareness of barriers to the human growth and development of LGBTQIA clients and communities as well as the use counseling skills, programs, and efforts to preserve, protect, and promote such development. The mission statement of ALGBTIC recognizes both individual and social contexts representing the confluence of race, ethnicity, class, gender, sexual orientation, ability, age, spiritual/religious belief system, and indigenous heritage. Further, the ALGBTIC mission statement promotes the development, implementation, and fostering of interest in counseling-related charitable, scientific, and educational programs designed to further the human growth and development of LGBTQIA clients and communities. Because it is important to understand how terms are defined within the profession in order to produce useful discourse, prior to discussing the Standards of Practice I will present definitions of several terms provided by ALGBTIC (<http://www.algbtic.org/>).

Associated with understanding oppression experienced by bisexual-identified individuals, *biphobia* is defined as an aversion, fear, hatred, or intolerance of individuals who are bisexual or of things associated with bisexual culture or a bisexual way of being. ALGBTIC acknowledges that biphobia exists in the LGBTQIA community (the website contains an example statement: "I would never date a bisexual person because

they would just leave me for the ‘opposite’ sex”) as well as the heterosexual community (again, the website provides an example statement: “He/she will eventually settle down and get married”). Although the examples provided by ALGBTIC are useful, my experience suggests that they do not fully demonstrate the depth or the pervasiveness of biphobia in our culture.

I offer a number of illustrations. The idea that bisexual people spread disease more than their monosexual peers is an example of biphobia (Herek, 2002, Ochs, 1996). Similarly, the idea that bisexual people are not trustworthy is also an example of biphobia (Stone, 1996). The sentiment that bisexual people are gross for expressing affection across gender boundaries is also biphobia (Ochs, 1996, 2001, 2007, 2011). Although these indicate some limitations to how ALGBTIC addresses bisexuality, the division appears to be making an effort to include bisexuality in its discourse. For example, ALGBTIC makes the point that there is potential for biphobia to be internalized by bisexual-identified people. This happens when bisexual individuals believe they deserve the negative treatment they receive for being bisexual (the website provides this example: “feeling they don't belong in their LGBTQIQA community if they are dating someone of the ‘opposite’ sex”). This is the equivalent of exclusion, and for bisexual-identified people, it can be an experience in the queer community—a place where, according to assumptions commonly made by the dominant culture, bisexual identified individuals should expect to find inclusion (Fassinger, 2000):

As a result of dual stigma, biphobia, bi-invisibility, and negative stereotypes associated with bisexuality, bisexual-identified individuals are different from their

heterosexual peers and also from their lesbian and gay peers (Dworkin, 2001, 2002; Fassinger, 2000; Ochs, 1996, 2001, 2007, 2011). Although ALGBTIC has created competencies specific to transgender individuals (thus affirming that transgender experience is both distinct from and related to lesbian and gay identity), bisexuality has not been addressed with equivalent attention.

In spite of the differences existing between members of the queer community, or perhaps inclusive of these differences, the term *queer* is applied as an umbrella term that refers inclusively to all members of the non-heterosexual-identified community. ALGBTIC emphasizes that, despite its historical use as a pejorative term, the word *queer* is currently used by many as a positive term that inclusively refers to the entire LGBTQQIA community. Further, ALGBTIC acknowledges that the term *queer* is generally used to identify individuals who exist outside of the heteronormative imperative and/or the gender binary. By way of explanation, the *gender binary* refers to conceptualizing gender as man and woman existing at two opposite ends of a spectrum, or continuum. Thus, the term *queer* can include individuals from the LGBTQQIA community as well individuals such as those who are opposed to marriage and individuals who practice polyamory. ALGBTIC states that identifying as queer may also be a way of presenting a political identity as one who is committed to advocacy/activism for LGBTQQIA rights. In this dissertation study, the term *queer* is used as it has been reclaimed by members of the LGBTQQIA community. I will now provide several more definitions of relevant terms, beginning with *heteronormative* and *heterosexism*.



## **Heteronormative and Heterosexism**

In addition to the preceding definitions that are relevant to this dissertation study, the term *heteronormative* is described as the assumption that everyone follows or should follow traditional heterosexual norms. ALGBTIC indicates that this refers to the assumption that two individuals of opposite gender will eventually find one another and fall in love, get married, usually have children, and engage in a committed, monogamous relationship. For bisexual people, this includes the assumption that when one is with a differently-gendered partner that one is heterosexual and vice versa. This bias also includes the idea that both individuals follow traditional gender norms, wherein males identify with and express masculinity and females identify with and express femininity. *Heterosexism* is another term defined by ALGBTIC that is of particular concern to this dissertation study. With regard to counselor education, heterosexism reinforces bisexual exclusion and bisexual invisibility, or “bi-invisibility.” *Heterosexism* refers to the assumption or idea that all people are heterosexual, all people should be heterosexual or all people ‘must be’ heterosexual. The implication is that heterosexism represents an ideological system that denies, denigrates, ignores, marginalizes, or stigmatizes anyone who is LGBTQQIA by seeking to silence or make invisible their lives and experiences. It is pervasive within societal customs and institutions, and itself, like other forms of privilege, is not openly challenged in the dominant discourse. Thus heterosexism is passed on generation to generation through the process of socialization.

**Monosexism.** Although ALGBTIC does not define bi-invisibility or monosexism, it should be mentioned here that a parallel process occurs for bisexual individuals in

relation to these terms (Barker & Landridge, 2010; Califia, 2005; Israel & Mohr, 2004). Explicitly, monosexism refers to the assumption or idea that all people are monosexual, all people should be monosexual or all people 'must be' monosexual. Therefore, monosexism represents an ideological system that denies, denigrates, ignores, marginalizes, or stigmatizes anyone who is bisexual or polysexual or pansexual or otherwise non-monosexual by seeking to silence or make invisible their lives and experiences. Like heterosexism, monosexism is pervasive within societal customs and institutions, and itself, like other forms of privilege, is not openly challenged in the dominant discourse. An example is how ALGBTIC subsumes bisexuality in discourse concerning lesbians and gays but provides specific standards for competency to address the marginalization experienced by transgendered individuals. Unfortunately, the lack of specific attention paid to the concerns of bisexual-identified people reinforces monosexism as well as bi-invisibility (Barker & Landridge, 2010; Israel & Mohr, 2004). I will now discuss bi-invisibility and monosexism as well as other pertinent terms.

### **The Nature of this Project**

In this study, I have attempted to comprehensively assess the degree to which bisexual-identified clients are represented in multicultural counseling courses offered in CACREP-accredited programs. I have asked: Are counseling students being provided opportunities to develop self-awareness, knowledge and skills relevant to working with this population? Are counselors-in-training provided enough education and training specific to bisexual-identified people, compared to the current research available on this population? Is bisexuality represented in the textbooks chosen by counselor educators? If

so, in what ways? Do counselor educators utilize other materials to evoke awareness of bisexuality in counselor-trainees?

I hope that answering these questions will increase counselor awareness of how invisibility affects all marginalized, disenfranchised and oppressed populations. Further, I hope that this increased awareness will inspire counselor educators and mental health professionals to facilitate the development of acceptance of diversity and thereby increase opportunities for bisexual people to be out and proud of their identity (Crabtree, Haslam, Postmes, & Haslam, 2010).

### **Research Paradigm and Undergirding Assumptions**

The literature that supports this dissertation research comes from a wide variety of disciplines, and is reviewed in depth in the next chapter. A brief review is included here to position the reader in the context of the study.

#### **Constructivism**

This study is rooted in constructivism, a paradigm that emphasizes that meaning is made by individuals through active engagement in their current experiences, reflection upon these experiences, and comparison of current experiences to preexisting assumptions (Hays & Singh, 2011; Hays & Wood, 2011). Constructivism stands in contrast to the notion of knowledge as passively received. A constructivist paradigm assumes that as individuals engage in the process of thinking about and subsequently integrating their own diverse experiences, they are actively participating in their own learning (Hayes & Oppenheim, 1997). A constructivist epistemology replaces the positivist quest to generalize about the experiences of many to one truth with a

willingness to accept the possibility of noting multiple narratives. While research designs that are influenced strongly by positivist and post-positivist traditions seek to illuminate an ultimate human truth and thereby implicitly privilege one perspective over another, acceptance of multiple truths makes constructivist approaches particularly applicable to studying the ways that counselor educators communicate to counselors-in-training about the inherently diverse experiences of bisexual-identified people.

### **Overall Method**

This dissertation was conducted as a descriptive content analysis, which is a research tool capable of providing a systematic and objective account of the existing content of communications (Holsti, 1969). In keeping with a constructivist foundation, this design focused on the variable, subjective, socially constructed nature of reality and the ability to find value in multiple perspectives. Elements of post-positivism were incorporated to find common themes in the data (Hays and Wood, 2011; Patton, 2003).

**Post-positivism.** Grounded in a sense of frustration that positivism was over-deterministic (meaning that every human act, is caused by something and that there is no real free will) and that constructivism was so totally relativist (and therefore highly contextual), realism formed from a combination of positivist and interpretivist positions. A common form of post-positivism is known as *critical realism*. Critical realists believe that there is a discrete reality independent of our thinking about it that science can define and study. This stands in contrast to *constructivist* thinking, which might attest that there is no immutable external reality – each person makes up his or her own reality). Post-

positivist critical realist thinking is distinct from *positivism* because post-positivist critical reality recognizes that all observation is fallible and has error and that all theory is revisable. Thus, the post-positivist critical realist is *critical* of our ability to know reality with certainty. While positivism suggests that the goal of science is to uncover the truth, the post-positivist critical realist believes that *the purpose of science is ultimately about getting it right about reality, although all that is really possible is a close approximation to some form of reality.*

**Social constructivism with a sprinkle of post-positivism.** This slight blending of traditions allowed me to explore themes and make connections across the diverse methods by which counselor educators may choose to communicate information about non-dominant cultural groups like bisexuals, lesbians, and gays. Through use of these methods, my hope was that, without overgeneralizing about the experiences of bisexual-identified individuals or about how counselor educators teach counselors-in-training about clients who identify as bisexual, this research may have the potential to reduce marginalization of bisexual-identified clients. One way that this could occur is if counselor educators responded to my research by increasing the visibility of bisexual-identified individuals in counselor education.

In terms of axiology—that is, how the individual values of the researcher play a role in each stage of the research process—researcher bias is inevitable. My predisposition to bias as a member of the community under study was discussed earlier. To increase trustworthiness in the study, I dealt with my bias by bracketing my assumptions, and by allowing the data to drive the results of the study. The rhetoric

involved in this study is related to the axiology. I chose to employ the use of the first person as a way of owning my identity as a participant observer in the research. First person is appropriate for this paper because the bisexual community is an understudied population and I am a participant observer committed to this research as an act of social justice. As such, I seek to own the bias associated with this identity by writing in the first person.

### **Content Analysis**

A content analysis allowed me to determine what counselor educators currently provide in terms of training directed at competency with bisexual clients. I will here provide a brief description of content analysis, which will be more fully outlined in Chapter Three of this dissertation proposal. Berelson (1952) described content analysis as a research tool capable of providing a systematic and objective account of the existing content of communications. As such, content analysis focuses on the actual content and internal features of various media and modalities through which information is transmitted. This is accomplished by objectively assessing the manifestation of certain words, concepts, themes, phrases, characters, and/or sentences within texts or a set of texts. Texts can include books, book chapters, essays, interviews, discussions, newspaper headlines and articles, historical documents, speeches, conversations, advertising, theater, informal conversation, or really any occurrence of communicative language.

This content analysis involved contacting instructors who have been assigned to teach multicultural counseling in CACREP-accredited programs in order to collect syllabi for these courses and to ask for an account of what supplemental materials are in use that

are not shown on the syllabus. Each syllabus and response concerning supplemental materials was examined to determine which text(s) and supplemental materials are being used. Textbooks were examined for the presence of information relevant to work with bisexual-identified clients, and a comprehensive list of reported supplemental materials relevant to work with this population was assembled. Instructors were given the opportunity through an open-ended question to describe any activities conducted in class that may be relevant to working with bisexual-identified clients. The data was analyzed through frequency checking and qualitative analysis.

Through frequency checking and qualitative analysis, the words, phrases, sentences, activities within the collected texts was coded into manageable categories and then examined using conceptual analysis. The method of coding used in content analysis is essentially one of selective reduction, which means breaking down the contents of materials into meaningful and pertinent units of information. This allows the messages in the text to be analyzed and interpreted. The analysis of data led to inferences about the messages within the texts and how they are exchanged. Thus, this dissertation study was conceptualized as having the capacity to indicate, on the one hand, comprehensive coverage of bisexuality in CACREP-accredited counselor education programs, or on the other hand, a gap in education and instruction of counselors-in-training with regard to bisexual-identified clients. As such, this content analysis was particularly sensitive to the intentions, biases, prejudices, and oversights of authors and/or educators that may be embedded in the texts examined.

## **Conceptual Analysis**

Seale (2004) built upon Berelson's (1956) definition of content analysis by noting that content analysis can be comprised of any technique for analyzing texts in terms of the presence and frequency of specific terms, narratives or concepts. While the data collected in content analysis is qualitative, the analysis itself is largely quantitative, and portions of data can be displayed efficiently using charts and graphs. Content analyses usually employ methods that fall into one of two categories: descriptive conceptual analysis or relational analysis. This dissertation study used descriptive conceptual analysis because I am interested in the degree to which bisexuality is represented in multicultural counselor education. Descriptive conceptual analysis requires that a concept be chosen for investigation and the breadth and depth of its occurrences be examined. Because terms may be represented implicitly as well as explicitly within the texts, it is important to clearly define terms before the beginning of analysis. Chapter Two will provide a relevant review of the literature, including definitions of constructs.

### **Summary**

In this chapter, I have provided an introduction to a content analysis dissertation study conducted on CACREP-accredited counselor education programs. I have presented the purpose of this dissertation study, which is to determine the extent to which bisexuality is addressed in CACREP-accredited counselor education programs. I have provided background and context for the study, and offered a brief introduction to the rationale for the research. I described the nature of the study and my role as a participant observer. The research paradigms that underlie the study were connected to the purpose of the research.



The research tradition, content analysis was defined. A number of other terms relevant to the study including bisexuality, bi-invisibility, and post-positivism were also defined. Next, Chapter Two will review the literature that is germane to this study, beginning with the standards developed by CACREP.

## **CHAPTER II**

### **REVIEW OF THE LITERATURE**

#### **Introduction**

This chapter presents the foundations for bisexual inclusion in counselor education, which is the focus of this dissertation. First, literature pertaining to the the unique barriers faced by bisexual-identified individuals, the impact of these barriers on bisexuals' wellness, and the impact of these barriers on the therapeutic relationship is reviewed in depth. Next, because professional organizations have a significant impact on standards and competencies which direct practice, I discuss how discourse generated by CACREP, ACA, AMCD and ALGBTIC are related to the study. Because the study is centered on CACREP-accredited programs, I present the CACREP standards as support for the rationale underlying this study. Following this, I discuss the ACA code of ethics (ACA, 2005), which is central to counselor professional identity as well as counselor training. Next, further support is provided through a review of three sets of competencies: (1) the multicultural competencies operationalized by Arredondo et al. (1996) (2) the standards for competency with LGBTQQIA clients adopted by ALGBTIC (2003) and (3) the advocacy competencies developed by (Lewis, Arnold, House, & Toporek, 2003).

#### **Key Concepts in Bisexuality**

Bisexuality has historically been marginalized in the theories and research methods used to study sexuality (Fairington, 2005). Klein, Sepekoff and Wolf (1985) noted over 25 years ago that research into bisexuality was virtually nonexistent. This assessment continues to accurately reflect the status of research on bisexuality.

In the research that exists, quantitative data support the claim that bisexual-identified people exist in substantial numbers, justifying the need for research on bisexual mental health in addition to that which exists for counselors working with lesbians and gays (Egan, Edelman, & Sherrill, 2007; Herbenick et al., 2010). Kinsey reported that 46% of adult males register as bisexual—an extraordinarily high estimate (Kinsey et al 1948/1998; 1953/1998; Gebhard & Johnson, 1979/1998). While this is now recognized as an exaggeration, subsequent research repeatedly confirms that the proportion of people with a bisexual orientation (when defined as those who are able to relate to more than one gender sexually and emotionally) is greater than the proportion of individuals on the exclusively homosexual side of the binary (Rust, 1999).

### **Problems with Conflation**

An example of the shortsightedness sometimes found in well-meaning research can be understood through a brief review of Meyer (2003), who explained that the prevalence of mental disorders in LGBTQIA individuals compared to heterosexual peers is caused by minority stress. Such minority stress occurs when stigma, prejudice and discrimination create a hostile and stressful social environment that results in mental imbalance. Meyer (2003) neglected to point out that bisexual individuals experience minority stress through interaction with all monosexuals—including those in the queer community (particularly lesbians and gays) (Califia, 2005; Ross, Dobinson, & Eady, 2010). He addressed the discrimination implicit in classifying homosexuality as a disorder in the removal of homosexuality from the second edition of the Diagnostic and Statistical Manual of Mental Disorders (PsychiatryOnline.com., 2007), but did not

address the implicit issue of bi-invisibility—the idea that bisexuality was not considered worth mentioning as a distinct diagnosis from homosexuality. This type of oversight in research reinforces common claims that bisexuality does not exist (for one reason or another) and is consistent in the literature from Freud (Freud & Strachey, 2000) to Kinsey (Kinsey et al 1948/1998; 1953/1998; Gebhard & Johnson, 1979/1998) and beyond.

### **Bisexual Mental Health**

As was stated, past research has shown that bisexual-identified people are at a higher risk for mental disorders than their monosexual peers. For example, bisexual individuals experience the highest rates of anxiety, depression, and negative affect (Bronn, 2001; Jorm, Korten, Rodgers, Jacomb, and Christensen, 2002). Jorm et al. (2002) noted that community surveys have reported a higher rate of mental health problems in combined groups of homosexual and bisexual participants, but that data in previous studies have not been disaggregated for these two groups. To address this, Jorm et al. (2002) assessed separately the mental health of homosexual and bisexual groups compared with heterosexuals. A sample of 4824 adults was surveyed in Canberra, Australia. Participants were assessed for anxiety, depression, suicidality, alcohol misuse, positive and negative affect and a range of risk factors for poorer mental health. The bisexual group produced the highest scores for measures of anxiety, depression and negative affect, with the homosexual group falling between the other two groups. Both the bisexual and homosexual groups scored high for suicidal ideation. In addition, bisexuals also experienced more current adverse life events, greater childhood adversity,

less positive support from family, more negative support from friends and a higher frequency of financial problems.

Bisexual-identified people also experience the highest rates of lifetime and past-year mood disorders (Bostwick, Boyd, Hughes & McCabe, 2010; Bronn, 2001). Diamant, Wold, Spritzer, and Gelberg (2000) found that bisexual women are more likely than heterosexual women to have poor health behaviors, less likely than heterosexual women to have health insurance and, not surprisingly, are more likely to have had difficulty obtaining medical care. Additionally, bisexual women are more than twice as likely as lesbian women to have an eating disorder (Koh & Ross, 2006) and bisexual-identified people experience higher rates of suicidality (King, Semlyen, Tai, Killaspy, Osborn, Popeluk, & Nazareth, 2008; Koh & Ross, 2006; Saewyc et. al., 2007) substance abuse, and self-harm (King, et al, 2008) than heterosexual peers.

Viewed in isolation, each of these findings suggests either that the mental health needs of bisexual individuals are distinct from those of monosexuals, or that mental health professionals are providing inadequate care to bisexual individuals (in which case, bisexual individuals may avoid treatment and counseling except in the most extreme cases). Considering the totality of the evidence, it is likely that both explanations play important roles. Further, it is likely that these issues could be addressed through increased attention to bisexuality in counselor education.

To change this situation, a clear understanding is needed regarding the factors that impede or support healthy bisexual identity. Counselors need to understand the kinds of

adverse experiences specific to bisexual-identified people that contribute to poor mental health in order to know how to help.

Like the previously discussed example of Meyer (2003), the majority of research that discusses the mental health of bisexual individuals conflates bisexual-identified people with lesbian and gay individuals, yet evidence supports the contention that bisexual identity is experienced as distinct from as well as connected to lesbian and gay identity (Balsam & Mohr, 2007; Blasinghame, 1992; Burleson, 2005; Herek, 2010; Herek & Garnet, 2007; Israel & Mohr, 2004; Ross, Dobbins, & Eady, 2010). While bisexual-identified people experience some barriers in common with their gay and lesbian peers, they also experience challenges that are unique to their bisexual identity. Understanding the barriers that impact bisexual mental wellness is part of the knowledge domain of multicultural counseling competency.

### **Barriers to Wellness Encountered by Bisexuals**

#### **Stigmatization**

Several authors have discussed how stigmatization of bisexual-identified individuals differs from the stigmatization experienced by lesbians and gays (Bostwick, Boyd, Hughes and McCabe, 2010; Israel & Mohr, 2004; Ochs, 1996, 2001, 2007, 2011). Related to this, Mohr and Rochlen (1999) constructed a scale which measures multiple aspects of attitudes regarding bisexuality, referred to as the Attitudes Regarding Bisexuality Scale (ARBS). The ARBS was psychometrically validated with a total of 1,184 heterosexual and lesbian/gay participants across five samples. The two major attitudinal domains that emerged were tolerance and stability. Tolerance referred to the

degree to which bisexuality is considered to be a moral, acceptable sexual identity. The authors found that among heterosexual individuals, moral tolerance for bisexuality correlates with positive attitudes toward lesbian women and gay men. This suggests that attitudes regarding bisexuality are related to attitudes toward lesbian and gay men. Heterosexual participants also demonstrated a correlation between tolerance and a range of variables known to be connected to attitudes regarding homosexuality (e.g., race, religiosity, and political ideology, tolerance for ambiguity and complexity, and personal contact with lesbian, gay, and bisexual individuals). This suggests that some of the same issues that impact heterosexual individuals' attitudes toward lesbians and gays also impact heterosexual individuals' attitudes toward bisexuals.

After tolerance, the second subscale of the ARBS is stability (Mohr & Rochlen, 1999). This measures the extent to which bisexuality is considered to be a stable, legitimate sexual identity. This subscale also measures the degree to which bisexual individuals are viewed as stable and trustworthy in their romantic, erotic, and social relationships. Although these two attitudes regarding bisexuality may be conceptually discrete, analyses suggested that they are highly interconnected and comprise a single attitude dimension (Mohr & Rochlen, 1999). Whereas correlations with tolerance were shown to be highest in the heterosexual samples, correlations with stability were strongest in the lesbian and gay male samples. Further, lesbian women and gay men who considered bisexuality to be a legitimate sexual orientation were more likely than others to consider dating bisexual individuals and have a bisexual best friend, to have had personal contact with a bisexual individual, to interact regularly with heterosexual

individuals, and to view themselves as not solely lesbian or gay. This study provided some further evidence of the complexity of reactions bisexuals potentially face. For example, lesbian women were more likely than gay men to view male bisexuality as a legitimate sexual orientation. However, while lesbian women viewed male bisexuality as more legitimate than female bisexuality, the reverse was true for gay men—they were more likely to view female bisexuality as legitimate as opposed to male bisexuality. Finally, lesbian women were more likely than were gay men to limit interactions to exclude bisexual individuals as possible best friends (Mohr and Rochlen, 1999).

In a study that showed similar results, Herek (2002) conducted a national telephone survey that included items evaluating heterosexuals' attitudes toward bisexual men and women. Herek (2002) collected data for 1,338 total respondents; 1,283 of the participants identified as heterosexual. Attitudes toward bisexuals were compared to attitudes toward a variety of other common social groups (e.g., religious denominations, ethnic groups, pro-choice and pro-life individuals, and lesbians and gay men). Analysis showed that participants reacted less favorably toward bisexual women and men than toward all of the other groups, except for intravenous drug abusers. Higher levels of negative attitudes toward bisexual individuals were associated with higher age, less education, lower annual income, residence in the South and rural areas, higher religiosity, political conservatism, traditional values regarding gender and sexual behavior, authoritarianism, and lack of contact with gay men or lesbians. In this sample, male participants showed disparate attitudes related to the sex of the target (i.e., lower ratings for gay and bisexual men than for lesbian and bisexual women), and female participants



demonstrated contrasting attitudes according to the target's sexual orientation (i.e., lower ratings for bisexual women and men than for lesbian women and gay men).

In an earlier study, Spaulding and Peplau (1997) conducted a quantitative analysis of heterosexual college students' attitudes related to romantic relationship functioning. Participants were provided with materials that varied the sexual identity of the target (heterosexual or bisexual) and the gender of the partner (same- or other-gender) and were asked to rate each partner and relationship in terms of monogamy, sexual riskiness, trust, sexual talent, and relationship quality. Bisexual-identified targets were considered less monogamous, more likely to cheat, and more likely to give their partner a sexually transmitted disease than were heterosexual targets.

**Sexualization.** Related to this, Spaulding and Peplau (1997) also identified a trend of the sexualization of bisexual-identified targets. *Sexualization* is a term that refers to the actions or processes by which an individual or group comes to be regarded as sexual in nature or the actions and processes by which a person develops awareness of their sexuality (VandenBos & APA, 2007). Spaulding and Peplau (1997) highlighted results wherein sexualization of bisexuals was common. For example, partners of bisexual individuals were assumed to be more sexually satisfied than were partners of heterosexual individuals. A comparison of scenarios of bisexual individuals in same-sex and other-sex relationships revealed that bisexual individuals were seen as more likely to cheat on a heterosexual than a lesbian or gay partner, and heterosexual partners were seen as more sexually satisfied by a bisexual partner than were lesbian or gay partners. A similar comparison of perceptions of bisexual versus lesbian/gay individuals in same-sex

relationships showed that bisexual women and men are assumed to be more likely than lesbian women and gay men to give their partner a sexually transmitted disease and less likely to satisfy their partner sexually (Spaulding & Peplau, 1997). To summarize, bisexual-identified people risk a variety of possible opportunities for stigmatization. This results in bisexual-identified individuals facing multiple barriers to wellness. Next, I will describe the impact of these barriers on the wellness of bisexual-identified individuals.

### **Impact of Barriers to Wellness on Bisexuals**

Subsequent research has examined the impact of the stigmatization experienced by bisexual-identified individuals. Balsam and Mohr (2007) highlighted the differences between bisexual and lesbian/gay adults in adaptation to sexual identity stigma. The sample was comprised of 613 lesbian, gay and bisexual adults. The authors used a non-experimental survey design to investigate how internalized homonegativity, stigma sensitivity, identity confusion, identity superiority, sexual identity disclosure and connection to community were experienced differently according to participants' sexual identity. Bisexual participants demonstrated the highest level of identity confusion in the sample. Bisexual participants also showed lower levels of self-disclosure as well as community connectedness in comparison with lesbian and gay peers. Bronn (2001) conducted an empirical, quantitative analysis of the attitudes and self-images of 112 male and female bisexual participants. The author used a one-way ANOVA and chi-square analysis of data collected through an internet survey composed of the Satisfaction with Life Scale, the Rosenberg Self-esteem Scale, and a multiple-choice opinion section that

focused on sexual orientation. Results demonstrated that bisexuals have low self-esteem and that although some bisexuals have conflicts, or are in transition moving up and down a continuum over time, many identify solidly as bisexual over a long, stable period.

**Higher incidence of poor mental health.** Similarly, Bostwick, Boyd, Hughes and McCabe (2010) found that bisexual behavior produced the strongest prevalence of any mood or anxiety disorder for both males and females. The authors collected data from an empirical, quantitative, longitudinal survey and combined this with individual structured interviews. Multiple logistic regression analyses were used to test for associations between sexual identity and DSM-IV mood and anxiety disorders for females and males. Bisexual identity and behavior were consistently associated with intensified risk of mood and anxiety disorders for both men and women.

The above evidence dovetails with other studies that indicate bisexual-identified people experience greater risk to their mental wellness (Koh & Ross, 2006; Miller, Andre, Ebin, & Bessanova, 2007; Ross, Dobinson, & Eady, 2010, Saewyc et. al, 2007). Bostwick, Boyd, Hughes and McCabe (2010) associate the results of their study with the stigmatization faced by bisexual-identified individuals, which they maintain is qualitatively distinct from the stigma experienced by lesbian and gay persons. The authors attributed this in large part to the pervasive stereotypes and negative attitudes about bisexuality that are present among the “dominant” heterosexual population as well as among lesbian and gay populations. This manifests as *double stigma* or *dual stigma* for bisexuals. Evidence of this stigma was found in narratives of indeterminacy, confusion,

and deceit, wherein participants felt unable to choose their identity or, felt pressured to lie about or attempt to change their bisexual identity (Bostwick, Boyd, Hughes, & McCabe, 2010). The authors suggest that it is likely that the perpetual contestation of a salient and meaningful aspect of one's self contributes to the disparity in health outcomes among bisexual populations. This evidence provided by Bostwick, Boyd, Hughes and McCabe (2010) is generally consistent with an emerging body of work providing evidence of poorer health outcomes among bisexual groups than among lesbians and gay men, as well as among heterosexual women and men.

Among the health risks experienced by bisexual individuals is increased risk of suicidality. Saewyc, Skay, Hynds, Pettingell, Bearinger, Resnick and Rice (2007) examined the relationship between bisexual identity and suicidal ideation in North American youth. This study used multivariate logistic regressions to calculate age-adjusted odds ratios separately. The authors compared bisexual participants with heterosexual and gay/lesbian peers in nine population-based high school surveys in Canada and the U.S. Results consistently showed that bisexual youth reported higher odds of recent suicidal ideation and attempts compared with heterosexual peers. Increased risk of suicidal ideation in young bisexuals appears to be linked with increased incidence of poorer mental health for adult bisexuals.

In one of the few studies that compares bisexual, lesbian and heterosexual women, Koh and Ross (2006) examined mental health issues among women of different sexual orientations. The authors conducted an anonymous survey at 33 health care sites across the United States. The sample ( $N = 1304$ ) was comprised of lesbians ( $n = 524$ ),

bisexuals ( $n = 143$ ) and heterosexuals ( $n = 637$ ). Sexual identity and degree of “outness” were shown to influence the probability of experiencing emotional stress as well as the likelihood of experiencing emotional problems. Data indicated that bisexual women and lesbians experienced more emotional stress in adolescence than their heterosexual peers. Compared to lesbians, bisexual participants were more than twice as likely to have had an eating disorder. Further, when bisexual women reported being out this was associated with twice the incidence of eating disorders. Koh and Ross (2006) also found that lesbians who were not out and bisexual women who were out exhibited more than doubled rates of suicidality. Thus, being out is protective for lesbians and a risk for bisexual women. This seems to confirm the positive effects of increased social supports for lesbian women as well as the negative impact of higher levels of stigmatization for bisexual women.

Adding to the evidence of barriers faced by bisexual-identified people, Fredriksen-Goldsen, Kim, Barkan, Balsam, and Mincer also suggest that bisexual women experience greater challenges to wellness than lesbian-identified individuals (2010). The authors sampled 1,496 lesbians and bisexual women. They used multivariate logistic regression to analyze Washington State Behavioral Risk Factor Surveillance System population-based data (2003 to 2007). The data analysis examined the health-related quality of life (HRQOL) among lesbians and bisexual women. Bisexual women showed a higher likelihood of frequent mental distress and poor general health than did lesbians. The odds of mental distress were higher for bisexual women living in urban areas as compared with nonurban areas. The authors concluded that despite the standard practice

of collapsing sexual minority women into a single group, lesbian and bisexual women in this study emerge as distinct groups that merit specific attention (Fredriksen-Goldsen, Kim, Barkan, Balsam, and Mincer, 2010).

**Higher incidence of poor physical health and limited access to health care.** In another study drawing distinctions across lines of sexual identity, Diamant, Wold, Spritzer, and Gelberg (2000) compared the physical and mental health status of bisexual, heterosexual, and lesbian women using a population-based sample drawn from the 1999 Los Angeles County Health Survey. The sample was comprised of 4,135 participants aged 18-64 and was divided into three groups of 4,023 heterosexuals, 69 bisexuals, and 43 lesbians, respectively. The authors conducted a bivariate and multivariate analysis to assess the relationship between sexual identity and physical and mental health status. Compared with heterosexuals, both lesbian and bisexual women reported a higher incidence of heart disease. In addition, bisexuals reported significantly more days than lesbians or heterosexuals of poor physical health. Relatedly, bisexual women were shown to be least likely to report having a regular source of healthcare, such as a physician's office or health maintenance organization. Finally, bisexual women were less likely than heterosexual women to see the same health care provider for most of their medical visits (Diamant, Wold, Spritzer, & Gelberg, 2000).

Other studies also found that lesbians and bisexual women were significantly more likely than heterosexual women to have encountered difficulties accessing healthcare. Heath and Mulligan (2008) conducted a study that suggests that for lesbian and gay women who have less access to health care, social connection may be protective.

The authors investigated how communities might contribute to bisexual and lesbian women's well-being. Interviews with 47 women suggest that community engagement could provide resources and social contact, enhancing women's confidence, self-esteem and wellbeing. This study also suggests that bisexual and lesbian women often participate in different communities from each other, and that, while bisexual women confronted transgressing fewer community norms, they may also have access to fewer community resources. This study highlights the importance of the therapeutic relationship to provide social support for bisexuals who may have limited access to community.

**Substance use.** Another area related to barriers to wellness faced by bisexual individuals is substance use. In a study comparing the substance use of bisexual women to their heterosexual peers, Tucker, Ellickson, and Klein (2008) used a linear regression model in a longitudinal study to examine the differences in substance use and psychosocial characteristics among bisexual and heterosexual women. The sample was comprised of 1,479 heterosexual and 141 bisexual participants. The authors postulated that a longitudinal inquiry would provide information about the developmental factors that influence the differences in substance use and psychosocial characteristics among heterosexual, bisexual and lesbian populations. In addition to cigarette, alcohol, and marijuana use at ages 14, 18, and 23 (period of vulnerability for the initiation and escalation of substance use) the authors compared heterosexuals and bisexuals on social influences, drug beliefs, problem behaviors, and mental health. Findings demonstrated that by early adolescence, bisexual women reported lower mental health (self-esteem),

perceived greater parental approval of drug use, had more exposure to drug-using peers, held more positive beliefs about drug use, and felt lower resistance self-efficacy compared with heterosexual women. Data collected at age 23 continued to highlight this trend. At age 23, bisexual women had higher rates of current substance use, greater quantity and frequency of use, along with more problematic alcohol and drug use. Associations were found between risk factors assessed five years earlier at age 18—particularly pro-drug social influences and beliefs—and increased substance use at age 23 (Tucker Ellickson, & Klein, 2008). Thus, increased risk for substance abuse is another barrier that bisexual-identified clients may face.

**Barriers associated with intersection of other cultural identities.** In addition to risk factors associated with substance use, bisexual-identified individuals sometimes encounter barriers associated with the intersection of other cultural identities. To explore this type of barrier, Scherrer (2006) conducted semi-structured interviews with 20 bisexual identified individuals concerning barriers to identifying as bisexual, and the consequences of these barriers for “identity stability.” All of the participants described at least some barriers to claiming a bisexual identity. Some of the participants reported that social characteristics such as race and gender made claiming a bisexual identity label more or less available to them. Some of the bisexual participants suggested that because of their female gender identity, a bisexual identity label was more available to them. Other women noticed the negative stereotypes associated with identifying as a bisexual woman, and consequently saw a bisexual identity as less desirable. Other participants indicated that sexualization played a role, suggesting that the notion of a bisexual label is



complicated by a commonly held ideology that bisexuality is acceptable when it is feminine-appearing women being physically intimate with each other for the pleasure of a male viewer. Others described experiencing pressure to identify as gay or straight. Participants also described other barriers that were related to bisexual individual's experience of community (Scherrer, 2006).

**Barriers associated with bisexuals' experience of community.** Participants in the Scherrer (2006) study also spoke about their experiences in various communities, specifically queer and straight communities. With regard to a "bisexual community" every participant was asked about feeling connected to or knowing about a bisexual community and all remarked strongly and consistently that there was no bisexual community. Several participants mentioned social contacts with one or two other bisexual individuals that constituted their small bisexual community. Scherrer (2006) suggested that a lack of a cohesive bisexual community where bisexual individuals experience belonging makes claiming a bisexual identity more difficult.

**Barriers associated with biphobia.** Every participant was able to describe the stereotypes that exist about the bisexual community with remarkable overlap and coherence. Not only does knowing about cultural stereotypes associated with bisexuality act as a barrier to taking on a bisexual identity, but so do experiences of biphobia in everyday experiences. Scherrer (2006) presents evidence of bisexual women feeling excluded based on lesbian discourse and behavior. Other participants described the policing of sexual identity— interactions with monosexuals wherein the legitimacy of

bisexual identity was called into question or denied. Not only are these feelings of biphobia experienced from friends, and housemates, but also from intimate partners.

Mulick and Wright (2002) developed an instrument to measure the existence of biphobia among heterosexual and homosexual individuals. The tool consists of 30-items and is referred to as the Biphobia Scale. The scale was created to measure negative cognitions, affect, and behaviors regarding bisexuality and bisexual individuals. The authors evaluated the psychometric properties of the scale over three phases of inquiry with two distinct samples. The results of the study provided empirical support for the existence of the construct of biphobia and suggest that it exists in both the heterosexual and homosexual communities. In addition the data support the theory that bisexual individuals are subjected to “double discrimination.”

The Biphobia Scale has recently been revised to address variation according to gender. Mullick and Wright (2011) noted several specific revisions. First, the gender-neutral Biphobia Scale was changed to two gender-specific scales: Biphobia Scales–Female (BSF) and Biphobia Scales–Male (BSM). Next, the content of the original items were kept the same, but the phrase *bisexual individuals* was changed to either *bisexual males* or *bisexual females*. Following this, 18 additional items were included to explore stereotypical aspects of bisexuality (i.e., It is sexy for two women [or men on the male version] to engage in sex with each other.). Finally, to make scoring easier, the scoring of the items was changed to a Likert-type scale of 0 through 5, rather than the original 1 through 6. Following these modifications, the total possible score on each gender specific version of the Biphobia Scales–Revised ranged between 0 and 240.

**Impact of social support.** Related to Scherrer's (2008) and Heath and Mulligan's (2008) research on community, Sheets and Mohr (2009) used a quantitative, non-experimental design to investigate the degree to which perceived social support was associated with depression, life satisfaction, and internalized binegativity. The purposive sample was comprised of 210 young adult college students who identified as bisexual. Two categories of social support (general and sexuality specific) and two sources of social support (family and friends) were studied. Participants were recruited from the electronic mailing lists of organizations serving lesbian, gay, bisexual, and transgender students on 32 university campuses. Data were gathered using three tools: an internet survey comprised of a demographic sheet that assessed information including age, gender, ethnicity, year in school, and geographic location; a scale constructed by Procidano and Heller (1983) to measure self-reported perceptions of general social support from friends (GSSFr, 20 items) and family (GSS-Fam, 20 items); the Center for Epidemiologic Studies Depression Scale (CES-D, 20 items; Radloff, 1977); the Satisfaction With Life Scale constructed by Diener, Emmons, Larsen, and Griffin (1985) to assess an individual's global judgment of life satisfaction; and the Internalized Homonegativity subscale from the Lesbian and Gay Identity Scale (Mohr & Fassinger, 2000). Social support was shown to be most predictive of depression and life satisfaction. Sexuality-specific support was most predictive of internalized binegativity. Participants' experience of the continuum of depression to life satisfaction was shown to be the result of a combination of family and friend support.

Cashore and Tuason (2009) examined the experiences of nine bisexual- and transgender- identified participants with regard to similarities and differences in relation to monosexual and mono-gendered individuals. Semi-structured interviews were analyzed using consensual qualitative research methods. Results indicated that participants experienced being invisible and invalidated by both the straight and queer communities as well as feeling isolated. In addition, participants reported a lack of access to rights on identity, representation, and family of choice.

**Identity management.** Because bisexual-identified individuals experience biphobia from both heterosexual and homosexual communities, there is additional pressure to continuously manage their identities (Sheets & Mohr, 2009). Sheets and Mohr (2009) suggested that encountering these barriers has resulted in bisexual individuals finding creative ways to manage their identities. Selvidge, Matthews and Bridges (2008) examined the relationship between minority stress and flexible coping to psychological well-being in lesbian and bisexual women. The authors examined the relationship of sexist and heterosexist events, self-concealment, and self-monitoring to psychological well-being. The sample included 373 lesbian and bisexual women. There were 77 participants who self-identified as women of color. A multiple regression analysis indicated that self-concealment and self-monitoring resulted in significant variance in positive psychological well-being.

Ross, Dobinson, and Eady (2010) used semi-structured qualitative interviews in a community-based participatory action research study to collect data concerning the perceived determinants of mental health for bisexual-identified individuals. Interviews

were conducted with 55 participants in Ontario, Canada. The authors identified multiple reasons why bisexual-identified individuals experience negative impacts on their mental health. Particularly strong evidence was provided for the impact that stigmatization about bisexuality had on participants' relationships with friends, lovers and family, as well as on participants' ability to access medical services and community support. According to Ross, Dobinson and Eady (2008), bisexual-identified individuals rarely have access to bi-specific resources, bisexuals experience discrimination from both straight and queer communities—and this discrimination happens while accessing services.

Now that I have highlighted how bisexual-identified clients may encounter barriers to wellness based on their sexual identity, I will examine the role that these barriers may play in the therapeutic process. I will begin by describing studies that review helping professionals' perceptions of bisexual clients, and will follow this by exploring research conducted on bisexual clients' experiences in therapy.

### **Bisexuals and Therapy**

**The experience of bisexuals in therapy.** Murphy, Rawlings, and Howe (2002) conducted a survey of clinical psychologists regarding the treatment of clients who identify as lesbian, gay and bisexual. The sample was comprised of 125 currently practicing, doctoral level, licensed psychotherapists randomly selected from the member database of the APA (26,036 members of APA met the selection criteria at the time of the survey). Participants who reported more formal training on LGB issues were more likely to have LGB clients. Also, the data showed a significant interaction between the sex and

sexual orientation of the client and the sex and sexual orientation of the therapist. As Ross, Dobinson & Eady (2010) found, Murphy, Rawlings & Howe also found that lesbians and bisexual women were more frequently seen by lesbian therapists (followed by heterosexual women therapists), and gay and bisexual men were most often seen by gay male therapists (followed by lesbian therapists).

The authors provide some possible reasons why LGB clients choose certain therapists and why certain therapists seem to provide services for more LGB clients than others. For example, Murphy, Rawlings and Howe suggested that training on what issues are important to LGB clients may impact the screening process clients go through when choosing a therapist. In addition, the authors postulated that it is possible that at least some participants indicated smaller proportions of LGB clients than they have actually worked with because they are unaware that some of their clients are lesbian, gay, or bisexual. Further, Murphy, Rawlings and Howe (2002) indicate that this may be particularly the case for bisexual clients, as several therapists in the study reported rejecting the construct of bisexuality.

Murphy, Rawlings and Howe (2002) collected from their larger sample responses from 29 therapists to an open-ended question concerning what concerns bisexuals bring to therapy that may be different from the concerns of lesbian and gay male clients. Participants made reference to bisexuals' challenges with identity development due to their experiencing a lack of acceptance by both the heterosexual and gay communities and experiencing pressure by both communities to choose one monosexual identity. Related to this, therapists reported that many clients believe that bisexuality is a

developmental stage and that they should be progressing to realize their “true” identity. Therapists reported that this results in many bisexual clients feeling confused when they do not come to an identity of either heterosexual or homosexual. Added to this, several participants themselves reported a similar belief—that bisexual clients should be encouraged to explore whether their “real” identity is heterosexual or homosexual. Finally, several therapists responded that bisexual individuals encounter more relationship problems because of their perceived need to have intimate relationships with both men and women. In sum, bisexual clients encounter multiple challenges when they seek support through therapy. These include lack of counselor training, counselor assumptions about clients, and misinformation about bisexuality and bisexual identity development.

**Supervision alone is not adequate training.** A parallel pattern is seen in supervision. In addition to the findings above, Murphy, Rawlings and Howe (2002) found that the use of supervision as the primary or sole source of training in LGB concerns raises a question regarding the quality of supervision. Roughly half of those who received supervision with LGB clients reported that their supervisors had limited or inadequate knowledge of LGB concerns.

**Therapist attitudes toward bisexuality.** While Murphy, Rawlings and Howe (2002), addressed therapist attitudes toward bisexual clients as part of a study that combined data about lesbians, gays, and bisexuals in one investigation, Mohr, Israel and Sedlecek (2001) conducted a study of therapist’s attitudes specifically toward bisexuality. The authors examined predictors of counselors’ clinical response to a client (Mohr, Israel,

& Sedlecek, 2001). An analogue design was used wherein a bisexual-identified female client was described and participants were asked to indicate their views of the client on a number of measures. The authors found that counselors with positive attitudes toward lesbians and gays were more likely than others to view the bisexual client in a positive light, rate the client as having high levels of psychosocial functioning, and avoid applying bisexual stereotypes to the client. The aspect of biphobia that overlapped with homophobia (i.e., intolerance of same-sex attractions) was most predictive of counselors' judgments of the client's overall psychological functioning and counselors' tendency to impose personal values on the client. The aspect of biphobia distinct from homophobia (i.e., the view that bisexuality is not a legitimate or stable sexual orientation) was most predictive of counselors' personal reaction to the client and their judgments about the degree to which the client suffered from intimacy problems. These results provided support for the assertion that counselors' attitudes regarding bisexuality may influence their clinical reactions to bisexual clients even above and beyond the effects of attitudes regarding homosexuality.

Another study sought to determine how common stereotypes about bisexual people impact the way therapists work with bisexual clients. Mohr, Weiner, Chopp, and Wong (2009) investigated whether clinical bias related to client bisexuality is most likely to occur with respect to judgments related to common stereotypes. The sample was comprised of 108 psychotherapists who read a fictitious intake report about a male client who was portrayed as heterosexual, gay, or bisexual. The sexual identity of the fictitious client was behaviorally operationalized by explicit reference to the sex of the client's past



and present intimate partners. Outcomes unrelated to client sexual orientation produced no effect for bisexual stereotypes. In contrast, clinical issues related to bisexual stereotypes were rated as most salient to the case when the client was portrayed as bisexual rather than when the client was portrayed as heterosexual or gay. This effect remained significant even when participants' self-reported ability to avoid bias, self-presentational concerns, and response set related to perceptions of psychopathology were controlled for. The authors conducted exploratory analyses which suggested that this effect was mediated in part by stereotypes of bisexuals as confused and conflicted. Therefore, when data is collected from therapist participants, client bisexuality was determined to have an amplifying effect on clinical bias. This information is complemented by results described by Page (2004), who collected data from bisexual clients about their experiences with mental health services.

**Client perceptions.** It is important to complement the perceptions of therapists (Mohr, Israel, & Sedlecek, 2001; Mohr, Weiner, Chopp, and Wong, 2009; Murphy, Rawlings and Howe, 2001) with those of clients. Page (2004) surveyed bisexual-identified individuals about their experiences with therapy and reported that many of her bisexual research participants had trouble finding therapists who were affirming of their bisexuality and polyamory. In this study, the author developed a 49-item questionnaire which was administered to 217 self-identified bisexual women and men. Data demonstrated that bisexual women and men seek help for issues related to sexual identity less frequently than gay and lesbian participants in comparable studies. They also rate practitioner services as less helpful for bisexual clients with sexual identity concerns.

Page (2004) noted that when individuals disclosed their sexual orientation often or always to a mental health provider, most experienced acceptance from their clinicians. However, it is important to note that participants with more serious clinical issues disclosed their bisexuality to clinicians less often than those who reported more moderate clinical issues. Further, upon disclosure, individuals with more moderate clinical issues experienced reduced acceptance of their sexual identity upon disclosure and reported receiving more biased clinical interventions from providers. In keeping with findings from earlier studies, Page (2004) determined that mental health providers working with bisexual clients need to validate bisexuality as legitimate and healthy, to be accurately informed about bisexual issues, and to intervene proactively with bisexual clients.

The need for increased understanding and awareness of issues related to bisexuality is represented across several studies (Mohr, Israel, & Sedlecek, 2001; Mohr, Weiner, Chopp, and Wong, 2009; Murphy, Rawlings and Howe, 2001; Page 2004; Scherrer, 2006). Brooks, Inman, Klinger, Malouf, and Kaduvetoor (2010) incorporated the influence of multiple identities into their study of ethnic-minority bisexual women's self-reported counseling needs. The authors conducted qualitative interviews with 14 ethnic-minority bisexual women using consensual qualitative research analysis. Results indicated that important counseling considerations were counselor understanding of the ethnic-minority bisexual experience, client concerns regarding counseling, specific therapeutic tasks, counselor's need for awareness of biases and client preferences for counselor characteristics.

Interest in how bisexual people experience stigma has led to the development of a quantitative instrument designed to assess negative experiences associated with a bisexual identity. Brewster and Moradi (2008) described the development and psychometric evaluation of the Anti-Bisexual Experiences Scale (ABES). The instrument was designed to assess bisexual persons' perceived experiences of antibisexual prejudice. Items for the instrument were grounded in prior literature, revised using expert feedback, and psychometrically evaluated. The authors conducted an exploratory factor analysis using data from 361 bisexual participants. This preliminary analysis resulted in three factors of perceived anti-bisexual experiences. The first of these was a bisexual person being treated as though bisexuality was an unstable or illegitimate identity. The next was the person being treated as sexually irresponsible. The third factor was being treated with interpersonal hostility.

A second sample of 366 bisexual persons used confirmatory factor analysis, which supported the stability of this three factor structure of illegitimacy, irresponsibility, and hostility. Further, the ABES subscales demonstrated strong internal consistency reliability and discriminate validity. Subsequent analysis also revealed a link in the data between ABES scores, anti-bisexual stigma consciousness and psychological symptomatology (Brewster, 2008; Brewster and Moradi, 2010).

Diamond (2008) collected similar results in a 10-year longitudinal study of 79 purposively sampled female bisexuals from adolescence to adulthood. Interviews were conducted at three recruitment sites which were compared for consistency across sites. Using consensual qualitative research methods, coders were trained to .90 reliability. In

each interview, participants reported the percentage of their total attractions that were directed at the same gender on a day-to-day basis. Data was collected for physical and emotional attractions. Group differences in changes in attractions were measured repeatedly using an analysis of variance (ANOVA) with sexual identity as the between-subjects factor and percentage of same-sex physical attractions as the within-subjects factor. The authors controlled for factors other than sexual identity related to change over time such as parental divorce, family, SES, educational attainment, family disapproval of one's sexuality, experience with anti-gay stigma or harassment, or the context of first questioning. Results indicated that bisexual and unlabeled participants experienced largely the same pattern of same-gender and other-gender attractions as they reported at the beginning of the study. Over the course of the ten-year study, 80% of the sample had claimed a bisexual identity at some point, compared to 56% of the sample who had claimed a lesbian identity at some point. Regarding consistency of same-sex attractions, women who gave up identifying as bisexual/unlabeled in favor of labeling as either heterosexual or lesbian reported consistent attraction patterns despite changes in label.

A group of studies differentiate between responses of bisexual participants and those provided by lesbian and gay participants (Diamond, 2008; Lucksted, 1996; Moss, 1994). These studies found that bisexual participants experienced greater amounts of heterosexual prejudice from their providers than did lesbian and gay participants. This difference has additional importance in light of recent findings in which bisexual responses were higher for anxiety, depression, suicidality and negative affect than

lesbian, gay, and heterosexual responses (Balsam & Rothblum, 2002; Jorm, Korten, Rodgers, Jacomb, & Christensen, 2002). In particular, Jorm et al. (2000) found that, compared to lesbian, gay, and heterosexual participants in their study, the bisexuals in their sample experienced more “current adverse life events, greater childhood adversity, less positive support from family, [and] more negative support from friends . . .” (p. 423). These authors suggest that this disparity in psychosocial stressors is due, in part, to the dual prejudice that bisexual women and men experience: prejudice against bisexuality as well as prejudice against homosexuality.

In sum, bisexual clients may encounter a wide array of barriers to wellness associated with their bisexuality. These barriers are both similar to and distinct from barriers faced by other members of the queer community. Some of these barriers are: stigmatization, sexualization, limited access to a supportive community, bisexual invisibility (or bi-invisibility), biphobia, monosexism, higher incidence of poor physical and mental health, higher incidence of suicidal ideation and substance use, lack of helping professionals trained to work with bisexual-identified clients, and the need to engage in identity management on behalf of reducing the negative impact of stigmatization (Barker & Landridge, 2010; Israel & Mohr, 2004). I will now describe how two large, professional organizations, CACREP and ACA, inform the foundation of this dissertation study.

## **CACREP and ACA**

### **CACREP**

The Council for the Accreditation of Counseling and Related Educational Programs (CACREP) is an independent agency recognized by the Council for Higher Education Accreditation as accrediting master's degree programs in addiction counseling, career counseling clinical mental health counseling, marriage, couple, and family counseling, school counseling, student affairs, and college counseling. CACREP also accredits doctoral programs in counselor education and supervision (<http://www.cacrep.org/template/index.cfm>).

### **Accreditation**

In recent decades, the focus of institutional accreditation in higher education has changed. Originally, the purpose of accreditation was to convince people the coursework at a particular university is satisfactory (Murray, 2002). From this, accreditation progressed to become a form of public accountability that offers assurances of quality to the general public as well as to the higher education community that the institution has the capacity to provide instruction in the programs it offers (Murray, 2002).

In addition to its use for building and maintaining the reputation of an institution, there has been a shift in accreditation to increasingly measure outputs—in particular, student learning outcomes. In recent years, linking programmatic assessment with student learning outcomes has received significant acceptance in assessment practices (Liles & Wagner, 2010). Programs may be accredited for their academic standing or they may be

accredited based on producing graduates with professional competence to practice— usually referred to as professional accreditation.

Program accreditation ultimately impacts an expectation for educational communities. They must develop and implement multi-dimensional assessment plans, rooted in scholarship yet programmatically discrete, whereby student learning outcomes are identified, described, and “looped back” to programmatic objectives, mission, and vision (Schmidt, 1999). Program accreditation and reaccreditation by the Council for Accreditation of Counseling and Related Educational Programs (CACREP) establishes educational and programmatic effectiveness in counseling and facilitates the development of students with the knowledge, skills, and attitudes required to be effective counseling professionals (CACREP, 2009).

In essence, accreditation provides some assurance that graduates are competent to enter the profession. Through this process, CACREP has become a professional agency that defines how counselors are trained today. CACREP publishes standards for accreditation (CACREP, 2009). Associated with those standards, CACREP provides definitions for a number of terms that are relevant to this dissertation study. These definitions provide common ground for discussions among higher education leaders and important stakeholders in the counseling community. For purposes of clarity, I will now review those definitions.

### **CACREP Definitions**

*Standards.* It is important to understand the definition of the term *standards*, since these are the benchmarks by which CACREP evaluates counseling programs. CACREP

refers to *standards* as a minimum criterion that must be met by counselor education programs (CACREP, 2009). Thus, CACREP standards provide a structure for what is minimally necessary to produce competent counseling professionals. In addition to determining what standards inform training practices relevant to bisexual-identified clients, this dissertation study evaluated the extent to which CACREP standards are currently met with regard to training counselors to work with bisexual-identified clients.

**Wellness.** Other definitions provided by CACREP address how bisexuality should be addressed in CACREP-accredited counselor education programs. For example, it is important to understand the meaning of wellness and its role in identity development.

*Wellness* is defined by CACREP as a culturally informed state of being in which mind, body, and spirit are unified in a way that supports living a fulfilled life (CACREP, 2009).

I will now address how the CACREP definition of advocacy informs this dissertation study.

**Advocacy.** CACREP also identifies advocacy as action that promotes individual human worth, dignity, and potential. CACREP further defines *advocacy* as action taken on behalf of clients or the counseling profession to support appropriate policies and standards for the profession. In addition to actions directed at helping individuals, advocacy works to change policies and procedures, systemic barriers, long-standing traditions, and preconceived notions that stifle human development (Lewis, Arnold, House, & Torporek, 2003). Clearly, this dissertation was conducted as an advocacy effort with the intention of promoting the human worth, dignity and potential of bisexual-identified clients. Additionally, the advocacy that is embedded in this dissertation is



motivated by the need to change the policies and procedures, systemic barriers, long-standing traditions and preconceived notions that inhibit the healthy development of bisexual-identified individuals. Increasing bisexual inclusion in counselor education could have a far-reaching, deep impact for bisexual clients.

*Advocacy as a component of professional identity.* CACREP specifically includes advocacy as a component of professional counselor identity. Professional identity is the first core content area of counselor education. Within this content area, standard 1.i indicates that learning must include advocacy processes needed to address institutional and social barriers that impede access, equity, and success for clients. According to the purpose of this dissertation, the advocacy charge proposes that counselors-in-training should be learning how to engage in advocacy that will improve conditions for bisexual identified clients. For example, lack of bisexual visibility has been shown to be a widespread institutional barrier that limits access, equity and wellness for many bisexual-identified clients (Miller et al, 2007). CACREP standard 1.i suggests that counselor educators can train counselors to reduce the impact of bisexual invisibility and to advocate for bisexual visibility.

**CACREP standards.** Because this study focused on counselor education programs that have been accredited by CACREP, I will now address how CACREP standards support bisexual inclusion in counselor education. The CACREP Standards were composed with the intention of ensuring that students develop a professional counselor identity and master the knowledge and skills needed to practice counseling effectively. The first section of the CACREP Standards addresses the structure of the

institution of learning (first, the university or college and then the department within the university that houses the counseling program/s). The second section of the CACREP Standards is comprised of specific program objectives required for accreditation. Within this section, eight common core curricular areas are operationalized. Those are: (1) professional orientation and ethical practice, (2) social and cultural diversity, (3) human growth and development, (4) career development, (5) helping relationships, (6) group work, (7) assessment, and (8) research and program evaluation (CACREP, 2009). Specific parts of the curriculum are particularly pertinent to this dissertation study and will be discussed below.

Three of these eight content areas include standards that provide direct support for bisexual inclusion in the counseling curriculum. These are professional identity, social and cultural diversity, and human growth and development.

***Professional orientation and ethical practice.*** The first core content area that is pertinent to this study is referred to as *professional orientation and ethical practice*. Standard 1.i within this content area particularly applies to the issues addressed in this dissertation study. This standard requires that programs incorporate into their curriculum the study of advocacy processes needed to address institutional and social barriers that impede access, equity, and success for clients. One of the objectives of this dissertation study is to increase awareness of the institutional and social barriers faced by bisexual individuals.

***Social and cultural diversity.*** The second core content area that is directly relevant to this dissertation concerns social and cultural diversity. This dissertation

addresses counselor education about bisexuality because bisexual-identified individuals are members of a diverse society whose concerns are underrepresented in popular and scholarly discourse (Balsam & Mohr, 2007; Califia, 2005; Evans, 2003; Ross, Dobinson & Eady, 2010; Sherrer, 2004; Vance, 2005). In this core content area, CACREP addresses the need for counselor education to provide opportunities for counselors-in-training to develop understanding of the cultural context of relationships, issues, and trends in a multicultural society. Germane to this dissertation, this includes all of the following: multicultural and pluralistic trends, including characteristics and concerns within and among diverse groups nationally and internationally as well as attitudes, beliefs, understandings, and acculturative experiences. Training incorporates specific experiential learning activities designed to foster students' understanding of self and culturally diverse clients and teaches application of theories of multicultural counseling, identity development, and social justice. Counselors learn individual, couple, family, group, and community strategies for working with and advocating for diverse populations, including multicultural competencies; counselors' roles in developing cultural self-awareness, promoting cultural social justice, advocacy and conflict resolution, and other culturally supported behaviors that promote optimal wellness and growth of the human spirit, mind, or body. Finally, educators discuss counselors' roles in eliminating biases, prejudices, and processes of intentional and unintentional oppression and discrimination. All of the standards that comprise the social and cultural diversity core content area apply to the training of counselors around bisexuality.

***Human growth and development.*** The third CACREP core content area that includes several points pertinent to bisexual inclusion is human growth and development. According to CACREP, the study of human development provides counselors-in-training with an understanding of the nature and needs of persons at all developmental levels and in multicultural contexts. This includes theories of individual and family development and transitions across the life span; theories and models of individual, cultural, couple, family, and community resilience; theories of human behavior, including an understanding of developmental crises, psychopathology, and situational and environmental factors that affect both normal and abnormal behavior; and theories and etiology of addictions and addictive behaviors, including strategies for prevention, intervention, and treatment. Optimally, students will learn about sexual identity models that are inclusive, and will learn how bisexual identity intersects with family life and family development in all of these core areas. Additionally, counseling students would ideally be required to learn about the resilience required by bisexual individuals regarding issues like dual stigma. As discussed in an earlier section, research has shown that bisexual individuals experience higher rates of psychopathology, and counseling students need to know how to contextualize bisexuality in relation to psychopathology. Finally, with higher incidence of substance abuse and other negative coping mechanisms among bisexual individuals, it is important for counselors-in-training to understand the etiology of this correlation in order to help (ALGBTIC, n.d.; Detrie & Lease, 2008; Eisenberg & Weschler, 2003; Ford & Jasinski, 2006; King, Semlyen, Tai,

Killaspy, Osborn, Popelyuk, & Nazareth, 2008; Rosario, Scrimshaw, & Hunter, 2006; Tucker, Ellickson & Klein, 2008)

These three core content areas provide standards that support my contention that CACREP-accredited programs should educate students about bisexuality as distinct from but related to lesbian and gay identity. Now that I have identified how CACREP Standards reinforce the need for bisexual inclusion in counselor education, I will address this similarly with regard to the American Counseling Association (ACA), and two of its divisions: the American Multicultural Counseling Division (AMCD), and the American Association for Lesbian, Gay, Bisexual and Transgender Issues in Counseling (ALBTIC). Each of these organizations has published position statements concerning counseling competency that are pertinent to bisexual inclusion.

#### **The American Counseling Association (ACA) Code of Ethics**

**ACA mission.** ACA is a non-profit, professional, scientific, and educational organization (ACA, 2005). According to the ACA website, it is the world's largest association exclusively representing professional counselors (<http://www.counseling.org/>). The ACA mission includes a specific focus on the quality of life. According to ACA (2005), counselors contribute to the quality of life in society by promoting the development of professional counselors, advancing the counseling profession, and using the profession and practice of counseling to promote respect for human dignity and diversity. The ACA Code of Ethics (2005) states that members are dedicated to the enhancement of human development throughout the life span and that members recognize diversity and embrace a cross- cultural approach in support of the

worth, dignity, potential, and uniqueness of people within their social and cultural contexts. Among other purposes, the ACA Code of Ethics (2005) serves to clarify the ethical responsibilities of counselors and establishes principles that define ethical behavior.

**Key terms, definitions and standards.** Similar to the process of providing definitions offered by CACREP, I will now discuss several definitions offered by ACA that are relevant to this dissertation study. In particular, I will now review those definitions that have been collected from the ACA Code of Ethics (2005). Using definitions provided by these professional organizations serves to align the language in this study with the programs under study.

**Key terms and definitions.** Consistent with the definition provided by CACREP that I provided in the previous section, ACA defines *advocacy* as facilitating the well-being of individuals and groups in society, and also involves facilitating the well-being of the counseling profession within systems and organizations (ACA, 2005). Further, advocacy is defined by ACA as action that is intended to remove barriers and obstacles inhibiting access, growth, and development (ACA, 2005). As mentioned above, this dissertation study is an act of advocacy on behalf of bisexual-identified individuals. Increasing the amount of training provided around bisexuality to counselors in CACREP-accredited programs should increase individual counselors' competence with this population and also make competence with this population more widespread. *Training* is another important term defined by ACA (2005). Training refers to the instruction and practice of skills related to the counseling profession. Training in cultural competency

contributes to the ongoing proficiency of students and professional counselors and impacts experiences clients have in counseling (Ahmed, Wilson, Henriksen, & Jones, 2011).

The definition of culture provided by ACA is also directly relevant to this dissertation study. ACA defines *culture* as a socially constructed way of living, which integrates membership that is shaped by shared values, beliefs, norms, boundaries, and lifestyles. These are co-created with others who share similar worldviews consisting of biological, psychosocial, historical, psychological, and other factors. This dissertation concerns bisexuals as a cultural group. As mentioned previously, bisexuals are part of the queer community which is marginalized in relationship to the larger, more dominant cultural milieu. On another level, bisexuals are marginalized within the queer community.

Congruent with the definition provided by CACREP, the term *diversity* is a related term defined by ACA that refers to the similarities and differences that exist within and across cultures, along with the intersection of cultural and social identities (ACA, 2005). This dissertation concerns diversity as it applies to bisexuals as a group, as well as to the position of bisexuality within the broader LGBTQ culture, and the position of bisexuality within the broader social milieu.

Applying these constructs to the practice of counseling, ACA defines *multicultural/diversity competence* as the capacity by which counselors possess cultural and diversity awareness along with knowledge about self and others. Multicultural/diversity competence is concerned with how this awareness and knowledge are effectively applied in practice with clients and client groups. Multicultural/diversity

competence is required for effective *multicultural/diversity counseling*, which is defined loosely by ACA as counseling that recognizes diversity. Multicultural/diversity counseling embraces approaches that support the worth, dignity, potential, and uniqueness of individuals within their historical, cultural, economic, political, and psychosocial contexts (ACA, 2005).

In addition to providing concise definitions of relevant terms that intersect efficiently with CACREP terminology, the ethical code (ACA, 2005) contains eight major sections that comprise content areas. These are: the counseling relationship; confidentiality and privacy; professional responsibility; relationships with other professionals; evaluation and assessment; supervision, training and teaching; research and publication; and resolving ethical issues. The sections provide a comprehensive picture of ethical practice operationalized in counseling. Several sections of the ethical code (ACA, 2005) are directly related to this dissertation study. In addition to specific ethical standards within particular sections, a theme that is woven throughout the Code of Ethics, ACA (2005) maintains, that to be effective, counselors must pursue knowledge, personal awareness, sensitivity, and skills pertinent to working with a diverse client population. (See A.9.b., C.4.e., E.2., F.2., F.11.b.) This dictum directly reinforces the purpose of this dissertation.

A number of specific topics in the Code of Ethics are relevant to this study. First, the ACA Code of Ethics (ACA, 2005) discusses the counseling relationship under standard A.4.b. (Personal Values). This subsection supports the contention that self-awareness is essential to generating a productive counseling relationship. According to



ACA (2005), self-awareness involves counselors being aware of their own values, attitudes, beliefs, and behavior. Self-awareness is developed with the purpose of providing counselors with the insight necessary to refrain from imposing values that are inconsistent with client goals. Applied to counseling bisexual individuals, this would mean that counselors would refrain from assigning monosexual values to bisexual clients.

Counselor educators must provide opportunities for counseling students to develop this kind of insight (Liles & Wagner, 2010). This requires that counseling programs help counselors-in-training develop self-awareness around counseling diverse populations. Further, in this section, the Code of Ethics states that counselors respect the diversity of clients, trainees, and research participants (ACA, 2005). The current dissertation study applies this part of the code to training counselors to work with bisexual-identified individuals. Thus, counseling students must learn about how their values, attitudes, beliefs and behavior could impact the work they do with bisexual-identified clients. Counselor educators are responsible for providing exercises that focus on helping counselors-in-training develop self-awareness.

In addition to self-awareness, the ACA Code of Ethics iterates the necessity for (Item C.2.) professional competence (ACA, 2005). Specifically, subsection C.2.a. states that counselors must practice only within the boundaries of their competence.

Competence is determined by education, training, supervised experience, state and national professional credentials, and appropriate professional experience. This section further clarifies the relationship between education and practice and indicates that counselors who work with bisexual-identified clients must be adequately trained to work

with bisexual-identified clients or they risk practicing outside of the boundaries of their competence.

Section F.6 more specifically addresses inclusion in counselor education. Under the heading “Responsibilities of Counselor Educators,” subsection F.6.a. states that individuals who are responsible for developing, implementing, and supervising educational programs are counselor educators. This means that counselor educators are in charge of what is taught and how it is taught and are therefore responsible for developing an inclusive curriculum. This subsection (F.6.a.) reinforces the premise that counselor educators are skilled as teachers and also as practitioners. Thus, subsection F.6.a. indicates that counselor educators must develop skills required to teach about bisexuality and must also have developed skills necessary to practice counseling with bisexual-identified clients.

Subsection F.11.c. explicitly states that it is ethically appropriate for counselor educators to actively infuse multicultural/diversity competency in their training and supervision practices. Thus inclusion is a matter of ethics. Applied to bisexuality, counselor educators should actively train students to gain awareness, knowledge, and skills to be competent to work with bisexual-identified clients and this training should be reinforced through supervision.

Subsection F.6.b. further defines the responsibilities of counselor educators related to multicultural/diversity competence. Counselor educators are charged with infusing their programs with cross-curricular attention to culture and diversity (ACA, 2005). Thus, in addition to what students learn about bisexual-identified clients in

multicultural counseling courses, students must learn about bisexuality from a different perspective in human development class and from yet another perspective in a course on theories, and so on. ACA advocates that counselor educators should include in their coursework case examples, role-plays, discussion questions, and other classroom activities that promote and represent various cultural perspectives. This means that when role plays occur where the sexual identity of the participants is defined, there should be opportunities to role play counseling bisexual clients as well as lesbian, gay and transgender clients.

Thus far, the ways that CACREP and ACA have provided standards that reinforce bisexual inclusion in counselor education have been addressed. Next, I will discuss work that has been accomplished by two of the divisions of ACA: the Association for Multicultural Counseling and Development (AMCD) and the Association for Lesbian, Gay, Bisexual and Transgender Issues in Counseling (ALGBTIC). I selected the AMCD and the ALGBTIC divisions because their mission statements align with my purpose in conducting this research. In addition to strengthening the counseling profession and satisfying the diverse needs of the counseling community, the broad purpose of the divisions is to enhance professional identity around specific interest and practice areas. This purpose aligns with the goals of this dissertation study.

#### **The Association of Multicultural Counseling and Development (AMCD) and the Multicultural Competencies (MCCs)**

The Association of Multicultural Counseling and Development (AMCD) is one of 19 divisions within the American Counseling Association (ACA). In 1991, the AMCD

articulated a list of 31 multicultural competencies, commonly referred to as the MCCs. The MCCs were operationalized by Arredondo et al (1996) using 119 explanatory statements. The AMCD MCCs exist as a public document that describes best practices pertinent to the education, training, and practice of mental health professionals relevant to multicultural constructs (Arrendondo, 2003; Pope-Davis & Coleman, 1997). While accomplishing other purposes, the AMCD Multicultural Competencies communicate what mental health professionals need to learn to be culturally competent practitioners. For example, the MCCs were used to inform the most recent revision of the ACA Code of Ethics (ACA, 2005; Kaplan, 2006).

The three major categories of the tripartite model of the MCCS will now be discussed as they relate to bisexual-identified clients.

***Self-awareness.*** The first broad category of multicultural competencies, “Counselor is aware of own attitudes and beliefs,” involves developing cultural self-awareness and correlates with CACREP standards (CACREP, 2003) as well as with the ACA Code of Ethics (ACA, 2005). As applied in this dissertation study, cultural self-awareness indicates that culturally competent counselors make proactive efforts to become aware of and process their assumptions about bisexuality (Kocarek & Pelling, 2003; Miller, Andre, Ebin, & Bessanova, 2007; Mohr, Israel, & Sediacek, 2001; Phillips, 2000, 2004; Samjii, 2007). Culturally competent counselors who have been trained to work with bisexual-identified clients should be able to objectify the ways in which they are the products of their cultural conditioning, and how that conditioning may be reflected in their counseling work with bisexual-identified people (Nichols, 1988, 1994;

Mohr, Israel, & Sediacek, 2001; Samjii, 2007). As operationalized by Arredondo et al (1996), culturally competent counselors generate self-awareness as a first step to developing a nonjudgmental approach to the worldview of culturally different clients (Fassinger, 2000; Phillips, 2000, 2004; Sue & Sue, 1990). It is reasonable to assume that counseling effectiveness with bisexual-identified clients improves when counselors incorporate self-awareness into their practice. This is particularly important when non-bisexual, or “monosexual” counselors work with bisexual clients.

*Awareness of client's worldview.* The second broad category in the MCCs, “Counselor is aware of client's worldview,” relates to awareness that extends beyond the self, commonly referred to as “knowledge.” This segment of cultural competence acknowledges that self-awareness allows the counselor to recognize when a client's culture is substantially different than the counselor's own culture. When this occurs, counselors should express healthy curiosity about the culture of their clients, and encourage discussions with their clients about culture. Beyond this, culturally competent counselors are proactive in learning about the client's background and how it affects the client's worldview. In order for counselors to be competent with bisexual clients, they must possess knowledge with regard to the uniqueness of bisexual identity and the experiences that can often impact bisexual-identified clients' mental wellness. This would include discovering what aspects of bisexuality are salient to the client in what contexts and then applying that information to treatment planning (Arredondo et al., 1996; Bostwick, Boyd, Hughes, & McCabe, 2010; Fassinger, 2000; Ladany, Inman, Constantine, & Hofheinz, 1997). For another example, bisexual-identified clients need

counselors to understand that bisexuality intersects with other cultural affiliations (Alimahomed, 2010; Collins, 2000; Miller, Andre, Ebin & Bessanova, 2007; Samjii, 2007). They also need to understand how stereotypes about bisexuality impact the wellness of bisexual-identified clients (Ross, Dobinson & Eady, 2010) Finally, counselors need to understand that bisexuals often experience a lack of community and that frequently bisexuals see themselves as having a culture that is at once part of and distinct from the broader queer community (Balsam & Mohr, 2007; Guidry, 1999; Syzmanski, 2005). This lack of community is evident in the limited membership bisexuals have in queer spaces (Stets & Burke, 2000; Ochs, 1996).

***Multicultural counseling skills.*** Skills are the focus of the third broad category. Culturally competent counselors are able to flex their skills to meet the cultural needs of their clients. For example, counselors can adjust the use of verbal and non-verbal communication to match the communication style and needs of their clients (Arrendondo et al., 1996; Ladany, Inman, Constantine, & Hofheinz, 1997). Having culturally competent skills also means adjusting treatment and interventions according to the education level, cognitive abilities, and developmental awareness of clients while integrating an awareness of culture into the therapeutic process.

In a research study conducted as a grounded theory, Ross, Dobinson, and Eady (2010) found that the perceived determinants of bisexual individuals' emotional well-being related to the macrolevel (social structure), mesolevel (interpersonal), and microlevel (individual) phenomena, and that biphobia, bi-invisibility and monosexism exert a negative impact on bisexual mental health (Barker & Landridge, 2010; Califia,

2005; Israel & Mohr, 2004). These levels parallel the advocacy competencies created by Lewis, Arnold, House, & Toporek, 2003, which operate at the client, community, and public levels of practice.

Applying multicultural competency to work with bisexual clients means (a) addressing personal biases the counselor may hold about bisexuality; (b) acquiring knowledge about the bisexual experience ; and (c) developing skills to work with bisexual-identified clients. It is essential that counselors are able to work beyond biases (self-awareness component) to empathize with and validate bisexual-identified individuals' feelings. Counselors must understand the impact that stereotypes, along with exclusion, erasure and the resultant bi-invisibility can have on bisexual-identified clients (knowledge component). Although the MCCs were initially created to deal with race-related discrimination, counselors can apply current understandings of minority stress experienced by non-dominant groups to incorporate the basic principles underlying the MCCs and thereby work competently with bisexual-identified clients (self-awareness, knowledge, and skills components).

### **The Advocacy Competencies**

Another document that is germane to this study was created by Lewis, Arnold, House & Toporek (2003), commonly referred to as "the advocacy competencies. The advocacy competencies pertain to both counselor educators and counselors. Lewis et al. (2003) maintain that social justice advocacy is a fundamental element for providing culturally sensitive and effective services to clients and as such should be a core element in counselor education programs. The advocacy competencies were adopted by the

governing council of ACA in March of 2003. The advocacy competencies are based on the notion that counselors have ethical and professional responsibilities to empower and advocate for underrepresented, marginalized and oppressed groups. Lewis et al (2003) reinforce that this advocacy includes serving as a voice with and on behalf of these groups. The advocacy competencies stress the importance of providing practical knowledge to counselors- in-training and preparing students as social change agents and advocates for an increasingly diverse society. In response to this call, my dissertation study seeks to empower and advocate for bisexual-identified clients because bisexuals are underrepresented and marginalized in scholarly discourse, particularly in counselor education. This research will provide an indication of the extent to which counselor educators are being advocates with regard to social change that will benefit bisexual-identified clients.

Applied to bisexual-identified individuals, the rationale provided by Lewis et al (2003) for adopting the advocacy competencies begins with the notion that clients' experiences and issues are affected by their environments and by society at large. There are several factors that have the potential to contribute to the development of clients' presenting concerns. These include social injustices, disenfranchisement, marginalization, and oppression in the forms of racism, sexism, ableism, classism, monosexism, heterosexism, sizeism, and ageism as well as inequitable distribution of power, inequitable access to resources and inequitable access to participation function (Barker & Landridge, 2010; Israel & Mohr, 2004). Thus, according to the advocacy competencies,



counselors are not only responsible for helping clients' change but also have responsibilities to confront and change injustices in society.

The advocacy competencies indicate that because of the nature of their ongoing work with people, counselors have a unique awareness of recurring themes linking oppression with client struggles. Further, because of the nature of their work, counselors are often among the first to become aware of specific difficulties in the environment (Lewis et al, 2003). Advocacy-oriented counselors may choose to respond to such challenges by taking on the role of ally and alerting existing organizations that are already working for change and that might have an interest in the issue at hand. Through this dissertation study, I seek to be an ally to the counseling profession and to bisexual-identified clients who may benefit from increased awareness around gaps in our training. Thus, this dissertation is conducted with the intent of alerting individuals, particularly counselor educators, who may have the capacity to create change around this issue.

The process of facilitating change calls for vision, tenacity, leadership, collaboration, systems analysis, and robust data (Lewis et al, 2003). The advocacy competencies include prescriptive sequences for conducting change-directed advocacy at the individual, group, community and systems levels. This dissertation study seeks to participate in these processes by providing and interpreting data that will demonstrate the need for change. Now that I have provided context for bisexual inclusion in terms of the principles underlying counseling and counselor education and have offered context for applying the advocacy competencies to bisexual individuals and groups, I will discuss

explicitly some ways that the advocacy competencies apply with regard to this population.

### **Applying the Advocacy Competencies**

The advocacy competencies include action at the client, community, and public levels. This translates into (a) acceptance of bisexuality within the counselor-client relationship (particularly important because bisexuals experience lack of acceptance in many arenas—intimate partner relationships, family, workplace environment, community, etc; (b) counselors proactively addressing bisexual issues at a grassroots level through direct contact with members of the community (this could involve offering free education workshops or simply talking in a bi-inclusive, bi-positive way with other professionals and community members); and (c) political advocacy. Counselors can create bi-positive, bi-visible, bi-inclusive spaces and advocate for bisexual awareness and bi-inclusiveness in the community (institution/ community level).

Acceptance, empathy, and non-judgment are of paramount importance to successful counseling with bisexuals. While friends, co-workers and family members may reject bisexual identity, bisexual people can find acceptance in the counseling relationship (advocacy at the client level) and be encouraged to build resilience by becoming part of networks that include other bisexual-identified people and other bi-positive allies (advocacy at the community level). Networking can provide social connections and support as well as opportunities to strengthen the bisexual political movement (advocacy at the public level) through activism.

### **Research Conducted Using Content Analysis**

Content analysis has already been used by several authors to examine issues related to this study. For example, Jennings and MacGillivray (2010) explored the degree to which lesbian, gay, bisexual and transgender issues are covered in multicultural textbooks; however, their study did not disaggregate data to see to what degree each of those groups were addressed independently, and they did not assess whether educators were supplementing textbooks with other learning materials to fill gaps in the textbooks. Similarly, Singh and Shelton (2010) used content analysis to demonstrate the paucity of qualitative research on LGBTQ issues in counseling and counseling psychology journals but did not disaggregate the data to determine to what extent lesbian, gay, bisexual, transgender, and queer persons are represented independently. Pieterse et al (2008) conducted a content analysis which explored multicultural course syllabi for the presence of social justice training in counseling and counseling psychology courses. Another content analysis, performed by Wright and McKinley (2011), looked at college counseling center websites to determine the degree to which resources were provided specifically for LGBT collegians. In these studies, content analysis has been used to determine the manifest content of textual communications concerning LGBTQ issues and/or social justice training through systematic analysis of the texts in which these communications are embedded.

Each of these studies demonstrates the utility of content analysis in identifying the extent to which issues related to underrepresented populations are addressed in various bodies of text. However, none of these studies, even those that focus on LGBT status,

specifically examine the presence of training materials related to bisexual-identified clients. Given that research has clearly demonstrated that the experiences of bisexual-identified clients are related to, but also distinct from, the experiences of lesbian and gay individuals (Balsam & Mohr, 2007; Detrie & Lease, 2008; Dworkin, 2001; Fassinger, 2000; Floyd & Stein, 2002; Guidry, 1999; Israel & Mohr, 2004; Miller, Andre, Ebin, & Bessanova, 2007; Mohr & Fassinger, 2003; Mohr, Israel, & Sedlacek, 2001; Mohr & Rochland, 1999; Mohr, Weiner, Chopp, & Wong, 2009; Murphy, Rawlings, & Howe, 2002; Ochs, 1996, 2001, 2007, 2011; Ochs & Highleyman, 2008; Ochs & Murphy, 2013; Ross, Dobinson, & Eady, 2010; Samji, 2007; Sheets & Mohr, 2009; Utz, 1991), it stands to reason that excluding information specific to bisexuality will only contribute to the marginalization of bisexual-identified clients. Because research has also demonstrated that dual-minority stress impacts the mental wellness of bisexual individuals (Balsam & Mohr, 2007; Califia, 2005; Evans, 2003; Ross, Dobinson & Eady, 2010; Sherrer, 2004; Vance, 2005), it seems essential that counselors be trained to help bisexual clients address issues related to their bisexuality. The extent to which bisexuality is addressed in multicultural counseling courses needs to be accurately measured in order to give a detailed, empirical account of the amount and type of training that is provided to counselors who are increasingly likely to encounter bisexual clients in their practice.

### **Summary**

Program accreditation and reaccreditation by the Council for Accreditation of Counseling and Related Educational Programs (CACREP) establishes educational and programmatic excellence in counseling and facilitates development of students with the

knowledge, skills, and dispositions to be effective counseling professionals (CACREP, 2009). In essence, accreditation provides some assurance that graduates are competent to enter the profession. CACREP provides a multi-dimensional assessment plan, grounded in scholarship yet programmatically discrete, whereby student learning outcomes are identified, described, and “linked back” to programmatic objectives, mission, and vision. In this chapter, I have provided rationale for bisexual visibility in counselor education that links CACREP standards, the ACA Code of Ethics as well as standards created by divisions of ACA, and empirical research on bisexual mental health. This research study will determine the extent to which bisexuality is represented in CACREP-accredited programs. By reviewing how bisexuality is presented in counselor education through the lens of CACREP standards as well as the ACA Code of Ethics (ACA, 2005), the MCCs (Arredondo, 1996) and the ALGBTIC standards for practice (Harper et al., 2013), it may be possible to determine whether or not counselors in CACREP-accredited programs are provided sufficient training to produce competence with bisexual-identified clients.

## **CHAPTER III**

### **METHODOLOGY**

In this study, I surveyed 100 CACREP programs for mention of bisexuality in the syllabi and textbooks used to train counselors. I reviewed 30 text books currently in use in the area of multicultural counselor preparation to determine how bisexuals are represented. I also collected data from 40 instructors on supplemental materials used in addition to textbooks. This chapter describes specifically how the research for this study was conducted. The research purpose, rationale and underlying research paradigms are provided first. This is followed by a description of the methods used to collect and analyze the data.

#### **Research Purpose and Questions**

The primary purpose of this study is to gain an understanding of how CACREP-accredited counselor education programs are currently training counselors to be culturally competent with bisexual-identified clients. The secondary purpose of the study is to determine what, specifically, is being taught about bisexual-identified clients in CACREP-accredited programs. The following overarching research questions guide this study:

1. In what ways and to what extent is bisexuality addressed in courses that are intended to help counselors-in-training become culturally competent (i.e., in multicultural counseling courses)?
2. How is bisexuality presented in the textbooks and supplementary materials used in multicultural counseling courses?

3. What information is provided in multicultural counseling courses about counseling bisexual clients?

I will now describe the research design and design framework that provided structure for how these questions were addressed.

### **Research Design and Design Framework**

This dissertation study is conceived as a content analysis that combines quantitative and qualitative methods. The quantitative component is rooted in a post-positivist paradigm (Berg & Lune, 2012). This refers to an underlying assumption that the extent to which bisexuality is represented in multicultural coursework in counselor education can to some degree be expressed in quantitative terms. The presence of specific mentionings of bisexuality on multicultural syllabi and within multicultural textbooks can be counted. The number of words and paragraphs related specifically to bisexuality can be counted. Mentions of bisexuality in indexes and tables of contents can also be measured using quantitative methods. Additionally, the number of times bisexuality is mentioned in supplementary materials used in multicultural counselor education courses can be determined using quantitative methods.

This quantitative information is important because it is a way of measuring the magnitude to which bisexuality is immediately visible in CACREP-accredited counselor education programs. However, without a qualitative component to the design, the picture of *how* bisexuality is addressed in counselor education would be incomplete. Qualitative analysis has the capacity to show specifically if and how each one of the tripartite domains is addressed. Qualitative analysis will provide a picture of the presence or

absence of training that includes activities directed at development of self-awareness regarding embedded monosexism and biphobia. Further, qualitative analysis will show when information provided with the intention of contributing to trainee's knowledge of bisexuality and the unique challenges faced by bisexual people. Additionally, qualitative analysis will reveal how trainees are encouraged in multicultural counseling courses to develop skill sets relevant to this population. Using quantitative analysis alone, it would have been hard to tell whether counselors-in-training are receiving information necessary to support bisexual clients. Quantitative analysis allowed me to determine how much bisexuality is represented, but didn't reveal what counselor educators are teaching about bisexual-identified clients. The qualitative component of this study suggests that, while the breadth of coverage may be addressed through quantitative measures, the specific features of how bisexuality is addressed in multicultural counselor education requires data that describes and clarifies human experience as it appears in people's lives. Thus, this content analysis combines quantitative and qualitative inquiry and as such it combines post-positivism and social constructionism as well as queer theory. I will now discuss how each of these paradigms contributes to the purpose of the study.

### **Quantitative Component**

This content analysis combines quantitative and qualitative inquiry and as such is rooted in post-positivism and social constructionism as well as queer theory. Post-positivism is a research paradigm which regards the goal of scientific inquiry as to describe phenomena as they are experienced, and holds that research can bring us close to



an objective understanding about how these phenomena are experienced. Post-positivism is distinguished from positivism by a somewhat less rigid view of “truth.” Positivism proposes that the goal of science is to uncover the ultimate truth. In Chapter One, it was explained that by contrast the critical realist is a post-positivist who believes that *the purpose of science is ultimately about getting it right about reality, although all that is really possible is a close approximation to some form of reality*. This study is based on the underlying assumption that the quantitative evaluation of how much bisexuality is covered in multicultural counselor education will be commonly understood and accepted as a close approximation of an objective reality, not as a subjective perception. Historically, research conducted on human sexuality employed quantitative methods (e.g., Kinsey et al 1948/1998; 1953/1998; Gebhard & Johnson, 1979/1998) that were fundamentally positivist—that is to say that the research sought to reveal an ultimate truth about human sexuality that could be applied to everyone. Similarly, the quantitative component of this study seeks to reveal truth about how much attention is given to bisexuality in counselor education. I will now discuss the qualitative component of this study.

### **Qualitative Component**

I will now provide context for the qualitative portion of this study by describing the constructionist foundation on which this part of the study was designed.

Constructivism takes a variety of forms. One form, social constructionism, emphasizes the construction of reality by the group (Hayes & Oppenheim, 1997). Another form, developmental constructionism, refers to ways of constructing that occur in stages, in a

pattern in which students' ways of knowing are challenged appropriately to produce growth. This dissertation study combines elements of social constructionism and developmental constructionism. Social constructionism informs the design because the reality of how bisexual people are perceived in counselor education is a result of discourse generated by a group of people who collectively identify as counselor educators and counseling students. Developmental constructionism informs the process counselor educators engage in when choosing challenges for students that are appropriate to their current aptitude as learners. I will now provide a more detailed explanation of social constructionism, followed by a more detailed explanation of developmental constructionism and how each of these relates specifically to this dissertation study.

**Social constructionism.** The paradigm underlying the qualitative portion of this study is social constructionism (Hays & Wood, 2011), which is a version of constructionism that emphasizes the ultimate cultural context of meaning-making. Constructionism in general emphasizes the notion that human experience is essentially subjective and mutable; the meaning attached by individuals to their experience is neither static nor invariable but transformable according to context and interpretation. Social constructionism describes how a group of people who collectively identify as counselor educators and counseling students generate discourse by which they commonly agree on how bisexual people are perceived in counseling today.

**Developmental constructivism.** Developmental constructivism requires that counselor educators choose to challenge students in ways that are appropriate to their aptitude as learners. This means that in CACREP-accredited programs, there should be

developmentally appropriate challenges to students' preconceived notions about bisexuality and bisexual clients. Employing these two aspects of constructionism in consort means that the developmental constructivist paradigm addressed the diverse ways that counselor educators communicate to students and that this was integrated into a social constructivist awareness of how bisexuality is addressed in counselor education. It allowed for comprehensive inquiry into how bisexual people are represented in the materials used to teach counselors-in-training.

**Mixing Methods.** While quantitative inquiry can demonstrate how much is being said about bisexual-identified clients, it cannot identify what is being communicated. Quantitative inquiry cannot show what points are considered important about this population, nor can it show any hidden biases embedded in the texts, or even essentially how bisexuality is portrayed. Therefore, data analysis incorporated qualitative coding methods to develop a clear picture of how and what counselor educators communicate about bisexuality to counselors-in-training. The qualitative components of this research were guided by a constructivist paradigm, which is congruent with inductive analysis. I will now describe the relationship between social constructionism and inductive analysis in greater detail.

**Social Constructionism and Inductive Analysis.** An inductive process allowed themes and categories to emerge and to evolve as my understanding of the data increased (Berg & Lune, 2012; Hays & Singh, 2011; Patton, 2003). This fluidity is in keeping with social constructionism, as social constructionism does not anticipate an ultimate truth will be revealed, but instead hypothesizes that variability within and across multiple truths is

possible. The constructionism embedded in inductive analysis stands in contrast to the process associated with the quantitative component of this research, wherein the data is used to prove a hypothesis I have contrived—that the breadth of coverage of bisexuality in multicultural counselor education training is inadequate to address the specific needs of this population. The inductive process used in qualitative inquiry led to the qualitative portion of this report being infused with thick description (Lincoln & Guba, 1985), the purpose of which was to comprehensively describe how bisexuality is addressed in multicultural counselor education and how bisexuals are portrayed in the materials used to train counseling students (Alexander & Anderlini-D’Onofrio, 2012; Elo & Kynga, 2008; Erickson-Schroth, & Mitchell, 2009 ). Next, I will describe how I apply queer theory in this dissertation study.

### **Queer Theory**

The foundation of the qualitative portion of this dissertation study is situated in social constructionism. To address the critical element of this research I have infused the design with queer theory. Queer theory is categorized as a critical theory. As their names would suggest, critical theories review traditional approaches to a construct (such as sexuality) to examine and reinforce the need for change. Queer theory provides a means to critically examine socially constructed norms associated with sexuality (Alexander & Anderlini-D’Onofrio, 2012; Callis, 2009; Erickson-Schroth, & Mitchell, 2009; Feldman, 2009; Gurevich, Bailey, & Bower, 2009; Halperin, 2009). I will now explain how queer theory contributes to this research.

Historically, the term “queer theory” was used to refer to the application of critical theory to a restructuring of conceptual sexual categories. For example, a common conceptualization of sexual identity categories involves thinking of heterosexuality as normative and conversely, thinking of lesbian and gay identity as the “deviant other” form of sexual identity (Alexander & Anderlini-D’Onofrio, 2012; Barker & Landridge, 2008; Erickson-Schroth, & Mitchell, 2009). A dualistic notion of human sexuality has established a trend where individuals whose sexual identity is defined differently than these two binary poles underrepresented in scholarly work as well as in society at large. As a critical theory, queer theory has the potential to disrupt the status quo and thereby challenge the assumptions underpinning most current understandings of sexual identity in counselor education (Alexander & Anderlini-D’Onofrio, 2012; Barker & Landridge, 2008; Callis, 2009; Erickson-Schroth, & Mitchell, 2009; Evans, 2003; Feldman, 2009; Guerevich, Bailey & Bower, 2009) as well as in the lay community. Thus, social constructionism and queer theory combined allow for the possibility that positioning heterosexual identity and gay/lesbian identity as two poles existing at opposite ends of a continuum is less productive than other possible ways of conceptualizing sexual identity, and that there may be more inclusive ways to conceptualize sexual identity.

In creating this study, I asked the question: What does queer theory have to offer as another way of conceptualizing bisexuality within counselor education, one that may increase understanding of and empathy for what it is like to be bisexual and decrease the assumptions and stereotypes that lead to bisexual invisibility? First, queer theory is an

inclusive approach to the understanding of sexuality (Alexander & Anderlini-D'Onofrio, 2012; Callis, 2009; Erickson-Schroth, & Mitchell, 2009; Evans, 2003; Feldman, 2009). Social and cultural inclusion is a term currently used in education. It is associated with conscious efforts to include marginalized groups in educational policies, institutions, curriculum, research, etc. (Callis, 2009; Erickson, Schroth, & Mitchell, 2009). Inclusion implies that other possibilities besides homosexual and heterosexual need to be represented in counselor education.

Bisexuality viewed through the lens of queer theory invites a critical examination of the dualism inherent in the traditional binary conceptualization of sexuality (Alexander & Anderlini-D'Onofrio, 2012; Callis, 2009; Evans, 2003; Feldman, 2009). The term *bisexual* refers to individuals who have the capacity to express attraction to more than one gender identity. Similar to sexual identity, gender can be thought of as existing on a continuum defined by the binary poles of man and woman. Bisexuality is not conceptualized as a reinforcement of the gender binary, but in queer theory it is suggested that individuals who identify as bisexual can experience attraction to any form of gender expression—meaning each end of the gender spectrum and any gender expression between those two poles. By providing a lens to critically examine dualistic notions of gender and sexuality, queer theory may have the potential to provide options for more inclusive understandings of sexuality in mainstream media and traditional counselor education (Alexander & Anderlini-D'Onofrio, 2012; Callis, 2009; Evans, 2003; Feldman, 2009). Queer theory thereby offers a platform upon which bisexuality and bisexual individuals are recognized and valued in all their complexity (Alexander &

Anderlini-D'Onofrio, 2012; Barker & Landridge, 2008; Callis, 2009; Erickson-Schroth, & Mitchell, 2009). My hope is that the long-term impact of this combination of theoretical perspectives will provide leverage for the examination of current trends toward erasure and invisibility of bisexual identity.

### **Content Analysis**

Content analysis is a methodology by which researchers examine textual communications. Elster (1987) suggests that content analysis is versatile enough to examine any form of communication. This is important, because counselor educators use a variety of methods to communicate information to their students (McAuliffe & Erikson, 2011; Svinicki & McKeachie, 2011). Hays & Singh (2011) suggested that content analysis most often involves the use of *unobtrusive measures* and *frequency counts* and as such can involve both qualitative and quantitative data analysis. *Unobtrusive measures* are processes in which the researcher does not interfere with the research context. This is in contrast to direct, participant observation, which requires that the researcher be physically present. Direct contact with the researcher can lead the respondents to alter their behavior in order to look good in the eyes of the researcher. Questions from the researcher are interference in the natural stream of behavior. Unobtrusive measurement has the potential to reduce the biases resulting from the intrusion of the researcher. *Frequency counts* are tallies of the number of times a code occurs for a particular data source. Hays and Singh cite Insch, et al (1997), who suggest that some of the benefits of content analysis include the potential for high reliability, use of qualitative and

quantitative approaches, and unobtrusiveness, which minimizes participant reactivity bias.

In this dissertation study, descriptive content analysis is employed to examine the quantitative and qualitative data collected through document analysis. This is done with the aim of summarizing the information contained in the data with respect to the research question. Informational content is presented directly in a descriptive summary structured according to the needs of the study. The general procedure used in descriptive content analysis involves: a) defining the research questions; b) collecting data; c) reviewing and analyzing data; d) identifying the informational content pertaining to the research questions; and e) preparing a descriptive summary of the key informational elements.

As with any methodology, there are also some limitations to this type of design. One limitation, or challenge, related to the use of content analysis is researcher bias, as in other data analysis strategies. This is evidenced by two main issues: bias embedded in the type and form of data selected for analysis, and bias embedded in coding schemes (codebooks). Another limitation involves choosing what to code once data are selected, how much weight to assign to codes (i.e., deciding whether codes carry equal values in a codebook), assessing the value of missing data, and inattention to nonverbal cues and insufficient attention to other contextual information.

The goal of this dissertation study is to determine the extent to which bisexuality is addressed in multicultural counseling courses offered in CACREP-accredited programs. Qualitative inquiry allowed me to explore how bisexuality is portrayed in multicultural counseling courses. By creating a clear picture of the breadth and depth to



which bisexuality is addressed in multicultural counseling courses, it may be possible to determine if stronger efforts at inclusion need to be made. Now that I have described content analysis as a methodology, I will provide explicit information about how the assumptions and biases underlying the study.

**Assumptions.** In terms of ontology, there are several assumptions embedded in this study (Hays & Wood, 2010; Patton, 2003). The first is that bisexual-identified individuals have some life experiences that are different from those of monosexual-identified individuals (Bostwick, Boyd, Hughes & McCabe, 2004; Califia, 2005; Diamant & Wold, 2003; Dworkin, 2001; Evans, 2003; Guidry, 1999; Herek, 2004; Miller, Andre, Ebin, & Bessanova, 2007; Mohr, Israel, & Sedlacek, 2001; Phillips, 2004; Samjii, 2007; Waldo, 1999; Wright & Perry, 2006). Next, it is assumed that counselor educators need to address bisexuality in order for counselors-in training to develop competency with this population (APA, 2002). It is also assumed that counselor educators comprise a diverse group with a wide variety of experiences and that these diverse experiences, within the structure of CACREP standards, inform the content of their courses (Eriksen & McAuliffe, 2006). Finally, it is assumed that clearly defining this gap in counselor training will result in efforts to make multicultural counselor education inclusive of bisexuality (Maughan, Teeman, & Wilson, 2012).

My work is also based on the assumption that the basic principles of the multicultural counseling competencies developed by Arredondo et al. (1996) can provide a basic structure for training counselors to work with bisexual-identified clients. Further, I assume that counselors can be trained to include the advocacy competencies (Lewis et

al., 2002) in treatment strategies for bisexual-identified people. Future research could determine if there is empirical evidence to support this assumption by measuring bisexual-identified client satisfaction levels with counselors who have been trained about bisexuality using the MCCs (Arredondo et al, 1996) and the advocacy standards (Lewis et al, 2002) along with those who have not been trained. This sort of study could determine if counselor training designed to develop competency with bisexual individuals significantly improves bisexual client satisfaction. Next, I will describe my role as researcher in this dissertation study. Following that, I will describe my biases and assumptions and how they impact the study.

### **Role of the researcher**

Further, within a constructivist paradigm, qualitative researchers are conscious of their role as instruments in the research process. Applying this concept to my study means that my subjective experiences are influencing the design, the data collection, and the data analysis in terms of what is being collected and how it is being interpreted (Hays & Singh, 2011). As the author of this study and sole researcher, I conducted all phases of data collection and analysis.

There is a link between critical thinking and advocacy in this dissertation study. Advocacy is clearly embedded in this study; in order for counselors to develop cultural competency with bisexual-identified clients, greater attention must be given to this population in counselor education. Any impulse to advocate usually originates in critical thinking. As explained above, I use queer theory as a way of structuring the critical

element of this research. In the section that follows, I will discuss the biases and assumptions embedded in this research along with how I bracket those biases.

**Researcher Biases.** Researcher bias is inevitable in qualitative research. Therefore, transparency is required for responsible and trustworthy research (Hays & Singh, 2011; Patton, 2003). Transparency is a strategy for increasing the trustworthiness of the research. In qualitative research, transparency refers to openness and honesty on the part of the researcher. Researchers are ethically responsible to be transparent regarding their research. For that reason, I will now present my potential biases about this research.

I label myself as bisexual because I experience attraction to men and women equally. There are many ways that people interpret and express their bisexuality. While this level of complexity may be challenging for counselor educators to address, it is no less essential than addressing the complex “between-ness” experienced by individuals who identify as more than one race (Alimahomed, 2010; Collins, 2004; Kerwyn, Ponterotto, Jackson, & Harris, 1993; Ross, Dobinson, & Eady, 2010).

For over twenty years, I have been aware that the way others react to my bisexuality affects my mental health status. My self-esteem, self-concept, confidence, and sense of worth are vulnerable to others’ rejection of my bisexual identity. As a young bisexual woman, I often felt isolated and confused. I saw counselors in order to come to terms with my bisexual identity and learn ways to communicate with people I cared for about my bisexuality. I am convinced that the counseling I received would have been more efficient and would have provided richer rewards if my counselors had been trained

to work with bisexual-identified clients. Each experience in counseling was different, but none of them were really what I needed with regard to supporting my identity development as a bisexual woman.

Along with my biases and assumptions, I have presented my hopes. To reiterate, I hope this dissertation will begin to answer the call for more research addressing the needs of bisexual clients. I hope that increased awareness of a training deficit concerning this population will inspire some counselor educators to create a more inclusive curriculum, and that this will eventually lead to better service provided to bisexual clients. Biases and assumptions can present threats to the trustworthiness of research. In addition to my personal biases, there are biases within this design. I will now address how those biases will impact the study.

**Strategies to address research bias.** Researcher bias concerning data collection was reduced in this dissertation study by virtue of the largely unobtrusive and comprehensive nature of data collection. Syllabi and curricula were generated organically and naturalistically with no prompting from the researcher. The use of one open-ended question allowed for a comprehensive understanding of the phenomenon under study, but did not interfere directly with the courses being taught. The authors of the syllabi were not aware in any way at the time of creating the syllabi that their work would be collected for use in this research. Further, I did not select out certain syllabi for coding. Instead, every syllabus that was returned was coded along with every associated text and supplemental material.

Qualitative researchers make proactive efforts at reducing the impact of bias on their work. I have identified a number of strategies to minimize bias in this dissertation study. I will now describe these strategies, which are directed at reducing bias and increasing the trustworthiness and rigor of the design. I will begin by describing the process of developing researcher reflexivity.

**Reflexivity.** Qualitative researchers are often required to occupy dual roles as participant and observer (Ahern, 1999; Hays & Singh, 2011; Patton, 2003). The role played by the researcher as participant has the capacity to influence the role of researcher and can thereby impact the trustworthiness of the design. As a result of the tension between these dual roles, researchers must make efforts to minimize the impact of their biases on the research. One way to lessen the impact of researcher bias is through reflexivity. Hays and Singh (2011) refer to researcher reflexivity as one of the benchmarks that determine trustworthiness in qualitative research (p.137) and as a strategy of achieving accountability and honesty (p.140).

Reflexivity is a process that helps to minimize the impact of researcher bias on the study. Researchers engage in reflexivity by continuously reflecting on their preconceived values and assumptions as well as on the values and assumptions they perceive to be embedded in the data (Corbin & Strauss, 2008). This process can increase productivity because energy is spent understanding the effects of one's experiences rather than attempting in vain to eliminate them (Ahern, 1999). To further facilitate self-monitoring and increase trustworthiness through reflexivity, I memoed (wrote down) in a reflexive journal all reactions, feelings, or conflicts that I experienced while conducting the study.

**Reflexive Journal.** Qualitative researchers often use a reflexive journal to record influences on reflexivity and the ability to bracket. At the beginning of the process of writing this dissertation study, I began a reflexive journal. I continuously recorded my reactions to the process of conducting this study as well as my reactions to the data throughout the research process. I recognized and created memos when anxiety, annoyance, or enjoyment arose in me during data collection and analysis.

In addition, I engaged in reflexive memoing that included a review of how power and privilege (for example, the organization of the LGBTQQIA letter strand) influences the data and my perceptions of the data. Keeping a reflexive journal allowed me to clarify how my personal value systems and subjective experiences are related to the study. This strategy results in the development of a critical perspective through continuous self-evaluation and increases the rigor of the study (Ahern, 1999).

In addition to reflecting on my preconceived biases and assumptions, I reflected on any reactions that I had while collecting and analyzing the data. This self-critical approach facilitated the process of bracketing (described below) and contributed to the trustworthiness of the design (Ahern, 1999; Hays & Singh, 2011). The process of incorporating reflexivity into research is an iterative journey that involves evaluation and systematic feedback about the effectiveness of the process. Bracketing is part of this process. I will now address how bracketing protects the integrity of this research.

**Bracketing.** Bracketing requires that the researcher examines and sets aside preconceived beliefs, values, and assumptions about the research topic and proposed research design. This can also be thought of as releasing or reducing prejudgment. Ahern

(1999) refers to reflexivity and bracketing as originating from the same source.

Bracketing is a means of demonstrating the validity of the data collection and analytic processes. In addition to reflexivity, bracketing is a means by which qualitative researchers protect their research from the influence of researcher bias. Similar to the way that insulation protects a house from outside elements, bracketing protects research from the influences of the researcher's thoughts and feelings about the data. Houses are usually insulated soon after the frame of the house is built and before interior walls are constructed. Similarly, bracketing is typically begun early in the research process.

***Researcher epoch.*** The practice of releasing or reducing prejudgment is associated with *epoch*, which is a research term that is often considered analogous to bracketing. Epoch means refraining from judgment (Hays & Singh, 2011). Epoch involves setting aside explanations of phenomena established in the literature along with acknowledging and explaining researchers' values and assumptions concerning phenomena. In this dissertation study, researcher epoch required self-awareness and sensitivity. While engaged in data analysis, I remained attuned to signals that my reactions were rooted in preconceived notions and thereby required reflexive thought. Using memos, I acknowledged when my feelings could indicate a lack of neutrality.

I prepared myself for reflexive thinking by developing an understanding of what it might be like when biases begin to interfere with research. Ahern (1999) suggests that the following are "flags" that should signal researchers to engage in reflexive thinking: avoiding situations in which the researcher might experience negative feelings, seeking out situations in which the researcher will experience positive feelings (such as when data

confirms researcher assumptions), feeling guilty about some of your feelings, blaming others for your feelings, and feeling disengaged or aloof. When I recognized feelings such as these, I revisited my notes in my reflexive journal to gain insight and separate my reactions from past events and my present research. As suggested by Ahern (1999), when my feelings became particularly strong, I consulted with a colleague to ensure that my data collection and analysis was not colored by my feelings. Once I completed my analysis, I reflected on how to write up the results. In addition to efforts I made to bracket during data collection and analysis, I was careful to bracket my biases and preconceptions throughout the process of writing up the data. I have now thoroughly addressed the biases associated with this study as well as strategies I implemented to deal with those biases. Next, I will explain my choice to use first person in this dissertation research.

**Subjectivity and Use of First-Person Voice.** The rhetoric involved in this study employs the use of the first person as a way of owning the subjectivity associated with my identity as the sole researcher involved in this study and as a participant observer in the research on more than one level. First person is appropriate for this dissertation because as a member of the bisexual community and as a counselor and a counselor educator, I am a participant observer in this research. I am passionate about increasing counselor competence with regard to bisexual-identified clients and I am committed to this research as an act of social justice. As such, I seek to own the bias associated with my bisexual identity by writing in the first person. The word “I” refers to my experiences



and my perspective as a bisexual individual, a counselor, a counselor educator, and researcher.

Qualitative researchers do not seek to eliminate bias. Rather, they seek to understand the ways that biases may impact research. Biases have the power to reduce trustworthiness in qualitative research. To develop trustworthiness throughout this dissertation study, I dealt with my personal bias around bisexuality by (a) developing reflexivity as well as bracketing my assumptions, emotions and past experiences as a bisexual client and as a counseling student and as a counselor educator and also by (b) using multiple data sources (syllabi, textbooks and responses to an open-ended question) to generate a comprehensive review (Berg & Lune, 2012) and (c) by using an external auditor to review the research. The use of an external auditor confirmed transparency and contributed to confirmability.

To further increase trustworthiness, my personal experience as a participant-observer in the research, while bracketed, served as a source of triangulation. Bracketing this experience ensured that my anecdotal experience as a bisexual-identified woman who has been out for twenty five years did not drive the data to fulfill my preconceived hypothesis. My experience did, however, allow me to review and validate the data by triangulating it with my own experience. Next, I will provide a description of the specific procedures that further shaped this dissertation study.

### **Sample**

The sample used in this study was comprised of content-based items used in multicultural counseling courses in CACREP-accredited programs. There are currently

617 counselor education programs that are accredited by CACREP. Because this study is concerned with what counselor educators teach about bisexuality in these programs, the analytic sample was retrieved from the total population of 622 CACREP-accredited counselor education programs.

To acquire a sample from which generalizable data that applies to the goals of this study can be drawn, I used purposive sampling. Purposive sampling is a sampling method by which researchers seek information-rich cases that will best address a research question. Purposive sampling is intended to select data sources for the amount of detail they can provide about a phenomenon, and not simply collecting data to meet a certain sample size. The type of purposive sampling used was purposive criterion sampling (Hays & Singh, 2011). The criteria for inclusion were: must be the syllabi and report of supplementary materials used in multicultural coursework and must be from a CACREP-accredited program in counselor education. I made efforts to collect data from each of the 622 CACREP-accredited programs and the resultant sample was comprised of 100 counselor education programs. Each of these programs provided a syllabus/syllabi and responded to an open-ended question. In order to provide a comprehensive review of the data, every response was analyzed—I did not select out certain responses for inclusion while excluding others. Thus, every syllabus and every response to the open-ended question was included in the data set. In addition, all required textbooks represented on the syllabi were included in the analysis. No textbooks were excluded.

In spite of these efforts to create a comprehensive sample, the sample was not representative. Approximately 10% of CACREP accredited programs offer doctoral

degrees, so there was more data for programs exclusively offering masters degrees. Similarly, CACREP provides accreditation for a variety of degree programs: master's degrees in career counseling, clinical mental health counseling, addiction counseling, marriage, couple, and family counseling, school counseling, student affairs and college counseling, as well as doctoral degrees in counselor education and supervision. The sample is not representative of the relative presence of each of these degree programs to the total population of counseling programs. To increase participation, efforts were made to reach out to the counselor education community (mainly by email, social networking sites, and list serves) to find relevant participants.

**Sampling Procedures.** The CACREP website provides a directory of all accredited programs with links to individual program websites. I followed the link to the program website and located the phone number for the main office of each program. I called the main number listed for each program and used the following script:

“Hello, my name is Laurie Bonjo and I am a doctoral student at Old Dominion University. I am doing a dissertation study involving the content of multicultural counseling courses in CACREP-accredited programs. My study requires that I collect the syllabi used in these courses. I am hoping you will provide me with the email address of the individual or individuals who teach multicultural counseling so that I may request a copy of their syllabus.” [After email address is provided] “Thank you very much for your time and have a great day!”

I used the email address(es) provided to contact the individuals who teach multicultural counseling in CACREP-accredited programs. I sent an email with the subject heading “Request for Multicultural Counseling Syllabus” in the subject heading (see Appendix One). Responses to this inquiry were stored in a Word file in my computer.

Although I had some minimal interaction with human beings, my data involved the content of multicultural courses, not people’s feelings about the courses. Thus, it was determined by Dr. Adam Rubenstein, the director of research compliance at Old Dominion University that this study did not require human subjects review. I will now describe my interactions with Dr. Rubenstein.

#### **Discussion of IRB Application and Review**

On August 6, 2012, I provided Dr. Adam Rubenstein with a copy of an exempt application for human subjects review which included all aspects of this design, including the open-ended question posed to individuals teaching multicultural counseling courses. Dr. Rubenstein replied the same day to say that my study did not require IRB approval. Dr. Rubenstein provided me with a letter explicitly stating this (see Appendix Two).

#### **Data Collection Procedures**

I created an email account to be used specifically for this research project. Using that email address, I contacted individuals who had been identified by office personnel as teaching multicultural counseling. I contacted each individual using the email included in Appendix One. The email used the subject heading “Request for Multicultural

Counseling Course Syllabus.” In this section, I will describe the procedures involved in this dissertation study, including document reviews, open coding and thick description.

**Document reviews.** This dissertation study involved reviewing several categories of documents. These were: syllabi, textbooks, responses to an inquiry regarding supplemental materials, and the supplemental materials themselves. Data were stored using a series of Word files within a master Word file in my personal computer.

Along with syllabi and textbooks, I examined written responses to the following inquiry, which was embedded in an email (see Appendix One): *Do you use supplemental materials in your multicultural counseling course that are not shown on your syllabus that address bisexuality? If yes, please describe those materials briefly.* I first created a Word file in which every syllabus was saved as an individual Word document for review. This Word file also included a distinct Word document I used as a master file to collect information about all of the syllabi. In this file, I recorded information such as the number of times that the term “bisexual” appeared on each individual syllabus. I also collected the number of times that the letter “B” was used to represent bisexuality in a letter strand, as in “LGBTQQIA.” I then created a Word document which I titled “List of Textbooks” where I recorded information regarding the textbooks represented on the syllabi. This document represented a comprehensive list of all textbooks in use along with basic information such as whether or not the textbook included a chapter dedicated to LGBTQQI-identified individuals. I recorded the frequency that each textbook was required reading.

All textbooks listed on the syllabi were then similarly examined for mention of bisexuality in the index and table of contents. All mentions of bisexuality or the letter “B” as intended to indicate the term “Bisexual” listed in the index and/or table of contents were recorded in a Word document. When textbooks contained a chapter dedicated to discussion of LGBT issues, that chapter was examined for specific mention of bisexuality. Any textual material that specifically addressed bisexuality was selected for analysis.

Specifically, textual material that addressed bisexuality was extracted from each textbook and entered into a Word document that was labeled with the name of the textbook and the date that the text was coded as well as some basic information. For example, the numbers of words and paragraphs dedicated to bisexuality were recorded. The text itself was coded using open coding procedures to locate commonalities and themes in the data. The term *open coding* means that I allowed themes to emerge from the data rather than seeking to confirm or deny pre-existing hypotheses and is consistent with the bracketing of researcher biases and assumptions (Berg & Lune, 2012). Open coding was discussed in detail earlier in this chapter.

In addition to examining the syllabi and the textbook associated with each response, I collected all responses to the questions regarding supplementary materials in another Word document. The responses to the questions: *Do you use supplemental materials in your multicultural counseling course that are not shown on your syllabus that address bisexuality? If yes, please describe those materials briefly*, were collected in a Word file. The answers to these questions were analyzed using an open coding

procedure. When possible, I also made proactive efforts to locate the supplemental materials themselves. In cases where the researcher could not access the supplemental materials directly, the researcher noted this in the master file. A separate Word file associated with each supplementary material recorded as much information as could be obtained about that supplementary material. These documents were coded using an open coding procedure.

**Open coding.** *Open coding* involves identifying concepts and then defining and developing categories based on their properties and dimensions (Berg & Lune, 2012). Open coding is a method of data analysis used by qualitative researchers to build concepts from a textual data source (Berg & Lune, 2012). Although qualitative research is guided by research questions, the researchers remain flexible concerning the discovery of new relationships, concepts and ideas that may not have been thought of prior to collecting the data (Hays & Singh, 2011). Furthermore, many qualitative researchers analyze data as they are collected, rather than at the study's conclusion, and are thus able to explore phenomena as they naturally occur (Berg & Lune, 2012; Patton, 2003). The first step in this procedure was to examine the data and break it into pieces to examine closely, compare for relations, similarities and dissimilarities.

### **Coding Procedures**

As primary researcher, I was responsible for all data collection and analysis. Data was coded using open coding. First, I bracketed my assumptions, noting my biases and their influence on the coding process. Next, I analyzed the data using *textual themes*. This

means that I used thick description to describe the text using key words in order to generate codes.

**Thick description.** Geertz (1973) refers to thick description as providing a comprehensive and focused picture of a phenomenon that includes relevant psychosocial, affective, and cultural undertones. Thus, a discussion of data involving thick description stands in contrast to the type of description found in quantitative analysis because quantitative analysis typically involves numbers rather than the words and pictures found in qualitative thick description. Thick description often tells a story and typically includes participant quotes. Thick description goes beyond simply reporting the basics of facts, feelings, observations, and occurrences to include inferences into the meaning of present data (Geertz, 1973).

Finally, I collapsed textual themes into patterns which were axial coded as general, typical, or variant. Throughout this procedure, I read and reviewed the syllabi, textbooks, responses to the open-ended question, and supplementary materials and I simultaneously reviewed, compared, and collapsed themes. Coding was finalized when I had comprehensively chunked the data by collapsing codes.

**Collapsing codes.** Collapsing codes can be thought of ways to chunk data. Coding can be thought of as a method of disassembling data, while collapsing codes can be thought of as a way of reassembling the data in logical groupings. Grouping the data allowed me to summarize information across data sources.

**Units of analysis.** The term *item* refers to a whole unit of a message; for example, the term “item” could refer to a book, a letter, a website, a blog, a speech, a song, a



magazine, or even an entire interview (Berg & Lune, 2012). The use of “item” as a unit of analysis in this dissertation study was dependent on what supplementary materials educators indicated they use in their multicultural counseling courses.

Concepts are units that can be arranged in clusters. For example, “bisexuality as a phase,” “bisexuality as a way to get attention,” and “bisexuality as confusion” can all be thought of as concepts relating to bisexuality being delegitimized. Similarly, “dual stigma” “and “being identified inaccurately based on a partner’s gender,” and “lack of visibility within the queer community as well as the straight community,” could be clustered together as forms of discrimination experienced uniquely by bisexual-identified individuals.

In this dissertation study, the primary units of analysis are words, lines (as in how many lines within a text are dedicated to the discussion of bisexuality), phrases, and sentences (as in what constitutes common themes indicated through the meaning of phrases and sentences), paragraphs (as in how many paragraphs are dedicated to discourse about bisexuality), or entire documents (such as pictures, films, and any other supplementary materials that are present in the data that may be considered a “unit” of analysis).

### **Data Analysis**

The qualitative units of data collected in this study were conceptualized as falling into categories, or domains (Hays & Singh, 2011). Categories and domains emerged from the data using an inductive process. Therefore, there were no predetermined categories. Data was grouped into categories as common themes emerged. Data was weighted

differently according to the material/modality of communication; for example, an hour- long video about bisexual-identified clients carried more weight than two paragraphs in a multicultural counseling textbook. Data was described and represented in ways that capture this type of variability and complexity.

The first question I have identified is: In what ways and to what extent is bisexuality addressed in courses that are intended to help counselors-in-training become culturally competent (i.e., in multicultural counseling courses)? This question was answered by reviewing the syllabi and the answers to the open ended question. From this process, a comprehensive list of textbooks and supplementary materials was generated. The units of analysis under review in this study are words, sentences and paragraphs. This information is presented to the reader using descriptive statistics in a table format in the next chapter.

The second question conceived for this study is: How is bisexuality presented in the textbooks and supplementary materials used in multicultural counseling courses? The answer to this question is expressed in the next chapter as qualitative data using thick description. All syllabi, textbooks, and supplementary materials were examined and coded for references to bisexuality. This material will also be presented to the reader using thick description in the next chapter.

The final question I have identified is: “What information is provided about counseling bisexual clients?” This question was answered by collecting a summary of the information provided to counselors-in-training through a comprehensive review of the data.

Now, I will define the strategies I used to make the study trustworthy.

### **Strategies for Trustworthiness**

For the purposes of this dissertation study, I define trustworthiness according to four categories: credibility, transferability, dependability, and confirmability. Credibility was demonstrated through the use of an external auditor who had access to memos, a thorough audit trail, and a large sample size. Transferability was generated through the use of a diverse sample that meets the predetermined criteria along with the use of thick description. Dependability was established by providing quantitative as well as qualitative data, triangulating multiple data sources, and by accessing a large sample. Finally, confirmability was produced by memoing to bracket my assumptions and biases throughout data collection and analysis. I have now presented the strategies I incorporated into the research design to enhance trustworthiness. In the next section, I will discuss the strengths and limitations of this research design.

### **Strengths and Limitations**

One advantage of conducting a content analysis in this manner is that it is virtually unobtrusive. Instructors were not made aware in advance that their syllabi may have been used for the purpose of this study, which limits interference based on social desirability. Another strength of this design is that it incorporates both quantitative and qualitative data. Quantitative data was analyzed using basic descriptive statistics (mean, median and mode) and can be grouped in different ways (regionally, by the size of programs, by programmatic specialization (e.g., social justice, pastoral counseling, crisis counseling), by program focus-- on school, mental health, rehabilitation, community

counseling, etc.). Incorporating a qualitative component allowed me to determine if gaps in understanding are program-specific, or if there is general lack of training across all fields of counselor education.

The most serious limitation of this design is that it only recorded and analyzed what had already been determined would occur in courses that were subsequently molded in vivo according to the what, why, when and how of what students bring to the class. Many, if not all, counseling courses are constructivist in nature. Thus, students may bring bisexuality into the classroom as a matter of discourse. It is also possible that some students will choose to do presentations on bisexual-identified clients. Perhaps some counselor educators who respond to the open-ended question will adjust their content to be more inclusive of bisexuality. Thus, a content analysis is not predictive and can only provide a snapshot of what is happening at the time the data are collected.

Another possible limitation to this study involves the potential for selection bias. It is important to recognize in using a data sample such as this that there may be selection bias around the syllabi that are returned because these syllabi are returned by individuals who were willing to respond to my request and therefore may in some way believe in the importance of this research. This could mean that these are respondents who are more likely than others to address bisexuality in some way. The design provided some balance to this potential data bias by including all texts that are represented in the syllabi. The underlying rationale that there would be data saturation with regard to the textbook portion of the data sample was confirmed. This means that there was a point at which no new textbook titles were being collected from the data (syllabi). At that time, the list of

textbooks collected from the sample was considered to be representative of the larger population of textbooks referenced on multicultural counselor education syllabi. My rationale is that it is likely that there are a fairly stable number of textbooks being used in multicultural counselor education courses in CACREP accredited programs. Still, it is possible that some textbooks were not represented by the sample, and it is possible that some supplementary materials were left out. It is also possible that receiving my request for information will prompt some counselor educators to adjust their curriculum to be more inclusive of bisexuality. Another serious limitation to this design is that the sample is voluntary and is not representative. Although the samples of syllabi are provided by voluntary means, the writers of textbooks are unable to change their writing to respond to the nature of this study. Although the sample is not representative, I made proactive efforts to collect data from the entire population of CACREP-accredited counseling programs. The final and perhaps most serious limitation to this design is that only one researcher coded the data. An attempt to address this limitation was made by including an external auditor who reviewed all phases of the study and who was straight-identified. I will now summarize this chapter, which described the procedures and methods by which this dissertation study was conducted.

### **Summary**

In this chapter, I have provided a map for how this study was conducted along with rationale for why the study was conducted in this manner. I provided a conceptual framework using post-positivism, constructionism, and queer theory. Researcher bias was addressed along with the role of the researcher as a participant-observer. I described how

the methods for this study were derived from the research topic and research questions. Sampling, data collection, and data analysis were all discussed in detail. Finally, I examined the strengths and limitations of the study. The following chapter will present the results of this study.

## CHAPTER IV

### RESULTS

#### Introduction

In this chapter, the results of the study are presented. The quantitative portion of the data analysis describes the magnitude of bisexual visibility in the data set and is presented in the sections that follow. One hundred syllabi were collected and analyzed, along with 30 textbooks and 40 reports of supplemental materials. The data analysis resulted in three potential patterns related to the magnitude of bisexual visibility: *Invisibility*, *Limited Visibility* and *Increasing Visibility*. To illustrate these three patterns, a description of the presence of invisibility, limited visibility and increasing visibility as they are present within the syllabi, textbooks and supplemental materials that comprise the data set will be presented in order to ground the reader in the comprehensive body of instructional materials that encompass the data set. The qualitative portion of the analysis focuses on the textbooks categorized as *increasing visibility* as well as the reports of supplemental materials. Each of the textbooks that were categorized as *increasing visibility* and each of the supplemental material reports were analyzed with regard to the multicultural counseling competency domains: *self-awareness, knowledge, and skills*. Themes and subthemes that emerged within these domains were further analyzed to shed light on the essence of what is conveyed about bisexuality in the data set. First, I present the results of quantitative analysis of the syllabi, textbooks and supplemental materials, using tables and diagrams. Finally, I present the results of qualitative analysis using a combination of tables, diagrams, and quotes from documents.

## Syllabi

### Quantitative Results

This section refers to the degree to which bisexuality is represented in the 100 syllabi that were collected from respondents and departmental websites. Analysis showed that with regard to bisexual visibility, syllabi generally fall into one of two broad categories: *invisibility* and *limited visibility*. *Invisibility* refers to the complete lack of attention to bisexuality. *Limited visibility* is further divided into two sub-patterns: *limited visibility I* broadly refers to the tendency to conflate and/or subsume bisexuality with lesbian and gay issues as well as the monosexist, hierarchical tendency to consistently place the word “bisexual” behind the words “gay” and “lesbian” in lists and in acronyms used to describe the queer community. *Limited visibility II* refers to syllabi that employ non-specific, generalist terms, such as: sexuality, sexual orientation, sexual minorities, heterosexism.

Analysis of results showed that the bulk of the syllabi were categorized as limited visibility (n=86). Out of this group, 34 syllabi used some form of list or acronym wherein the word “bisexual” followed the words “lesbian” and “gay.” These were categorized as *limited visibility I*. Fifty-two syllabi used non-specific terms to describe discourse related to sexual identity with “sexual orientation,” “sexuality,” “sexual minorities,” “sexual identity,” and “heterosexism” being the most common. All of these are coded as *limited visibility II*. By contrast, there were 14 syllabi in which sexual orientation, sexual identity and all related constructs were left out; these were coded as *invisible*. An example of a syllabus that would have been coded *increasing visibility* would have been a syllabus that



specified something akin to “the unique needs and challenges of bisexual clients.” Table 4.1 summarizes the presence of references to bisexuality on the syllabi that comprise the data set:

Table 4.1 References to Sexuality on Multicultural Counseling Syllabi

Limited Visibility I Word “bisexual” is spelled out, listed behind lesbian and gay	Limited Visibility II Non-specific terms “Sexual Orientation” “Sexuality” “Sexual Minorities” “Heterosexism”	Invisibility Not addressed at all
34	52	14

Concerning the demographics on the syllabi that comprise the data set, analysis showed no patterns with regard to geography, religious affiliation of school, size of school, nor proximity to a city. Overall, 34% of the syllabi indicated some degree of conflated visibility of bisexuality, 52% indicated some potential for inclusion due to the use of non-specific terms, with 14% of the syllabi leaving all discourse on sexuality entirely unrepresented.

## Textbooks

### Quantitative Data

From 100 syllabi, I collected a list of 30 different textbooks in use. Table 4.2 shows the list of textbooks in rank order, from most popular to those textbooks that were only listed on one syllabus. Each of the textbooks was analyzed for the extent to which bisexuality was visible and placed into one of three categories: *invisibility*, *limited visibility*, and *increasing visibility*. Textbooks wherein bisexuality was entirely unrepresented were labeled invisible. This included textbooks that contained discourse on

lesbians and gays but did not specifically mention bisexuality. Textbooks wherein bisexuality was consistently conflated and/or subsumed with lesbian and gay identity were placed in the category *limited visibility*. When bisexuality was addressed specifically, textbooks were categorized under the label *increasing visibility*.

Table 4.2 Textbooks Used in Multicultural Counseling Courses

# of Uses	Textbook Information	Extent of Visibility
1. 45	Sue, D. W., & Sue, D. (2013). <i>Counseling the culturally diverse: Theory and practice</i> . Hoboken, N.J: John Wiley & Sons.	Increasing Visibility
2. 10	Robinson-Wood, T. L. (2013). <i>The convergence of race, ethnicity, and gender: Multiple identities in counseling</i> (4 <sup>th</sup> edition). Thousand Oaks, CA: Sage.	Limited Visibility
3. 9	Pedersen, P. B., Draguns, J.G., Lonner, W.J., & Trimble, J.E. (2008). <i>Counseling across Cultures</i> (6 <sup>th</sup> Ed.). Thousand Oaks, CA: Sage.	Limited Visibility
4. 9	Lee, C.L. (2006). <i>Multicultural issues in counseling: New approaches to diversity</i> . (3 <sup>rd</sup> Ed.).	Invisibility
5. 8	Baruth, L. G. & Manning M. L. (2007). <i>Multicultural Counseling and Psychotherapy: A Lifespan Perspective, 4th Ed</i> . Columbus, Ohio: Pearson Education.	Increasing Visibility
6. 8	McAuliffe, G. (Ed.). (2013). <i>Culturally alert counseling: A comprehensive introduction</i> (2 <sup>nd</sup> edition). Thousand Oaks, CA: Sage.	Increasing Visibility
7. 7	Thomas, A.J. & Schwarzbaum, S. (2006). <i>Culture and identity: Life stories for counselors and therapists</i> . Sage Publications, Inc., Thousand Oaks, CA.	Increasing Visibility
8. 6	Hays, D.G., Erford, B.T. (2010). <i>Developing multicultural counseling competence: A systems approach</i> . NY: Pearson.	Increasing Visibility
9. 5	Rothenberg, P.S. (2004). <i>Race, class, and gender in the united states</i> . New York, New York: Worth Publishing.	Limited Visibility
10. 4	Johnson, A.G. (2001). <i>Privilege, power, and difference</i> . Mountain View, CA: Mayfield Publishing Co.	Invisibility
11. 4	Ponterotto, J. G., Casas, M. J., Suzuki, L. A., Alexander, C. M.. (2001) <i>Handbook of multicultural counseling</i> . (2 <sup>nd</sup> ed). Sage Publications, Inc. ISBN # 0-7619-1983-X	Limited Visibility
12. 3	Lee, C. C. (2007). <i>Counseling for social justice</i> . Alexandria, VA: American Counseling Association.	Limited Visibility
13. 3	Schmidt, John J. (2005). <i>Social and Cultural Foundations of Counseling and Human Services: Multiple Influences on Self-Concept Development</i> . Allyn & Bacon.	Limited Visibility
14. 2	Brammer, R. (2012). <i>Diversity in counseling</i> . Belmont, CA: Thomson, Brooks/Cole Publishers.	Increasing Visibility
15. 2	Diller, J.V. (2010). <i>Cultural Diversity</i> (4 <sup>th</sup> edition). Belmont, CA: Brooks/Cole.	Limited Visibility

## 4.2 Continued

# of Uses	Textbook Information	Extent of Visibility
16. 2	Pope, R. L., Reynolds, A. L., & Mueller, J. A. (2004). <i>Multicultural competence in student affairs</i> . San Francisco: Jossey Bass.	Invisibility
17. 2	Choudhuri, D.D., Santiago-Rivera, A.L. & Garrett, M.T. (2012). <i>Counseling &amp; diversity</i> . Belmont, CA: Brooks/Cole Cengage Learning . ISBN: 978-0-618 47036-5.	Increasing Visibility
18. 2	Jun, H. (2010). <i>Social Justice, Multicultural Counseling, and Practice: Beyond a Conventional Approach</i> . Los Angeles: Sage.	Increasing Visibility
19. 1	Gielen, Dragnus, & Fish. (2008). <i>Principles of Multicultural Counseling and Therapy</i> . Routledge; Clifton.	Invisibility
20. 1	Lee, W. M., Blando, J. A., Mizelle, N. D., & Orozco, G. L. (2007). <i>Introduction to Multicultural Counseling for Helping Professionals</i> (2 <sup>nd</sup> Ed.). New York: Routledge.	Limited Visibility
21. 1	Allen, B.J. (2010). <i>Difference matters: Communicating social identity</i> (2nd Ed.). Long Grove, IL: Waveland Press, Inc. (ISBN-13: 978-1577666738).	Limited Visibility
22. 1	Hays, P. A. (2008). <i>Addressing cultural complexities in practice: Assessment, diagnosis, and therapy</i> . Washington, DC: American Psychological Association.	Limited Visibility
23. 1	Vacc, N., & DeVaney, S., & Brendel, J. (Eds.). (2003). <i>Counseling Multicultural and Diverse Populations: Strategies for Practitioners</i> , Fourth Edition. New York.	Increasing Visibility
24. 1	Paniagua, F.A. (2001). <i>Diagnosis in a multicultural context: A casebook for mental health professionals</i> . Thousand Oaks, CA: Sage Publications.	Limited Visibility
25. 1	Kaufman, G. and Raphael, L. (1996). <i>Coming Out of Shame: Transforming Gay and Lesbian Lives</i> . New York: Doubleday. ISBN#0385477961	Invisibility
26. 1	Newman, D. M., (2007). <i>Identities and Inequalities: Exploring the Intersections of Race, Class, Gender and Sexuality</i> . Boston; McGraw Hill.	Increasing Visibility
27. 1	Neukrug, E. (2011). <i>The world of the counselor: Introduction to the counseling profession</i> (4 <sup>th</sup> ed). Belmont, CA: Brooks/Cole.	Limited Visibility
28. 1	Mio, J. S., Barker-Hackett, L., & Tumambing, J. (2008). <i>Multicultural psychology: Understanding our diverse communities</i> . Boston: McGraw-Hill.	Increasing Visibility
29. 1	Ritter, K. Y. & Terndrup, A. I. (2002). <i>Handbook of affirmative psychotherapy with lesbians and gay men</i> . New York: Guilford Press.	Increasing Visibility

For convenience, all references to individual textbooks will be made using author names. Table 4.2 shows that the text listed most often on of the syllabi as required

reading was written by Sue & Sue. This text is required reading on 45 syllabi.

No other textbooks come close to this level of distribution. By comparison, the second-most-popular textbook, by Robinson-Wood, is listed as required reading on only ten syllabi. There are nine textbooks that show up on five syllabi or more, and 19 textbooks show up on at least two syllabi. Although it would have been easy to have read only the textbooks with the highest level of circulation, I chose to analyze the comprehensive list of textbooks. These results are discussed in the next section.

With regard to bisexual visibility, Table 4.3 shows that the number of textbooks categorized with *limited visibility* is only one more than the number of textbooks with *increasing visibility*. In fact, the number of textbooks categorized as *invisible* is significantly smaller than the other two groups. It is important to note that the textbooks that are in use more are not those that provide more visibility about bisexuality, nor is the reverse true.

Table 4.3 Extent of Bi-Visibility across 30 Multicultural Textbooks

	Invisibility	Limited Visibility	Increasing Visibility
Visibility of Bisexuality in Textbooks	Bisexuality is not addressed at all, not even as conflated with lesbian and gay identity.	Bisexuality is conflated with and subsumed by lesbian and gay identity, hierarchy of privilege, preference and power implicit in list/letter strand	In varying degrees, bisexuality is represented as distinct from and related to lesbian and gay identity
# of Texts Out of 30	5	13	12
Out of 19	3	8	8

Table 4.2 and 4.3 provide information about the extent to which all of the textbooks in the data set address bisexuality, but this information is limited. Qualitative analysis

provided insight into what was being communicated about bisexuality and about bisexual-identified clients. At this point a brief review of data collection may be helpful for the reader. After reviewing the syllabi, I collected a copy of each of the 30 textbooks listed as required reading. Textbooks were accessed using electronic books from CourseSmart and Ebookoid and hard copies of books were accessed through the Brooklyn College library or purchased online. A Word file was created for each textbook where notes and direct quotes related to bisexuality were stored. In the following sections, I will provide the results of qualitative analysis applied to the textbooks that were classified as *increasing visibility*.

### **Qualitative Data**

The qualitative results of this dissertation study are based on the textbooks listed as required reading on the syllabi that comprise the data set as well as the reports of supplemental materials made by the authors of the syllabi. I will first provide the results of textbook analysis, followed by the results of the supplemental materials.

### **Textbooks**

In the previous sections, I provided the quantitative results related to the syllabi and the textbooks that comprise the data set. In the following section, I provide the results of a qualitative data analysis of the textbooks that were classified as providing increasing visibility of bisexuality. I began the analysis by applying the multicultural counseling competencies as a lens through which I evaluated the extent to which the texts address bisexuality. This analysis highlighted which texts provide opportunities for readers to

develop competency in self-awareness, knowledge, and skills relevant to working with bisexual-identified clients.

### **Multicultural Counseling Competencies**

Throughout analysis, I applied the three domains of multicultural counseling competency (Arredondo et al., 1996) as lenses criteria directed at the development of proficiency with bisexual-identified clients. This analysis showed that although there were 12 textbooks categorized as increasing visibility of bisexuality, nine of these texts address only the knowledge domain of cultural competence. Only two textbooks address all three domains: the McAuliffe text and the Hays and Erford text. However, the two texts approach the tripartite model of skills differently. This will be discussed in detail in the sections that follow. In the next section, I will review the results of analysis related to the domain of self-awareness, followed by the results related to the skills domain. This will be followed by an analysis of how each of the twelve texts categorized as *increasing visibility* presents knowledge related to bisexual clients.

As mentioned earlier, there are two textbooks in the data set that provide opportunities for the reader to develop competence in all three domains. These are the text by Hays and Erford and the text by McAuliffe. Each of these texts provides opportunities to develop self-awareness, each provides knowledge relevant to bisexual populations, and each provides some degree of guidance on developing skills necessary for competent practice with this population. Because self-awareness is not covered by any other authors, and because self-awareness is generally considered a foundation for

the development of knowledge and skills, I will begin by reviewing how the McAuliffe text and how the Hays and Erford text approach the domain of self-awareness.

### **Self-awareness**

Regarding self-awareness, both texts provide the reader with questions designed to elicit reader reflection on biphobia. The McAuliffe text provides four prompts, and the Hays and Erford text provides one initial prompt with two follow-up prompts. The prompts used by McAuliffe are as follows:

1. Describe a time when you felt angry about heterosexism or biphobia in society.
2. Describe a time when you felt helpless as an individual to create change regarding heterosexism or biphobia in society.
3. Describe a time when you decided to actively resist heterosexism or biphobia.
4. Make a list of three ways that you will actively resist heterosexism and biphobia in both your personal and professional lives over the next few weeks. (p. 442)

The first two prompts provided in the McAuliffe text are intended to help the reader explore his or her awareness of biphobia and their experience of biphobia. The second two prompts are invitations to the reader to become proactively engaged in deconstructing biphobia. Because of this call to action and because the prompts are bisexual-specific (not embedded in a list of cultural identities), the prompts provided by McAuliffe are more comprehensive and provide more visibility than the prompts used in the Hays and Erford text. To further elucidate, Hays and Erford provide a prompt wherein the reader is presented with a list of cultural identities and is asked to record the stereotypes related to each identity-category to which they have been exposed. In the list created by Hays & Erford, *bisexuals* are third-to-last in a list of twenty categories that begins with *males*. The two categories following bisexuals are *Arab Americans* and

*Buddhists*. After the list of categories, Hays and Erford provide these follow-up prompts: “How and from whom did you learn these generalizations? Have any of these stereotypes changed for you throughout your life so far?” (pg. 17). Like the prompts used in the McAuliffe text, these prompts are intended to help the reader explore their awareness of biphobia, but these prompts do not include a component of personal responsibility leading to action. Further, positioning bisexuals in a list beneath males, gay males, and lesbians reinforces rather than deconstructs pre-existing sexist and monosexist privilege. Thus, although each of the textbooks includes a component related to self-awareness with regard to biphobia, the two activities are not equivalent. Now that I have described how two of the texts provide opportunities for readers to develop self-awareness relevant to working with bisexual-identified clients, I will provide the results of applying the lens of multicultural skills domain to the textbooks, followed by the results of applying the lens of the knowledge domain of multicultural competence to the textbooks. Although the tripartite model is frequently presented with self-awareness first, followed by knowledge and then by skills, I chose this order for convenience because the data set concerning the skills domain is more bulky than the data attached to the other domains.

### **Skills**

The Hays and Erford text approaches skill development through modeling competence with a bisexual client in a case study. By introducing a case study based on a client who struggles with her bisexuality, the authors are able to demonstrate some of the forces of oppression that may be present with a bisexual client and are able to



demonstrate some non-biased responses to the client's concerns. The case includes pressures from male and female partners to identify as monosexual. In this text, case analysis is applied as a way of walking the reader through the counseling process with this individual. The focus of the discourse regarding counseling skills is on respecting the client's process in self-labeling and on providing patient, affirmative support. Although Hays and Erford suggest that advocacy is called for when working with queer-identified clients, advocacy competencies are not modeled in this case study. The case demonstrates a client who is deeply embedded in biphobia and monosexism, but the counselor in the case does not demonstrate how to address these issues with the client using the advocacy competencies or any other counseling skills.

"I have always been and am still attracted to men...she expressed confusion, because she stated she did not think she was lesbian or bisexual. "How could I be?" she never felt such strong feelings toward another woman. How could I possibly be lesbian or bisexual? Have I repressed these feelings all of these years?" In the back of my mind, I wondered if Gretchen was indeed bisexual. I had worked with many bisexual clients of both genders and experienced the confusion they felt when they first tried to define who they were. Society, after all, does not make it easy; people feel pressure to put a label on themselves. Bisexual people often describe feeling pressure from their heterosexual family and friends to be heterosexual and pressure from their lesbian and gay friends to "come out of the closet already!" Gretchen and I worked over several months helping her to understand her feelings. She struggled to find a way to define her experience. She described feeling pressure from Latoya to live with her and acknowledge that she was bisexual; she felt pressure from her husband to end her relationship with Latoya and acknowledge that she was heterosexual. She eventually decided to end her marriage but to get her own apartment and continue seeing Latoya. She stated she did not want to jump from one relationship to another but wanted to take it slowly. She also decided that she did not need to label herself. "Maybe I am bisexual," she stated, "but I still feel more like a heterosexual woman who fell in love with another woman." What did I think at this point? Actually, it didn't matter what I thought. As a counselor, it was important that I not label her, either, other than the labels she gave herself. (p. 120)

The reader is left with the message that the client simply needs the counselor to be patient with her identity development and respect her choices in terms of self-labeling. This example highlights the need for detailed process commentary when case analysis with non-traditional clients is provided.

The McAuliffe text and the Terndrup and Ritter text are the only two texts that approach skill development directly. McAuliffe describes a process of collaborating with clients to determine the impact of biphobia, beginning with the messages that a client received while growing up and progressing to how these messages might impact the client's capacity for self-acceptance.

In addition to acknowledging external pressures on LGBT clients, counselors should be able to assess and address their LGBT clients' levels of internalized heterosexism or biphobia. This process might be conceptualized in several phases. First is assessment. The counselor should determine the extent to which these internalized negative messages are influencing the client's presenting concerns. In many cases, the counselor will need to help the client explore the impact of internalized heterosexism or biphobia on her or his life and continually challenge various aspects of the client's internalized heterosexism or biphobia (Brown, 1989; Gartrell, 1984; Szymanski, 2005a). To facilitate clients' awareness and expression of these internalized negative beliefs, counselors might ask them about attitudes and stereotypes about LGBT people that they have heard while growing up. Counselors might then explore what impact these stereotypes might have on clients and their levels of self-acceptance of their sexual-minority identity. (p. 441)

This passage is an example of a counseling skill process that was directed specifically at bisexual clients. Other textbooks may describe a similar process when discussing lesbian and gay clients, but it is left up to the reader to translate this into work that would apply to bisexual clients. This monosexist approach contributes to bisexual invisibility. The McAuliffe text contributes to bisexual visibility and bisexual inclusion by positioning the above paragraph within a section specifically dedicated to bisexual concerns. The Ritter

and Terndrup text approaches counseling skills with bisexual-identified clients in a similar manner. However, while the McAuliffe text focuses on helping clients explore biphobia as it relates to their process of self-identification, the Ritter and Terndrup text focuses on the impact of biphobia on client relationships. The text provides strategies to help bisexual individuals who experience biphobia as they come out in pre-existing relationships. For example, the text suggests that the revelation of bisexuality destabilizes preexisting relationships and that many bisexuals experience rejection upon coming out because people are reluctant to stay in relationships with bisexuals for fear of cheating. This is followed by a discussion about how there may be cases where the partners agree to allow for other relationships to form and in this case, new contracts and agreements need to be negotiated with the help of the therapist and the value and risks of additional partners must be discussed. While neither the McAuliffe text nor the Ritter and Terndrup texts provide a comprehensive discourse on the skills necessary to produce competence with bisexual-identified clients, these texts are the only two that make an effort to encourage skill development with this population. Now that I have described the results of the data analysis with regard to the multicultural counseling domains of self-awareness and skills, I will describe the results of the data analysis with regard to the multicultural counseling domain of knowledge.

### **Knowledge**

The results of this section are provided in rank order based on the number of syllabi listing each textbook as required reading (see table 4. 2). The unit of analysis continues to be the textbooks that constitute the data set. It is important to note that the

textbook that ranks highest in popularity (Sue and Sue) is not the textbook that provides the most comprehensive coverage of bisexuality and the needs of bisexual-identified clients (McAuliffe). It is also important to note that more coverage does not automatically equal better coverage. This is the case with the second-most popular textbook, by Baruth and Manning. The Baruth and Manning textbook presents three different case studies, each of which describes a bisexual-identified individual who is cheating on his or her spouse. This type of visibility reinforces rather than deconstructs pre-existing stereotypes and may have a harmful rather than positive effect. Finally, it is important to note that there are no examples of case studies that demonstrate positive relationship outcomes for bisexual-identified clients. Keeping these points in mind, I will now present the results associated with each textbook in the area of knowledge.

**Sue and Sue.** Indicative of the profound impact that the Sue and Sue textbook may have, it is listed as required reading on 45 different syllabi, which is 35 more syllabi than the second most popular *increasing visibility* textbook (Baruth and Manning). Sue and Sue provide this eloquent statement at the beginning of Chapter 23 (the chapter on sexual minorities):

“Transgendered people are the second-class citizens, and bisexuals are below even them. We’re the white trash of the gay world, a group whom it is socially acceptable not to accept. Feeling awkward among straights is what it feels like to be bi. Being distrusted among gays is what it feels like too (Pajor, 2005, p. 575).” (p. 437)

This statement reveals the pain of dual stigma that is faced by bisexual-identified clients, but dual stigma is never addressed again. The next mention of bisexuality describes a study of counselors who demonstrate negative bias toward bisexuals. Unfortunately, this

is not followed by an invitation to the reader to consider their own potential biases related to this population. The next time bisexuals are mentioned is in relation to the results of a study that suggest that bisexual teens experience more cognitive dissonance than their lesbian and gay peers. Sue and Sue hypothesize no relationship between that cognitive dissonance and the lack of social confirmation experienced by bisexuals, and the reader is left with the implication that bisexuals teens experience greater cognitive dissonance because of their bisexuality instead of because of the higher levels of oppression they face. Finally, Sue and Sue provide a case study of a client named Tiffany who is a 25 year-old Haitian-American, bisexual, educated woman who has recently started a new job. Although the case describes situations where the client may be experiencing oppression due to her bisexuality, the process analysis attributes her experience of oppression mainly to her race. When the text does provide discourse on Tiffany's sexual orientation, it refers only to how she had worn her hair differently and that her co-workers had reacted to this in a sexist and possibly heterosexist fashion. None of the discourse about Tiffany is specific to her bisexual identity—the experiences she has could just as easily have happened to a lesbian. In this case study, the authors have made no effort to show the unique challenges associated with bisexuality. The potential for this case study to assist in developing counselor knowledge or skills is highly limited. In light of the inattention to Tiffany's bisexuality in a chapter dedicated to sexual minorities, the following statement seems ironic: "Finally, the therapist seems unaware that she has invalidated Tiffany's experiential reality..."

While the Sue and Sue text was the most popular textbook in the data set, the next-most-popular text was Baruth and Manning (10 syllabi). I will provide the results of analyzing the text by Baruth and Manning next.

**Baruth & Manning.** It is important to note that most textbooks use some form of hierarchical list or letter strand to refer to the queer community. While some texts will shift the order of the G and the L (or the words lesbian and gay), the placement of the B secures a position for bisexuals outside of monosexual privilege. This said, it is important to notice whenever a textbook shifts this trend and places the word bisexual first.

Consider the following passage:

Agronick and colleagues (2004) reported the challenge of young Latino men being HIV positive or having AIDS. One factor that plays a role in sexual behaviors is the prevalence of bisexuality. Although correct estimates are difficult to determine, Agronick and colleagues (2004) believe that approximately 20% of men who have sex with men are bisexual. For bisexual and gay Latino men, the developmental passage may be complicated by strong sanctions against homosexuality that are supported by cultural norms stressing the importance of maintaining family and cultural connections. Agronick and colleagues (2004) maintain that reaching bisexual men can be challenging. (p. 256)

The preceding passage represents the first time in the text that bisexuality is not conflated with lesbian and gay identity, and it is the first and only passage in which the word “bisexual” precedes the word “gay.” This is highly problematic because of the way that this positions bisexual persons as the primary responsible disease vectors. It is also problematic to shift the order of the terms and then use the phrase “strong sanctions against homosexuality.” Thus, the first information that the reader is given about bisexual individuals in this text associates them with vectors of the HIV and AIDS viruses and simultaneously delegitimizes bisexual identity by using the term “homosexuality.” Later,

a similar paragraph provides discourse associating Black bisexual men with disbursement of the HIV and AIDS virus, even referring to Black men as “the bisexual bridge.” (p.290)

One paragraph provides an array of bisexual typologies. It should be mentioned here that when bisexual typologies are presented (across all textbooks in the data set), the specific challenges faced by each type are not addressed. Thus, the presentation of typologies becomes an exercise in “sorting the bisexuals” rather than an exercise to determine the specific challenges that may be specific to each type.

The paragraph on bisexual typologies is followed by three case studies which are inherently problematic because each of the cases focuses on a bisexual-identified client who is cheating on his or her spouse. This is not ideal because counselors-in-training are only given models of bisexual individuals in unsuccessful relationships. It is important that counselors-in-training know how to help bisexual clients handle their relationships and it is also important that texts do not condition trainees to associate bisexuality with problem-saturated relationships. It is also problematic when case studies use phrases like, “Mary suspected that her husband had always been a bisexual.” It would have been far less offensive if it had read, “Mary suspected that her husband had always been bisexual.” The difference lies in the sense of objectification inherent in the term “a bisexual” and the inverse degree of respect for bisexual identity implicit in simply using the word “bisexual.”

The first case study presented by Baruth and Manning involves a 45 year-old Hispanic woman who is married with a good marital sex life, and who has three grown

children and two female partners. Although the case identifies the client as bisexual and she asserts that she does not wish to leave her husband, her female partners are referred to as her “lesbian lovers.” (p. 286). First, it is unclear whether these women are actually lesbians or whether the authors may be applying this label using behavior as a unilateral reference point. Next, the term “lovers” sexualizes the women. “Partners” would be the preferred term in this case. The first process question the authors ask in reference to this case is, “How is [the client] handling her bisexuality?” (p.287) This question is problematic because similar cases involving other sexual minorities do not pose this question. A more appropriate question might be, “What are the social forces that may be working to cause the client’s choice of identity management?” The final process question, “What might be the possible long-term effects or consequences for Alisa actually living two “lives”?” (p. 287) This question has a hidden implication that something negative is in store for Alisa, and there are no further process questions designed to assist the counselor in understanding how to help Alisa contextualize her identity management choices.

The next case study involves a middle-aged Hispanic American married bisexual man who is afraid that he will give his wife a sexually transmitted infection. As mentioned earlier, the tendency to link bisexual clients with the AIDS and HIV viruses imprints counselors-in-training with a schema about bisexual-identified clients that may evoke rather than assuage monosexist and heterosexist biases. There are other problems with this case study. For example, the authors refer to the client’s “bisexualism,” (p. 309) which is not explained. The preferred term would clearly be, “bisexuality.” Process



commentary on the case focuses on the client's choice not to "come out" and leaves out affirmative discourse on identity management. The counselor even wonders what the client hopes to gain out of counseling, since the client has no intention of coming out to his wife, employer or landlord. Placing this level of primacy on coming out restricts the counselor from providing support as the client goes through the ongoing challenge of identity management while embedded in several biphobic, monosexist systems.

The third case study involves a middle aged (race/ethnicity unidentified) married bisexual man who is cheating on his wife. His wife catches him and threatens to leave him if he does not commit to living a heterosexual life. The case repeatedly refers to client as "a bisexual." (p. 309) While it may be okay to say, "The client admitted to his wife that he had always known he was a gay man," it is less ideal to say, "The client admitted to his wife that he had always known he was a bisexual." As mentioned earlier, a more respectful way of referring to the client's bisexuality might be to simply use the term "bisexual," as in "The client admitted to his wife that he always knew he was bisexual." Next, I will present the results associated with the McAuliffe text.

**McAuliffe.** As mentioned earlier, the most popular textbook (Sue and Sue) is not the textbook that provides the most comprehensive training with regard to bisexual-identified clients. Out of the 12 textbooks that were determined to *be increasing visibility*, the McAuliffe textbook provides the most comprehensive discourse on the experiences of bisexual-identified clients. The book begins by addressing the monosexist and sexist bias in most scholarly discourse on non-heterosexual identities:

Before beginning, it is worth mentioning that I had much difficulty in writing this chapter because lesbian, gay male, bisexual, and transgendered issues are here lumped together, yet these groups have unique differences. Most of the research and theoretical writings have focused predominantly on gay male, followed by lesbian, then bisexual, then transgender issues. (p.416)

This dissertation study is concerned only with the part of the texts that are specifically addressing bisexuality, and the McAuliffe text provides a substantial subsection within chapter 15 (Counseling Lesbian, Gay, Bisexual, and Transgendered Clients) that concentrates on bisexuality. The section begins by reviewing empirical research on the attitudes of heterosexuals, lesbians and gays. It describes the dichotomous binary commonly applied to sexuality and how this contributes to oppression of bisexual-identified individuals and groups. The text also presents empirical research highlighting negative attitudes about bisexual individuals held by heterosexuals, lesbian-identified women and gay-identified men as well as mental health professionals concerning. This provides context for the discourse that follows. The text the attempts to as comprehensively as possible address the unique challenges faced by bisexual-identified clients. There is discourse on bisexual code-switching and identity management, external biphobia, common stereotypes applied to bisexual-identified individuals, delegitimization and dual stigma along with the associated internalized biphobia and the resultant fear of isolation, alienation, and rejection, the complexity of identity development and coming out, the relative fluidity and stability of the label, the lack of community, lack of social confirmation, and having assumptions made about one's sexual identity based on the gender identity of one's partner. As mentioned in an earlier section, this text also provides activities directed at developing self-awareness and skills pertinent to work with

bisexual-identified clients. However, there is no case study with a client who self-labels as bisexual (even though case studies are provided throughout the book for other non-dominant identities). In addition, there seems to be a vague bias toward monogamy in the text. To address these concerns, it may be helpful for the author to include a brief sample dialog between a counselor and client that models how to provide affirmative, non-judgmental responses when a client discloses multiple partners. Next I will describe the text by Thomas and Schwarzbaum.

**Thomas and Schwarzbaum.** The text by Thomas and Schwarzbaum is based on case analysis as a method of teaching about diverse client populations. This said, the book does provide some direct discourse on the subject of bisexuality. For example, the Thomas and Schwarzbaum text describes the history of bisexuality thusly: “Bisexual experimentation gained popularity in the 1920’s as the Victorian era faded, a new rebellious culture emerged, people took notice of Freud’s assertion of all human beings’ bisexual nature, and WWI created a culture of separate sexes.” This statement associates bisexuality with experimentation, rebellion, and Freud. With no disrespect to meant to Freud, none of these associations are positive. Latino bisexual men are referred to in terms of their “insertive” role. This is sexualizing. It would be more respectful to use the term “dominant” role. Bisexual identified individuals are included in a list of other minority identities that are subject to dual stigma. A case study is presented of an African-American identified woman who identifies as bisexual but who expresses a sense of discomfort with the label bisexual as well as with the label lesbian. The case

demonstrates high levels of internalized biphobia and monosexism, but these are not addressed in the process commentary.

“At this point I was and am still today not totally convinced that I am a lesbian. My experience with Gwen allowed me to open up parts of myself that needed to come to the surface if I was to continue to grow as a human being. I find the definition of bisexuality more fitting for me, but then that brings up another set of concerns. No one really wants to hear that you are bisexual because that means that you are a frustrated lesbian or you can’t make up your mind.” (p.355)

The text links Karen’s experience with identity development processes, but does not provide any strategies to address the biphobia and monosexism in which the client is embedded. It seems that the text could provide suggestions to the counselor that would help the client explore the monosexist and biphobic forces with which she struggles. The text could also provide information concerning bisexual-specific resources for the client (online communities can be helpful in areas where there are no bisexual support groups) and could help make space for the client to self-empower through advocacy. Next, I will present the results of the text by Hays and Erford.

**Hays and Erford.** The Hays and Erford text begins its discourse on bisexuality by describing a sexual orientation continuum that places bisexuality between two binary poles. They present research by Weinberg, Williams and Pryor (1994) concerning bisexual identity development. It is important to note here that the Hays and Erford text does make the point that the resultant continued uncertainty that punctuates the lack of closure in bisexual identity models is the result of “society’s lack of tolerance of bisexual identity.” There is a brief discussion of bisexual typology related to the sexual orientation continuum. When within-group variations are presented, it is essential that these

variations be contextualized according to treatment concerns. Thus, it is important to reiterate here that presenting a bisexual typology without presenting the variations in barriers and challenges across the types becomes a fruitless exercise in “sorting the bisexuals.” This exercise of “sorting” is typically not applied to other cultural identities. The model created by Weinberg, Williams and Pryor (1994) is presented by Hays and Erford as a first step in creating a working stage model of bisexual identity development.

A number of texts use case studies with the intention of developing skills as well as knowledge. The Hays and Erford text is a useful example of the case study. Its use as a tool for skill development is addressed briefly in the upcoming section on skills and in greater depth in the following section on the knowledge domain. The remainder of the case studies is analyzed along with other data associated with the knowledge domain. Hays and Erford provide a helpful example of skill development using case study that is replicated to varying degrees and with less success in 7 other texts. Only the McAuliffe text and the Ritter and Terndrup text directly address the reader on the subject of counseling skills related to bisexual-identified clients. I will now present results related to the Brammer text.

**Brammer.** The Brammer textbook provided a small amount of data that was simultaneously disturbing, and comforting. Consider the following: “I have worked with religious bisexuals who choose to live heterosexual lives. I believe this is possible and often fulfilling for them. However, we lack any coherent mechanism to identify who would be a good candidate for conversion therapy...” (p.295) The preceding quote seems

to suggest that while monosexual identity is rigidly fixed and therefore less likely to produce successful results in conversion therapy, individuals who identify as bisexual may experience successful results due to their identity being less “fixed.” This passage highlights the problem with referring to bisexual identity as “fluid” without referring to the social forces that oppress bisexuals as likely causes for identity management and code-switching to accommodate monosexual labels. This text also provides a number of case studies with individuals who have not self-labeled but who are behaviorally bisexual. In these cases, there is no discourse on the possibility of the client adopting a bisexual identity.

Interestingly, I received a response from a professor in the deep south concerning her choice to use supplemental materials in conjunction with this text:

“I am a new faculty at this institution as of Fall 2012. And here, faculty generally have little say on the textbook used in classes largely because the same textbook must be used in all classes with the same titles. That is different from the place I worked as faculty for three years prior to coming here and different from the institution where I earned my Ph.D. in counselor education. The textbook used in the multicultural counseling course here is not a good one. Students also complained about the textbook while in my class. You will see the title on the attached syllabus. So I did use supplemental material. Practically all of the supplemental materials came from Readings for Diversity and Social Justice edited by Maurianne Adams and others. There is a full chapter on heterosexism. And bisexuality is addressed directly and peripherally as part of the general discussion on sexual orientation. But one writing--only about 5 pages--I have students read, “Biphobia,” addresses bisexuality alone. I pick and choose readings throughout the book, and that’s one I choose because of its focus. Of special import is its discussion of how bisexuals have not been nor are always accepted within the homosexual community. I also show the film “Middlesex,” which talks about bisexuality to the degree that it states that it’s part of the spectrum or human continuum of sexual orientation.”

This quote is an eloquent example of a professor who recognizes the negative bias inherent in the text she is using making an effort to balance that bias using supplementary

materials. While it is comforting to know that this level of effort was made in this instance, one cannot assume that all instructors who have chosen this book or who are required to use this book are making similar additions to their course materials. The quote also highlights the limitations of data provided by syllabi. Professors are able to provide alternative stimuli for learning that do not show up on syllabi.

**Choudhuri, Santiago-Rivera and Garrett.** The textbook by Choudhuri, Santiago-Rivera, and Garrett provides a definition of bisexuality as well as a brief discussion of dual stigma and biphobia. The text presents bisexuality as existing on a continuum and addresses the uniqueness of bisexual identity development. However, like many of the other texts, it employs the term “fluidity” without addressing the social forces that stigmatize and oppress bisexuality and thereby make adopting a bisexual label fraught with anxiety and confusion. For example: “Based on the idea that sexuality can be fluid, bisexual sexual identity may not be consistent and may contradict across the life span.” The text also suggests that many bisexuals define their sexual orientation by the gender identity of their partner, rather than exploring how society pressures individuals into making this choice in identity management. This book also links bisexuality in the Black community with disease vectors for the HIV and AIDS viruses.

**Jun.** Jun provides a general definition of bisexuality. In addition, the text addresses more than once the idea that bisexuality challenges dichotomous thinking about sexuality. The text also mentions dual stigma and addresses bisexual people’s limited membership in and lack of validation by the queer community. The text describes how some lesbians and gays delegitimize bisexuals by suggesting they are confused or

experiencing a phase, or hoping to reap the benefits of heterosexism. The text does not describe the potential impact on bisexual people's wellness, nor does it make any suggestions concerning how to counter the oppression it describes.

**Vacc, DeVaney and Brendel.** The text by Vacc, DeVaney, and Brendel does make specific mention of bisexual persons, but the information provided is extremely limited. The authors assert that like sexual-minority persons of color, bisexual-identified clients encounter complex social challenges. A basic definition is provided and one sentence offers an explanation of dual stigma. The following passage focuses on the confusion that working with bisexual-identified clients may produce in the counselor, but does not provide any methods for working through that confusion:

Often bisexuality is seen as denial, intense homophobia, or simply as a transition period for a lesbian or gay person who is struggling with coming out. This is an especially challenging issue for the counselor, since this assertion is sometimes valid. As the person progresses in therapy, it is not uncommon for this identification to alter. (p.237)

It is important to note that the text is empathizing with the challenges bisexuality causes for the counselor here, rather than helping the counselor to be aware of and at peace with the complexity of bisexual identity development.

**Mio, Barker-Hackett, and Tumambing.** The text by Mio, Barker-Hackett and Tumambing approaches bisexuality through a case study alone. The case focuses on a Black-identified woman who describes her experiences with coming out in various social systems. The case is written in the first person, and describes the fear and internalized biphobia associated with coming out as bisexual, but does not label these experiences as biphobia or monosexism. The case describes an individual in the client's microsystem who rejects the client and dismisses the client's disclosure as "a fad." The case serves as



a “cautionary tale” concerning the ways not to be a disrespectful friend or counselor when talking with a bisexual-identified person. Unfortunately, the process commentary associated with this case is minimal and does little to guide counselors-in-training who may encounter a client who has been through a similar experience.

**Newman.** Similar to other authors, Newman provides a quote from a bisexual individual that illustrates embeddedness in biphobia and monosexism:

“Being bi isn’t a derogatory term at all . . . but that is not how I choose to identify. There are too many ‘queer’ marches and events that only include lesbians and gays; bi and transgender people are peripheral. That’s always the vibe I’ve gotten, and perhaps that is partly why it was so easy to say ‘I’m a lesbian. . . .’ (as quoted in Markowitz, 2000, p. 24).

However, the author does not use the quote as an invitation to discourse on biphobia and monosexism, and these issues are initially left unaddressed. In later passages, the author addresses label shifting and identity management with a greater level of complexity, incorporating discourse on the social forces that may produce identity management in the form of code-switching:

“Whether someone refers to herself or himself as gay, homosexual, bisexual, or queer may very much depend on the person to whom that individual is speaking and the nature of the interaction: Even when I was . . . by inclination and behavior bisexual, I spoke of myself as gay in most public contexts, preferring to ally myself with those whose orientation was entirely toward members of their own sex rather than risk being seen as some sort of straight person. (Zwicky, 1997, p. 25)” (p. 70)

In addition to addressing the social forces of oppression faced by bisexual individuals, the Newman text points out the paucity of research available on this population. Similar to other texts, the Newman text presents the work of Weinberg, Williams and Pryor (2003) when discussing bisexual identity development and describes the unique challenges faced by bisexual individuals in contrast with lesbian and gay

peers. In discussing dual stigma, the Newman text points out the lack of social confirmation and delegitimization commonly experienced by bisexual-identified individuals and groups. This is illustrated in the following quote:

“Self-proclaimed bisexuals initially face a period of confusion and doubt as they struggle with an identity that doesn’t fit into the two preexisting categories. This period can span years. Eventually, though, they come to see bisexuality as a plausible option and begin to apply the label to themselves.” (p. 71).

In contrast to the way that lesbian and gay identity models are frequently presented (with a focus on coming out to others), the Newman text describes bisexual identity development as culminating in self-labeling. Now that I have described the results associated with the Newman text, I will describe the results associated with the text by Ritter and Terndrup, which is the final textbook in the list of textbooks determined to be increasing visibility. Following the presentation of results on the Ritter and Terndrup text, I will summarize the results of the qualitative analysis of the textbooks that comprise the data set. Then, I will present results associated with the reports of supplemental materials used by instructors.

**Ritter and Terndrup.** The authors make a statement in the book’s introduction that indicates their understanding of the paucity of discourse on bisexual clients. Although the title of the book is not bi-inclusive, the information provided by the Ritter and Terndrup text is comparable to the information provided in the McAuliffe text. For the most part, the text is bi-affirmative. In a previous section, I pointed out that this textbook addresses skill development with regard to bisexual clients directly, and the only other text that does this is the McAuliffe text. This text would benefit from the addition of an activity directed at developing self-awareness and from the inclusion of a

case study involving a bisexual-identified client. Now that I have presented results associated with each of the textbooks included in the data set, I will summarize the results of these findings.

### **Summary**

The previous section presented the results of qualitative analysis of twelve textbooks that were determined, in varying degrees, to increase the visibility of bisexuality in counselor education. Analysis involved applying the multicultural counseling domains of self-awareness, knowledge, and skills as a lens. While quantitative analysis revealed that the textbook by Sue and Sue is the most frequently required reading listed on the syllabi that comprise the data set, qualitative analysis revealed that this text did not provide the most comprehensive opportunities to develop competency with bisexual clients. Qualitative analysis further revealed that only two textbooks out of twelve contained invitations to grow in all three domains with respect to bisexual-identified clients.

Each textbook in the data set was reviewed as a unit of analysis. With regard to the knowledge domain, across twelve textbooks, only two textbooks addressed the unique challenges faced by bisexual in depth. One of these textbooks was written specifically about lesbian and gay issues and is used as a secondary textbook to complement a more widely-distributed, broad-based multicultural counseling text.

There were some anomalies present within the qualitative results. One textbook provided three case studies which focused on bisexual identified clients, all of whom were described as cheating on their spouses. Another textbook suggested that bisexual-

identified clients are more likely than lesbian and gay clients to produce successful results in conversion therapy.

Only one textbook was found to provide comprehensive, moderately in-depth coverage of issues related to work with bisexual-identified clients. Suggestions were made for possible improvements to this textbook design. These included the addition of an example dialog between a counselor and a bisexual client and the addition of information about bisexual-specific resources such as BiNet USA, the Global Bisexual Network, the I am Visible Campaign, and the Bisexuals Organizing Project. Overall, qualitative analysis determined that the majority of textbooks in circulation—even those that provide some degree of bisexual visibility—are producing efforts that will likely generate only small degrees of limited competence with this population. The question remains whether the teachers who have constructed the syllabi that require the textbooks that are included in the data set provide other materials intended to facilitate the development of competence in this area. The reader will recall that the groups of data collected in this study consisted of syllabi, textbooks, and the responses to one closed/open ended question: “Do you use supplemental materials in your multicultural counseling course that are not shown on your syllabus that address bisexuality? If yes, please describe those materials briefly.” In the following section, I will present the responses to this inquiry.

### **Supplemental Materials**

This section presents the final grouping of data collected in association with this dissertation study. Respondents answered the question, “Do you use supplemental

materials in your multicultural counseling course that are not shown on your syllabus that address bisexuality? If yes, please describe those materials briefly.” A total of 39 responses to this question were received. These responses were analyzed and the results of this analysis are presented in Table 4.5.

Although 39 responses were received, this does not mean that 39 instructors use supplemental materials. Some of the respondents simply say, “No.” (See Table 4.5). The first cluster of data shows seven responses which indicated that no supplemental materials were used by the instructor. For purposes of this dissertation study, the term “supplemental materials” was defined inductively by the responses received. These responses did not show any pattern in terms of corresponding with a particular textbook. Others completely evade the question or do not answer the question that is posed. Related to this group, five responses reported materials that conflated bisexuality with other sexual identities, not materials directed specifically at bisexuality. When all of these responses are combined, twelve did not use supplemental materials. What about the other 27 responses? The most frequently used supplemental materials were print materials—articles and books ( $n = 9$ ). Articles were both scholarly (4) and news-related (5). The next most frequently used supplemental material was classroom lecture and discussion. One respondent who used classroom lecture and discussion self-identified as bisexual. A few respondents indicated the use of a film or video as well as process discussion, but only two respondents provided the name of the video in use. Three respondents described bringing panel participants to class, and one of these confirmed that at least one participant self-identifies as bisexual.

Table 4.4 Supplemental Materials Used to Produce Competence with Bisexual

## Individuals

Supplemental Material	Example Quote(s):
Cluster 1: Supplemental Invisibility	
None	<ol style="list-style-type: none"> <li>1. "No, I do not use any supplemental materials."</li> <li>2. "In response to your inquiry regarding supplementary materials, currently I do not use any other materials when addressing the topic of bi-sexuality in my multi-cultural course."</li> <li>3. "No, I don't use supplemental materials related to bisexuality."</li> <li>4. "This content is addressed in the text and by peripheral group-based case studies only."</li> <li>5. "I do not use additional materials to discuss bisexuality in the course. Human sexuality is however discussed throughout the course!"</li> <li>6. "No."</li> <li>7. "I do teach a multicultural counseling course. I, however, do not utilize any other materials beyond those provided in the syllabus."</li> </ol>
Use of some form of conflated term	<ol style="list-style-type: none"> <li>1. "<i>Counseling the Culturally Diverse</i> (Sue &amp; Sue) is the required text for the course and it speaks to all aspects of the GLBT population."</li> <li>2. "I do spend at least a class period speaking about sexual orientation as it relates to cultural understanding (so bisexuality is included in that lecture)."</li> <li>3. "I use supplemental materials such as video demonstrations that address GLBTQ issues in general and not necessarily single out bisexuality."</li> <li>4. "I have a lot of articles saved up and given to my students as additional readings. Many of these articles cover LGBTQ issues."</li> <li>5. "I have multiple supplemental materials that address bisexuality. One is a lgbtqq student of color manual that can be retrieved from: Georgia Safe Schools Coalition, 2009 <a href="http://www.georgiasafeschoolscoalition.org">www.georgiasafeschoolscoalition.org</a>"</li> <li>6. "I use a variety of sources regarding sexual orientation that I have combined in a ppt presentation over 100 slides."</li> <li>7. I do this as part of the full lecture on LGBT issues."</li> </ol>
Evades question entirely	<ol style="list-style-type: none"> <li>1. "I use poetry as supplemental material when I get to the topic of how ethnic disadvantaged cultural groups may be more creatively engaged in counseling services. The poetry I use is work by Langston Hughes for the African American culture, the poetry of Sandra Maria Esteves for the Latino American cultural experience. the poetry of new Asian American poets when discussing the life and challenges of clients from Asian backgrounds, and the poetry of Jewish poets when discussing the challenges and opportunities handled by Jewish clients in counseling."</li> </ol>

Uses the text	1. "I use the Sue text to discuss bisexuality and this text is listed in my syllabus."
Depend on students to bring it up/bring their personal experiences to class discussion	<ol style="list-style-type: none"> <li>1. "No, we don't use any supplemental materials to discuss bisexuality as part of our culture class. We almost always have a student who talks from experience and we have some religion and LGBT experiential exercises we discuss."</li> <li>2. "The topic is also discussed when students present on their multicultural genogram and when students discuss their cultural immersion projects."</li> <li>3. "The inclusion of additional material specifically on Bisexuality would come from either the current event issues that the students bring in, or the MCC minister, who has included this population in the other visits we have made over the years."</li> </ol>
Cluster 2: Visibility in Print	
News articles/other readings specific to bisexuality	<ol style="list-style-type: none"> <li>1. "Our program is unique in that we only train school counselors. To this end, in addition to the textbook, in class I used oral readings from the book <i>It Gets Better: Coming Out, Overcoming Bullying, and Creating a Life Worth Living</i>. This semester, one of the readings I used related to bisexuality; however, most of my teaching on sexual identity focused on gay and lesbian youth. We did discuss whether the current trend in which students identify as "bi-curious" is or is not reflected in the sexual identity models."</li> <li>2. "When I discuss sexual and affection orientation, I use some additional handouts from <i>Bisexual Option</i> by Klein and stories from <i>Bi Any Other Name</i> (edited by Loraine Hutchins and Lani Kaahumanu). Hope this is helpful!"</li> <li>3. "<i>Handbook of Counseling and Psychotherapy with Lesbian, Gay, Bisexual, and Transgender Clients</i> (2nd ed.) (2006). And Robyn Ochs' and Sarah Rowley's (2009) <i>Getting Bi: Voices of Bisexuals Around the World</i> (2nd ed.)."</li> <li>4. "I am a new faculty at this institution as of Fall 2012. And here, faculty generally have little say on the textbook used in classes largely because the same textbook must be used in all classes with the same titles. That is different from the place I worked as faculty for three years prior to coming here and different from the institution where I earned my Ph.D. in counselor education. The textbook used in the multicultural counseling course here is not a good one. Students also complained about the textbook while in my class. You will see the title on the attached syllabus. So I did use supplemental material. Practically all of the supplemental materials came from <i>Readings for Diversity and Social Justice</i> edited by Maurianne Adams and others. There is a full chapter on heterosexism. And bisexuality is addressed directly and peripherally as part of the general discussion on sexual orientation. But one writing--only about 5 pages--I have students read,</li> </ol>

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	<p>"Biphobia," addresses bisexuality alone. I pick and choose readings throughout the book, and that's one I choose because of its focus. Of special import is its discussion of how bisexuals have not been nor are always accepted within the homosexual community. I also show the film "Middlesex," which talks about bisexuality to the degree that it states that it's part of the spectrum or human continuum of sexual orientation."</p> <p>5. "I use some of Jeffrey Eugenides (2002). <i>Middlesex</i>. New York: Picador. [chapter 4, available on Moodle] Roger N. Lancaster (2003). <i>The Trouble with Nature</i>. Berkeley, CA: University of California Press. Paul Joannides (2009). <i>Guide to Getting It On</i> these bridge in to discussions of bisexuality."</p>
Scholarly articles specific to bisexuality	<p>1. "journal articles."</p> <p>2. "In the multicultural course that I teach I use an article that is listed by last name on the syllabus."</p> <p>3. "Attached is the syllabus I use with supplemental readings. The second resource addresses bisexuality."</p> <p>4. "These are materials as resources that encourage students to consider research and personal narratives regarding experiences of individuals who experience concerns relative to their sexuality in a world that contains homophobic, biphobic, transphobic, and heterosexist attitudes that impact the well-being of individuals who are marginalized by sexual and/or gender orientation. I do not have a specific evening of discussion about bisexuality but instead spend a three hour evening talking about the intersect between gender, sexuality, attractional affection and mental health and our role as counseling professionals to be competent helpers and advocates for a historically and presently marginalized portion of the population. Without fail, this always ends up being the most intense and lively evening of the class due to the homophobic attitudes (often buried) of the students in class. "bisexual identity development models (e.g. Layer Cake Model of Bleibereg, Fertmann, Godino &amp; Todhunter, 2005; 4 stages of Bisexual Identity Development by Weinberg, Williams &amp; Pryor, 1994).  Bleiberg, S. Fertmann, A., Todhunter Friedman, C., &amp; Godino, A. (2005). <i>The Layer Cake Model of Bisexual Identity Development: Clarifying Preconceived Notions, Campus Activities Programming</i>  Brown, T. (2002). A proposed model of bisexual identity development that elaborates on experiential differences of women and men. <i>Journal of Bisexuality</i>, 2 (4), 67-92.  Griffin, K.L. (2009). If it's Wednesday, I must be gay, and other thoughts on bisexual identity development. <i>Group</i>, 33(3), 245-256.  Israel, T., &amp; Mohr, J. (2004). Attitudes towards bisexual women and men: Current research, future directions. In R. Fox (Ed.), <i>Current</i></p>

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	<p><i>research on bisexuality</i> (73-92). New York: Harrington Park Press.</p> <p>Klein, F. (1993). <i>The bisexual option</i> (2nd Eds.). New York: The Hawthorn Press.</p> <p>McLean, K. (2008). Inside, outside, nowhere: Bisexual men and women in the gay and lesbian community. <i>Journal of Bisexuality</i>, 8(1), 63-80.</p> <p>Petford, B. (2005). Therapy from the fence: Therapists who self-identify as bisexual and their approach to therapy. <i>Journal of Bisexuality</i>, 5(4), 19-33.</p> <p>Weinberg, M., Williams, C., &amp; Pryor, D. (1994). <i>Dual attraction: Understanding bisexuality</i>. New York, NY: Oxford University Press."</p>
Resources specific to bisexuality	No reports (examples would have been: BiNet USA, I Am Visible Campaign, Global Bisexual Network)
Cluster 3: Visibility in Action	
Films	<ol style="list-style-type: none"> <li>1. "[I use] the film 'Color of Fear' series where the participants talk about homosexuality and one discloses his bisexuality. We follow the film (42 minutes) with discussion. Not only does Viktor state that he's bisexual, the Japanese-American man discloses that he is attracted to some men ... so this gives us more to talk about. :)"</li> <li>2. "I do not specifically detail the videos in the syllabus but I indicate that videos and other materials will be used to enhance learning."</li> <li>3. "This video also linked well this term -- <a href="http://www.upworthy.com/dear-straight-people-we-have-to-talk?g=2&amp;c=upw1">http://www.upworthy.com/dear-straight-people-we-have-to-talk?g=2&amp;c=upw1</a>"</li> </ol>
Powerpoint addresses bisexuality	<ol style="list-style-type: none"> <li>1. "I copied the power points into the email – this is the visual I use when I go into it in more detail."</li> </ol>
Classroom Activity	<ol style="list-style-type: none"> <li>1. "One of the class activities we do the week of Gender and Sexual-Orientation is that students read a list of scenarios and then are asked to identify whether the person described would be classified as gay/lesbian, straight, or bi-sexual (where in most situations the behavior and the self-identification are not congruent). Once students fill the worksheet out individually we have a spirited discussion as to what it means, and who determines, sexual orientation."</li> </ol>
Guided class discussion/mini lecture	<ol style="list-style-type: none"> <li>1. "We discuss how being bisexual adds another layer of complexity to a person's cultural identity, as it is one more identity than being gay or lesbian, along with whatever other cultural/belief system/experience identities they may have, and how homophobia may impact those who are bisexual."</li> <li>2. "The Dimension of sexual orientation mentioned in the syllabus, covers bisexual issues. In other words, I cover the dimensions of sexual orientation (I believe it says LGB, transgender and intersex on</li> </ol>

- 
- that syllabus) and I do talk about it in class.”
3. “No supplementary materials other than my oral presentation based on my knowledge about bisexuality.”
  4. “I specifically address bisexuality in class lecture and discussion when we discuss LGBT issues.”
  5. “My syllabus is attached. In class I do specifically discuss bisexuality and the unique social position/challenges experienced by people who are bisexual.”
  6. “The discussion is vital because of the silencing of bi- people that comes both from heteronormativity and the binary sustained by the gay/notgay toggle.”
- 

Table 4.4 presents the entire data set comprised of the reports of supplemental materials supplied by the authors of the syllabi. Thirty-nine instructors responded to my request for responses to the following closed/open ended question: *Do you use supplemental materials in your multicultural counseling course that are not shown on your syllabus that address bisexuality? If yes, please describe those materials briefly.* Analysis revealed three broad clusters which are shown in Table 4.4. These are: *supplemental invisibility, visibility in print and visibility in action.* Within these three clusters, sub-clusters were identified.

The first broad cluster was referred to as *supplemental invisibility*. Out of a total of 39 reports of supplemental materials received during data collection, the largest number of responses were classified as not contributing to visibility of bisexuality: a total of 19 reports of supplemental materials (48%) fit the *invisibility* cluster. The *invisibility* cluster included four sub-clusters. The largest sub-cluster, *invisible*, was comprised of responses from instructors who reported including no supplementary materials specific to bisexuality. Another sub-cluster, *conflated visibility*, included responses from instructors who did not indicate something specific about bisexuality, but instead reported using a

conflated term, such as “LGBT.” Yet another sub-cluster, *evasive*, included one respondent who composed a complex response regarding the racial diversity represented in the course curriculum, but even when prompted with follow-up emails would not address the subject of sexuality. This sub-cluster also included an individual who pointed out the required text on the syllabus. The fourth sub-cluster, *student-generated visibility*, is comprised of responses that indicate an instructor depends on the possibility that a bisexual-identified student will speak from his or her experience in class or on students to choose to cover bisexuality as part of their presentations.

The second broad cluster, *visibility in print*, was comprised of two sub-clusters. The first sub-cluster, *scholarly print*, included scholarly articles and publications and the second sub-cluster, *lay print*, included newspapers and other lay publications. Out the total 39 responses, 9 instructors (approximately 23%) reported using supplemental print materials (*visibility in print*) to increase competence with bisexual-identified clients. This cluster included a report from an instructor who is required to teach using a book that suggests that bisexual-identified clients may produce more successful results in conversion therapy than lesbians and gays; the instructor makes extra efforts to balance the problematic information in the text with affirmative information in supplemental materials. While this situation is certainly not ideal, this report—along with others in the final two broad clusters—demonstrates that some counselor educators have made conscious, proactive efforts to provide accurate information about bisexuality even when required to use problematic textbooks.

The third cluster, *visibility in action*, included classroom activity, power points, classroom discussion and lecture, classroom film viewing with process commentary, panel participants, guest lectures, and disclosure by a bisexual-identified professor. From the total 39 responses, 11 (28%) were found to take some sort of action in the classroom directed specifically at generating competence with bisexual-identified clients.

When the two broad clusters *visibility in print* and *visibility in action* are combined to a mega-cluster of *visibility*, they represent 51% the total number of responses, which is only slightly larger than the *invisibility* broad cluster, which constitutes 49% of the responses. Thus, about half of the respondents provided information that indicated they did not include supplemental materials directed at increasing competence with bisexual-identified clients, and about half of the respondents provided information that they did provide some sort of supplemental material directed at increasing competence with this population.

Responses were analyzed according to their relationship to the textbooks and no patterns were found with regard to use of supplemental materials and textbook choice. Respondents' choice to provide supplemental materials does not appear to be associated with a particular textbook or set of textbooks except in the case of one respondent who explicitly chose to add supplemental materials to mitigate the problematic discourse in the textbook. Supplemental materials used in classrooms have the potential to address populations that continue to be marginalized in the textbooks that are required reading for the courses.

### **Summary**

In this chapter, I have presented the results of data collection and analysis. Three sets of data were presented: syllabi, textbooks, and supplemental materials. Each data set was analyzed with respect to bisexual visibility. Data that were coded as providing bisexual visibility were first analyzed according to the tripartite model of multicultural counseling competency and then analyzed to determine the essence of what was being communicated about bisexuality and about bisexual-identified clients. Now that I have presented the results of this dissertation study, I will present in chapter 5 a discussion of these results.

## **CHAPTER V**

### **DISCUSSION**

#### **Introduction**

In this chapter, the study's purpose, methodology, and research questions are restated to help the reader recall the overall focus of the dissertation. The results of the study are discussed and contrasted with existing literature, and are illustrated with examples of from the syllabi, textbooks and supplemental materials that constitute the data set. I present a theoretical explanation of the findings, along with implications for counseling and counselor education and supervision. Limitations and delimitations of the current study are described, and suggestions for future research are made. Finally, I present my reflections on the experience of conducting the study.

#### **The Purpose and Methodology of the Study**

As a bisexual-identified counselor educator, I chose to pursue a dissertation topic that would be relevant to bisexual-identified clients and to counselor education and supervision. Based on my own experiences in counseling and the anecdotal stories I have heard from other bisexual-identified people, it became obvious to me that the paucity of information on bisexuality in counselor education has resulted in lost opportunities for providing competent services to bisexual-identified clients. By applying the lenses of the standards for accreditation developed by CACREP, the ACA Code of ethics, the multicultural competencies developed by Arredondo et al. (1996), the advocacy competencies and queer theory, this dissertation study has made a case for visibility of bisexuality in counselor education. This led to the question of whether CACREP-

accredited programs are currently providing a level of bi-visibility that will result in counselor competence with this population. I wondered, “How are CACREP-accredited programs currently teaching counselors-in-training to work with bisexual-identified clients?” and “What information are students in CACREP-accredited programs given with regard to counseling individuals experiencing problems related to their bisexuality?” Because most CACREP-accredited programs include a course that focuses on multicultural counseling and because this is typically the course where issues related to sexual identity are addressed, I chose to focus on multicultural counseling course content. Therefore, in this study, I explored the syllabi, textbooks, and supplemental materials used by counselor educators who teach multicultural counseling courses in CACREP-accredited counselor education programs across the United States, specifically concerning evidence of efforts made to develop competence with bisexual-identified clients. Because there is no published research on the topic of how bisexuality is presented to counseling trainees in CACREP-accredited counselor education programs, and because such a study requires attention to both magnitude and content, a mixed-methods content analysis on the topic of bisexuality was conducted to describe, analyze and interpret a sample of materials collected in association with 100 multicultural counseling courses.

Three research questions guided the study:

1. In what ways and to what extent is bisexuality addressed in courses that are intended to help counselors-in-training become culturally competent (i.e., in multicultural counseling courses)?

2. How is bisexuality presented in the textbooks and supplementary materials used in multicultural counseling courses?
3. What information is provided in multicultural counseling courses about counseling bisexual clients?

Data consisted of syllabi, textbooks, and reports of supplemental materials provided by the creators of the syllabi.

### **Comparison of Study Results to Literature**

In this section, the results of the study are compared to the existing literature review presented in Chapter 2 of this dissertation study. Throughout analysis of the data, the available scholarly discourse on bisexuality was used as a benchmark for information transmitted to counselors-in-training. Three broad patterns emerged: *Invisibility*, *Limited Visibility*, and *Increasing visibility*. These patterns will now be discussed in relation to the literature.

Arredondo et al. (1996) identified three domains essential to producing cultural competence in counselor education: self-awareness, knowledge, and skills. Thus, materials provided to counselors-in-training concerning culturally marginalized groups are typically combined to generate competence in these three domains. A review of the literature demonstrated that bisexual-identified individuals have experiences that are both related to and distinct from the experiences of their lesbian and gay peers, and that cultural competence with this population is unlikely to arise from discourse pertaining to lesbian and gay clients without specifying the unique needs of bisexual-identified clients. Some of the issues unique to bisexual-identified individuals include: dual stigma,



sexualization, delegitimization, biphobia, monosexism, lack of community, higher incidence of poor mental health, higher incidence of poor physical health and access to health care, higher incidence of substance use, and more complex identity management. Overall, results confirmed that bisexual visibility is limited and inconsistent across the syllabi, textbooks, and supplemental materials currently in use in CACREP-accredited multicultural counseling courses.

### **Visibility: Syllabi**

As described in Chapter 4 of this dissertation, 100 syllabi were reviewed. There were 14 syllabi that made no mention of sexual identity at all (*invisibility*), there were 52 syllabi that employed the use of some form of generalist term, such as “sexual minorities,” “non-heterosexuals,” and “sexual orientation” (*limited visibility I*), and 34 syllabi included bisexuals in a list or letter strand that began with lesbian and gay or gay and lesbian (*limited visibility II*). One possible update to the current approach used in the topical outlines that comprised the data set could be accomplished by making some mention of “the unique needs of bisexual clients” (perhaps as a subheading under “sexual minorities” or “LGBTQQIA concerns”). This minor change is a first step instructors could make when shifting to a bi-affirmative stance. The next sub-section will discuss the results of analyzing the 30 textbooks that constituted the data set.

### **Visibility: Textbooks**

The next step of analysis involved generating from the syllabi a comprehensive list of 30 textbooks. The first stage of textbook analysis showed that five textbooks provided no information specifically about bisexuality (*invisibility*). Thirteen textbooks

conflated all references to bisexuality with references to lesbians and gays (*limited visibility*). Another 12 of these textbooks provided some amount of information specifically about bisexuality (*increasing visibility*). Because this dissertation study focused on what is communicated specifically about bisexuality and bisexual-identified clients, the 12 textbooks shown to be increasing visibility were further analyzed using the three primary domains of the multicultural counseling competencies (Arredondo et al., 1996) as a lens. From this analysis, two textbooks were shown to make efforts at facilitating development in all three multicultural domains. In addition to these two texts, one textbook made efforts to facilitate skills as well as knowledge but did not include a self-awareness component. In terms of the knowledge domain, the depth and breadth represented in the textbooks could be subdivided once again into categories of visibility.

Four texts that had been coded *increasing visibility* formed a sub-cluster that was also labeled *increasing visibility*. One of these texts was sub-coded as problematic because it repeatedly portrayed bisexual individuals cheating on their spouses without generating process questions around the forces of social oppression that may have been at work in the cases, and without providing any cases with bisexual identified clients in healthy relationships who were experiencing problems related to their bisexuality (e.g., discrimination at work by heterosexuals and lesbian- and gay- identified co-workers, feeling isolated/not feeling a sense of community, feeling pressure to manage their identities). Four texts formed a sub-cluster of *moderately increasing visibility*, and two of these texts are sub-coded partially problematic because they emphasize a relationship between bisexuality and the spread of HIV and AIDS. The final sub-cluster of textbooks,

*dimly increasing visibility*, included one text that was sub-coded problematic.

This particular text suggests that because bisexual-identified clients are “less fixed” than lesbian- and gay- identified clients, and that as a result of sexual fluidity, bisexual people can be happy living heterosexual lives. The text implies that for these individuals, conversion therapy is appropriate and can help their religious identities dominate their sexual identities. This is particularly alarming considering that conversion therapy, also known as Sexual Orientation Change Therapy (SOCT), has been officially deemed unethical by the American Psychological Association and by the American Counseling Association.

In the textbook data set, it was determined that the textbook in widest circulation (Sue and Sue, represented on 45% of the syllabi) does not provide adequate information about bisexuality or bisexual-identified clients. In addition to its limitations concerning the knowledge domain of counseling competency, the Sue and Sue textbook does not provide opportunities to develop self-awareness or skills with respect to this population.

The textbook determined to provide the most comprehensive and in-depth discourse on bisexuality and bisexual-identified clients was the McAuliffe text (represented on 7% of the syllabi) which addresses all three multicultural counseling domains.

A number of texts were found to have problematic discourse concerning bisexuality and bisexual individuals. One text is affirmative about using conversion therapy with bisexual-identified clients, one text provides three case examples wherein bisexual clients are cheating on spouses, and 14 out of 30 textbooks (47%) provide

information that links bisexuality with the spread of the HIV and AIDS viruses. If textbooks find it unavoidable to make a connection bisexuality with HIV and AIDS, it may be helpful to include some discourse on social justice related to creating bi-affirmative spaces so that bisexual people feel welcome when accessing health care. It may also be helpful to create discourse related to destigmatization of bisexuality so that individuals who are behaviorally bisexual are increasingly able to disclose safely without fear of losing relationships.

### **Visibility: Supplemental Materials**

The final step in data analysis involved reviewing the reports of supplemental materials supplied by the authors of the syllabi. Forty instructors responded to my request for responses to the following closed/open ended question: *Do you use supplemental materials in your multicultural counseling course that are not shown on your syllabus that address bisexuality? If yes, please describe those materials briefly.* Analysis revealed three broad clusters: *supplemental invisibility*, *visibility in print* and *visibility in action*. Within these three clusters, sub-clusters were identified.

The first broad cluster was referred to as *supplemental invisibility*. Out of a total of 39 reports of supplemental materials received during data collection, the largest number of responses were classified as not contributing to visibility of bisexuality: a total of 19 reports of supplemental materials (48%) fit the *invisibility* cluster. The *invisibility* cluster included four sub-clusters. The largest sub-cluster, *invisible*, was comprised of responses from instructors who reported including no supplementary materials specific to bisexuality. Another sub-cluster, *conflated visibility*, included responses from instructors

who did not indicate something specific about bisexuality, but instead reported using a conflated term, such as “LGBT.” Yet another sub-cluster, *evasive*, included one respondent who composed a complex response regarding the racial diversity represented in the course curriculum, but even when prompted with follow-up emails would not address the subject of sexuality. This sub-cluster also included an individual who pointed out the required text on the syllabus. The fourth sub-cluster, *student-generated visibility*, is comprised of responses that indicate an instructor depends on the possibility that a bisexual-identified student to speak from their experience in class or on students to choose to cover bisexuality as part of their presentations.

The second broad cluster, *visibility in print*, was comprised of two sub-clusters. The first sub-cluster, *scholarly print*, included scholarly articles and publications and the second sub-cluster, *lay print*, included newspapers and other lay publications. Out the total 39 responses, 9 instructors (approximately 23%) reported using supplemental print materials (*visibility in print*) to increase competence with bisexual-identified clients. This cluster included a report from an instructor who is required to teach using a book that suggests that bisexual-identified clients may produce more successful results in conversion therapy than lesbians and gays; the instructor makes extra efforts to balance the problematic information in the text with affirmative information in supplemental materials. While this situation is certainly not ideal, this report—along with others in the final two broad clusters—demonstrates that some counselor educators have made conscious, proactive efforts to provide accurate information about bisexuality even when required to use problematic textbooks.

The third cluster, *visibility in action*, included classroom activity, power points, classroom discussion and lecture, classroom film viewing with process commentary, panel participants, guest lectures, and disclosure by a bisexual-identified professor. From the total 39 responses, 11 (28%) were found to take some sort of action in the classroom directed specifically at generating competence with bisexual-identified clients.

When the two broad clusters *visibility in print* and *visibility in action* are combined to a mega-cluster of *visibility*, they represent 51% the total number of responses, which is only slightly larger than the *invisibility* broad cluster, which constitutes 49% of the responses. Thus, about half of the respondents provided information that indicated they did not include supplemental materials directed at increasing competence with bisexual-identified clients, and about half of the respondents provided information that they did provide some sort of supplemental material directed at increasing competence with this population.

Responses were analyzed according to their relationship to the textbooks and no patterns were found with regard to use of supplemental materials and textbook choice. Respondents' choice to provide supplemental materials does not appear to be associated with a particular textbook or set of textbooks except in the case of one respondent who explicitly chose to add supplemental materials to mitigate the problematic discourse in the textbook. Supplemental materials used in classrooms have the potential to address populations that continue to be marginalized in the textbooks that are required reading for the courses. This requires that instructors critically review the textbooks they use so that

they are able to fill in gaps with respect to the tripartite model of multicultural competency.

In reviewing the data, I asked myself what bisexual inclusion might look like. Ideally, supplemental materials would include opportunities for developing self-awareness and skills as well as knowledge. I will describe some examples from my own work as a counselor educator. When I work with students on learning about sexual identity, I like to have process discussions where I ask students to talk about the messages they remember receiving about bisexuality. I ask if they know anyone who identifies as bisexual and if their bisexual contacts talk about their bisexuality with them. We make lists concerning stereotypes and assumptions that people sometimes make about bisexual people and we talk about the impact these stereotypes and assumptions might have when allowed to impact the therapeutic relationship unaddressed. Throughout the semester when I give students opportunities to practice skill development using case analyses, I include cases with bisexual-identified clients who present with a range of issues. Sometimes when a case is presented with a monosexual client, I ask the question, how might this case look different if the client were bisexual? When discussing a case involving a bisexual client, the reverse question is posed. Students are also given opportunities to practice working with bisexual-identified clients through role play and fish bowl activities. These activities are interspersed throughout the semester and integrated with discussions of intersectionality of multiple identities as well as discussions concerning sexual identity. This level of bisexual inclusion was not represented in the data set.

### **Research Questions**

In terms of answering the research questions, results provided a number of insights. Concerning the first research question, “In what ways and to what extent is bisexuality addressed in courses that are intended to help counselors-in-training become culturally competent (i.e., in multicultural counseling courses)?” I found that bisexual visibility is neither comprehensive nor widespread in courses that are designed to help counselors-in-training become culturally competent. As described in Chapter 4, bisexuality is highly visible and addressed in a comprehensive way with respect to facilitating self-awareness, knowledge and skills in only two textbooks, which are listed as required reading on 14% of the syllabi in the data set. In the remaining textbooks bisexuality is invisible or limited in visibility. The textbook that is in widest circulation (45% of syllabi in the data set list this book as required reading) does not address self-awareness or skills relevant to work with bisexual-identified clients and provides a limited amount of knowledge with regard to this population. Thus, results showed that bisexuality is sometimes visible in the syllabi, textbooks and supplemental materials used in multicultural counseling courses, but where visibility exists, it is inconsistent, sometimes problematic and usually not applied to the multicultural competency domains of self-awareness and skills.

Analysis related to the next research question, “How is bisexuality presented in the textbooks and supplementary materials used in multicultural counseling courses?” revealed that information about bisexuality is typically presented along with other information about sexual identity in the textbooks and supplemental materials used in



multicultural counseling courses. Although sexual identity was sometimes shown to be completely invisible, the strongest trend was to conflate bisexual identity with lesbian and gay identity. In some materials bisexuality was visible as both distinct from and related to lesbian and gay identity, with variations in degree of coverage that ranged from *dim visibility* to *increasing visibility*. Some instances where bisexuality is visible were shown to be problematic. Issues that were addressed to varying degrees included: bisexual identity development, bisexual code-switching and identity management, external biphobia, common stereotypes applied to bisexual-identified individuals, delegitimization and dual stigma along with the associated internalized biphobia and the resultant fear of isolation, alienation, and rejection, the complexity of identity development and coming out, the relative fluidity and stability of the label, the lack of community, lack of social confirmation, and having assumptions made about one's sexual identity based on the gender identity of one's partner.

The third and final research question, "What information is provided in multicultural counseling courses about counseling bisexual clients?" This question is related to the multicultural competency skill domain. No evidence of skill development appeared in the syllabi or supplemental materials that comprised the data set. Analysis showed that two textbooks (6%) out of 30 made some form of non-problematic effort at addressing skill development with bisexual-identified clients directly. One textbook approached skill development by providing a systematic approach to helping clients explore the impact of biphobia and heterosexism in their lives. Another textbook approached skill development as applied to helping bisexual-identified clients come out

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in pre-existing relationships and negotiating the impact that disclosure may have on pre-existing relationships. Although one textbook provided case studies along with process questions that were directed at skill development with bisexual-identified clients, the cases provided were problematic and the associated process questions were problematic as well. Although other textbooks provided cases with bisexual-identified clients and although case analysis would be one way of modeling appropriate counseling self-awareness, knowledge and skills with bisexual-identified clients, no textbooks used this strategy with systematic process questions directed at producing tripartite cultural competence with this population. Further, analysis revealed that case studies were generally riddled with monosexist bias and unaddressed instances of external and internalized biphobia. For these cases to be useful in deconstructing the oppression frequently encountered by bisexual individuals, monosexist bias and other oppressions need to be explicitly addressed. Now that I have discussed the results of the study, I will describe some of the limitations that may have had an impact on the results of this study.

### **Limitations**

First, I will describe limitations associated with the study's design, and then I will describe limitations associated with researcher bias.

**Design Limitations.** Related to methodology, there are some limitations to this type of design. The first limitation is related to the constructivist nature of counselor education. This design cannot account for the constructivist alchemy that occurs between students and content.

Because most, if not all, counseling courses are built on a constructivist foundation, student discourse is frequently the impetus by which most subjects such as bisexuality are addressed. It is possible that some students will choose to do presentations on bisexuality. Three instructors indicated that this was their method of addressing bisexuality. This method does not guarantee bisexual visibility and therefore was not weighted heavily in the code books. Thus, a strong dependence on the constructivist nature of counselor education does not provide assurance that marginalized groups with highly stigmatized labels will be addressed. Within the limitations of this design, it was impossible to determine whether instructors who used this approach would address bisexuality during the course of a semester, and therefore these responses were coded *invisibility* with the potential for visibility and were given little weight during data analysis. Thus, this design was concerned with the steps instructors took to ensure that trainees would develop competence with this population rather than the potential opportunities instructors might provide for students to develop competence with marginalized populations based on student interests.

The next limitation of this study is related to the nature of content analysis. A content analysis is not predictive. It can only provide a snapshot of what is happening at the time the data are collected. Therefore, this content analysis cannot account for discourse created in vivo, nor can it account for counselor educators who might have responded to the request for syllabi and the open-ended question regarding supplemental materials by adjusting their content to be more inclusive of bisexuality. The design of the study did not account for this possibility; however, informal conversations with some

instructors indicated that this may have been the case in at least a few reports.

This is related to the potential for selection bias. It is important to recognize in using a data sample such as this that there may be selection bias around the syllabi that are returned because these syllabi were returned by individuals who were willing to respond to my request and therefore may in some way believe in the importance of this research. Supporting this, several instructors made comments through email regarding the value of this study. This could mean that these are respondents who are more likely than others who did not respond to my request to address bisexuality in some way.

Another obvious limitation associated with this study is that I do not have data on every CACREP-accredited program in the country. With over 600 programs accredited by CACREP, I was able to retrieve a sample of 100 syllabi and 39 reports of supplemental materials. The design provided some balance to this potential data bias by including all texts that are represented in the syllabi. The underlying rationale is that there would be data saturation with regard to the textbook portion. This means that there was a point at which no new textbook titles were being collected from the data (syllabi). At that time, the list of textbooks collected from the sample was considered to be representative of the larger population of textbooks referenced on multicultural counselor education syllabi. In the textbook portion of the data sample this was confirmed, with thirty textbooks constituting the data set and 19 textbooks referenced on more than one syllabus. Nine textbooks were referenced on more than 5 syllabi. However, with this design it is still possible that some textbooks were not represented by the sample, and it is possible that some supplementary materials were left out.

Another limitation relates to how I chose what to include in the data set and what to leave out. Once the first analysis of textbooks had been completed, it became obvious that another way of approaching the data would have been to have examined all incidents where bisexuality is reported as conflated with lesbian and gay identity. As a future study, this may provide insight regarding how to provide information specifically about bisexuality while also providing information about lesbian- and gay-identified clients. In the very first code book associated with this study, these incidents were coded as “missed opportunities.” It might be helpful to authors of future textbooks to provide feedback related to these “missed opportunities.” Integrating awareness specific to bisexuality in a chapter that is laden with “missed opportunities” could be an easy and effective way of redressing bisexual invisibility. Although this approach may be valuable for future research, this dissertation study focused only on non-conflated information provided specifically about bisexuality. Now that I have described the limitations associated with the study’s design, I will address the limitations of the study associated with researcher bias.

#### **Limitations associated with inexperienced researcher and researcher bias.**

Another limitation to this study involves the researcher’s lack of experience and her bias as a bisexual-identified counselor educator. I was the sole researcher working on this project and as a new researcher, I am learning by doing. Each time I practice research, I am better able to see the inherent structure in the data set more clearly. However, this dissertation study involved three separate sets of data, and juggling this amount of information was challenging to me as an inexperienced researcher. Three factors could

have impacted this situation for the better: having access to a research assistant, having funding to pay a research team, and having more time to spend analyzing the data.

Another limitation or challenge related to the use of content analysis is researcher bias, as in other data analysis strategies. As described in Chapter 3 of this study, researcher bias has the potential to impact this study in at least three ways: bias embedded in the type and form of data selected for analysis, and bias embedded in coding schemes (codebooks), and bias in interpretation (analysis) of data. Regarding bias associated with the type and form of data selected for analysis: I chose to seek data from every CACREP-accredited program in the United States, I analyzed every syllabus retrieved, as well as every textbook referenced in the syllabus data set and every report of supplemental materials that was received. Still, bias could have been transmitted through the way that the request for syllabi and reports of supplemental materials was worded. Regarding the other two potential risks—bias associated with coding schemes and also bias associated with interpretation of data—it is possible that some of the coding schemes and interpretations of data were influenced by my status as a bisexual-identified counselor educator.

Further, another potential limitation to this study related to coding involved choosing what to code once data were selected, how much weight to assign to codes (i.e., do codes carry equal values in a codebook?), assessing the value of missing data, and insufficient attention to contextual information. As mentioned earlier, it was necessary to limit this dissertation study to information specifically directed at bisexuality. This means

that I left out a great deal of discourse related to instances where bisexuality is conflated with lesbian and gay identity. It is not clear whether counselor educators help students in vivo translate information about lesbian- and gay-identified clients into information that applies to bisexual-identified clients.

Concerning the weight of codes, I used an inductive process when choosing how to weight the codes. For example, I chose to rank bisexual visibility in each of the data sets and then create codes associated with three different levels of weight across each data set. *Invisibility*, *dim visibility*, and *increasing visibility* are codes that were used that incorporated weight into the codes. Within these code sets, clusters were formed and the theme of problematic information versus non-problematic discourse emerged.

Once again, a limitation to this study is that it is not possible to assess the value of missing data. Although the sample size is fairly large compared to the size of the total population, it is not possible to know how data from the remaining five hundred CACREP-accredited programs may have impacted the results of this study. Finally, it was not possible to address all contextual information that may have impacted the results of this study. For example, I wonder if the age or number of years in the field impacts whether or not a counselor educator is more or less likely to address bisexuality in their course. I also wonder if the program from which the counselor educator received her or his doctorate has an impact on bisexual inclusion. I also wonder about the extent of departmental pressures to address or not address certain groups having an impact on bisexual visibility. With all of these opportunities for bias to impact this dissertation study, it was necessary to provide some mechanism for independent review. As one

method of dealing with bias and increasing trustworthiness, I chose to engage an auditor to review this dissertation study.

**External auditor.** To deal with the potential impact of my biases on this study, I enlisted an auditor. The auditor of this dissertation study is a straight-identified, third-year doctoral student in counselor education who has taken advanced research courses. I requested that the auditor associated with this study review all stages of dissertation writing (with particular attention to data analysis) for embedded biases associated with my status as a bisexual-identified counselor educator. The auditor was provided with an audit trail which contained the dissertation proposal and follow-up chapters presenting results and discussion. The audit trail also contained data sets, code books, and my reflective/reflexive memos. Review by the auditor determined that my status as a bisexual-identified counselor educator had informed but did not negatively impact the process of analysis.

**Problems that arose during data collection and data analysis procedures.** As mentioned in an earlier section, some problems arose during data collection and analysis were associated with my experience level as a researcher in relation to balancing three different data sets using quantitative and qualitative lenses. I dealt with this issue by keeping the data organized in Word files, by making conceptual maps as I analyzed the data, and by using reflexive/reflexive memoing to keep track of my experience of the data. Now that I have reviewed the limitations of this dissertation study, I will describe the potential implications of this study with regard to counselor education.



### **Implications of the Study**

Despite a paucity of counselor education research on bisexuality, a body of literature indicates that bisexual individuals have experiences that are both distinct from and related to the experiences of their lesbian- and gay-identified peers (Bronn, 2001; Bostwick, Boyd, Hughes & McCabe, 2010; Diamant, Wold, Spritzer, & Gelberg, 2000; Gebhard & Johnson, 1979/1998; Jorm, Korten, Rodgers, Jacomb, and Christensen, 2002; King, Semlyen, Tai, Killaspy, Osborn, Popeluk, & Nazareth, 2008; Kinsey et al 1948/1998; 1953/1998; Koh & Ross, 2006; Rust, 2000; Saewyc et. al., 2007). As shown in Chapter 2 of this dissertation, attention to and inclusion of the needs of marginalized and disenfranchised groups is reinforced by CACREP, the ACA Code of Ethics, the multicultural competencies endorsed by the AMCD, the competencies endorsed by ALGBTIC, and the advocacy competencies created by Lewis et al. (2003). Despite the principles of inclusion that are infused throughout the counseling profession, this dissertation study provides evidence that bisexuality continues to be largely marginalized in the discourse focused on sexual minorities in counselor education. While some counselor educators do make efforts at bisexual inclusion, this trend is not consistent nor is it consistently reinforced in the multicultural counseling textbooks which frequently provide the structure for coursework. Thus, this dissertation study serves as a call to the profession for increased bisexual invisibility. Future editions of established textbooks can make efforts at developing counselor self-awareness, knowledge and skills with respect to bisexuality. Counselor educators can be conscious of bisexual inclusion when choosing supplementary materials such as films, reading materials, and panel participants. In

addition, counselor educators can prepare process questions related to classroom experiences that are directed at developing competency with bisexual-identified clients. Thus, the implications of this study are directed at increasing visibility of bisexuality in counselor education.

**Suggestions for future research.** Future studies could be directed at determining whether increasing bisexual visibility with regard to developing self-awareness, knowledge and skills impacts bisexual clients' experiences in therapy. Future research may also be directed at examining the expressed needs of bisexual-identified clients concerning the therapeutic relationship.

**Specifics about the phenomena under investigation.** The phenomena under investigation are subject to constructivist forces. This means that simply talking about bisexuality as a matter of inquiry serves to increase visibility, which means that studying the phenomenon (bisexual visibility) impacts the phenomenon being studied. In addition, forces that impact the social construction of bisexuality are constantly shifting. Since I began my doctoral studies, more celebrities have come out as bisexual, more characters in popular media are bisexual-identified, and more bisexual support groups and bi-specific resources show up in internet searches. Thus, the phenomena under investigation in this study are subject to multiple forces such that repeating this study at a later time could produce different results due to the broader social trend of increasing bi-visibility.

### **Summary**

In this chapter, I have examined the results of this dissertation study in the context of the existing body of literature. The limitations of the study were described, along with the potential impact of bias in the design and data analysis associated with the study.

Implications for the field of counselor education were described. Suggestions for future research were explored, and the research was contextualized according to the constructivist nature of counselor education and the social culture of sexuality. The final chapter of this dissertation will present an article for publication associated with the results of this study.

**A personal note concerning my reactions to comprehensive and consistent bi-invisibility in relation to discourse on Stonewall and Pride events.** Despite the systematic erasure of our history, bisexual people have played an integral role in the queer liberation movement since its inception. So on a personal note, I feel the need to express my reaction concerning the total invisibility of bisexual people in each and every textbook that provided information on the Stonewall Riots and the subsequent generation of Pride parades. The Stonewall riots were a series of unplanned, passionate demonstrations by members of the queer community against persistent raids by the New York City police. The riots began at the Stonewall Inn in the Greenwich Village neighborhood of New York City in the early morning hours of June 28, 1969. The Stonewall riots are commonly considered the most significant event leading to the queer liberation movement and the modern fight for queer rights in the United States. Although bisexual people were present at Stonewall and have played pivotal roles in the queer liberation movement since its inception, this is systematically excluded from the discourse. As a bisexual researcher and advocate, I must address this invisibility. One of my bisexual mentors and sheroes, Brenda Howard, played a pivotal role at Stonewall and in subsequent efforts to commemorate the event. What follows is an excerpt from Ms.

Howard's obituary, found on the Bisexual Resource Center Webpage

<http://www.biresource.org/>:

07/14/2005 Sheeri @ 8:24 am

In Memoriam, Brenda Howard

NEW YORK, July 11 - Brenda Howard died of cancer at 58 on Tuesday, June 28, 2005. Howard was a tenacious BGLT/Leather activist who contributed immensely to the bi movement and to the bisexual, gay, lesbian, and transgender movements throughout the U.S. and around the world, including as a coordinator of the bisexual rights group, BiNet USA.

Howard was a major player in starting the annual Pride celebrations that take place every year around the world. She coordinated the 1-month anniversary rally and the 1-year rally/march commemorating the Stonewall Rebellion, which became the annual New York City Pride March. Howard also originated the idea for a week-long series of events around Pride Day, called Pride Week. Most U.S. states and many countries and cities around the world now celebrate Pride Day/Week annually, descended directly from those first marches and parades in New York City which Howard coordinated and created.

Ms. Howard, a bisexual woman, was one of the founders and originators of the events commonly known as Pride. However, in the textbooks that are included in the data set for this dissertation study, every mention of the Stonewall riots and the political movement that followed Stonewall refers exclusively to gays and lesbians. To a bisexual woman such as myself, this is akin to leaving Bayard Rustin out of discourse associated with the civil rights movement. To address this oversight, I recommend that authors of textbooks make a point to include information about Ms. Howard and her contributions in their discourse on Stonewall.

The final chapter of this dissertation study presents a manuscript for publication in the journal, *Counselor Education and Supervision*. Following the manuscript, the reader will find appendices and a list of references.

**CHAPTER VI****MANUSCRIPT**

Running Head: BISEXUAL TRAINING

Bisexual Clients  
Training in CACREP-accredited Counseling Programs: A Content Analysis

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### Abstract

A descriptive content analysis investigated how counselors-in-training in CACREP-accredited programs are trained to work with bisexual-identified clients. Analysis showed that the majority of multicultural courses—even those that provide some degree of bisexual visibility—are producing efforts that will likely generate only small degrees of limited competence with this population.

## **Bisexual Clients**

### **Training in CACREP-accredited Counseling Programs: A Content Analysis**

Within the past three decades, the field of counselor education has witnessed a significant shift toward the integration of cultural variables as essential considerations in research, training, and practice. The development of multicultural counseling competencies is one example that illustrates this shift (Arredondo et al., 1996; Pieterse, Evans, Risner-Butner, Collins & Mason, 2008). Following the development of the multicultural counseling competencies, counselor education continued to produce significant advances in training with diverse populations, as is evidenced in the competencies developed by the Association for Lesbian, Gay, Bisexual and Transgender Issues in Counseling (ALGBTIC) for counseling LGB clients (Harper, Finnerty, Martinez, Brace, Crethar, Loos, Harper, Hammer, 2013). For Pedersen, the term *multiculturalism* is used to refer to “without grading, comparing, or ranking them as better or worse than one another and without denying the very distinct and complementary or even contradictory perspectives that each group brings with it” (p. 4). The extent to which competence with sexual minority clients is considered an essential component of counselor education should therefore be evident in the classroom instruction provided to students in counselor education programs. However, while ALGBTIC created specific competencies relevant to transgender clients, the ALGBTIC competencies for LGB clients focus on the monosexual identities lesbian and gay, while competence with bisexual-identified clients remains underdeveloped. This trend is replicated throughout the counselor education literature.

Specifically, the body of research regarding competency in counseling lesbian- and gay- identified clients has grown substantially in recent years; however a lack of inquiry exists concerning the specific experiences and needs of bisexual-identified clients. This is problematic due to this population being at risk for a number of factors that have the potential to impact wellness (Ross, Dobinson, & Eady, 2010). Bisexual-identified individuals experience heightened risk due to dual stigma, biphobia and monosexism along with the barriers and challenges they share with their queer monosexual (lesbian and gay) peers.

### **Bisexual Population**

Results from a national probability sample indicate that 3.1% of all adults identify as bisexual compared to 2.5% of all adults who currently identify as lesbian and gay (Herbenick et al., 2010). Further, the same study determined that 4.9% of all adolescents identify as bisexual compared to 1.0% of adolescents who identify as gay or lesbian. Egan, Edelman and Sherrill (2007) surveyed 768 lesbians, gays and bisexuals and found that 48.9% of the sample identified as bisexual compared to 51.1% of the population who identified as lesbian/gay. Thus, bisexual-identified individuals represent a substantial portion of the population. Bisexual-identified individuals also experience unique challenges associated with their bisexuality.

### **Unique Challenges Associated with Bisexual Identity**

Bisexual-identified individuals experience challenges that are both related to and distinct from challenges encountered by their lesbian and gay peers. Among the major challenges that have been identified as unique to bisexuals are *biphobia*, *dual*



*discrimination and monosexism* (Bostwick, Boyd, Hughes and McCabe, 2010; Califia, 2005; Ochs, 1996, 2001, 2007, 2011).

**Biphobia and dual discrimination.** Specifically, *biphobia* refers to a fear or aversion to those who do not identify as monosexual (Dworkin, 2001; Ochs, 1996, 2001, 2007, 2011). *Dual discrimination* refers to bisexuals being at risk for stigmatization, rejection and delegitimization by lesbians and gays as well as by members of the heterosexual community. Negative messages about bisexuality are pervasive and can become internalized. This may lead to feelings of isolation as well as increased risk for suicidality, problems with mental and physical health, and substance abuse (Boyd, Hughes and McCabe, 2010; Bronn, 2001; Jorm, Korten, Rodgers, Jacomb, and Christensen, 2002; King, Semlyen, Tai, Killaspy, Osborn, Popeluk, & Nazareth, 2008; Koh & Ross, 2006; Ochs, 1996, 2001, 2007, 2011; Saewyc et. al., 2007).

**Monosexism.** Similar to heterosexism, which is the systematic privilege applied to heterosexual forms of relating coupled with systematic denial of that privilege to non-heterosexuals (Murphy, Rawlings & Howe, 2003), monosexism is the systematic privilege applied to monosexuals while simultaneously denying equivalent privileges to bisexuals and other non-monosexuals (Califia, 2005; Evans, 2003). Monosexism is similar to heterosexism in that it refers to attitudes and behaviors that deny, devalue, or stigmatize any non-monosexual form of community, relationship, identity, or behavior. Monosexism can manifest on individual, familial, institutional, political, and cultural levels.

Like heterosexism, monosexism is sometimes obvious and overt, and is sometimes less intentional and more subtle. Examples of monosexism include anti-bisexual jokes in heterosexual and in queer spaces; queers and heterosexuals harassing bisexuals to “pick one;” rejection by family and intimate partners upon disclosure of bisexual identity; delegitimization of bisexual identity (e.g., not queer enough, not really queer, accessing heterosexual privilege); suggestions that bisexuals can live monosexual lives; discrimination in housing and employment; the tendency to conflate and subsume bisexual identity and issues with lesbian and gay issues; and infrequent or negative portrayals of bisexual persons in the media.

**Monosexism and invisibility.** Visibility is one important privilege that is increasingly granted to lesbians and gays but not to bisexuals. Examples of monosexism can be seen in the lack of visibility and inclusion offered to bisexuals in queer spaces, the lack of bisexual visibility and inclusion in the queer community, and the lack of bisexual visibility and inclusion in the history of the queer community. Monosexism is also evident in the tendency to assume that teaching about monosexuals will produce understanding about bisexuals. This has been the dominant trend in counselor education, and has resulted in the needs of bisexuals being perceived as less important than the needs of monosexuals in counseling. This tendency to discount bisexuality contributes to the minority stressor *bi-invisibility*.

**Monosexism and hierarchical privilege.** One final example of monosexism embedded in counselor education as well as discourse outside the field of counselor education relates to the list or letter strand commonly employed when referring to the

queer community. The use of a list or strand typically privileges lesbian and gay identity by placing these terms first. Consistently positioning gay and lesbian identities before other sexual minorities generates a hierarchy in which the monosexual identities lesbian and gay are at the top. ALBTIC handles the potential for reinforcing a sexist hierarchy by employing the term GLBT in its writing, and using the order LGBT in the title of the organization. Although this indicates some degree of awareness of the privilege associated with being first, ALBTIC's approach makes efforts to deconstruct gender privilege so as not to reinforce sexism while simultaneously referring to the queer community in a way that reinforces monosexist privilege. Ideally, it would be possible to constantly shift the letters in the strand, but for purposes of clarity and consistency, this approach does not suit. Another potential solution would be to use the term "queer community." In addition to being an inclusive term, conscious use of the word "queer" in scholarly literature has the added social justice implications of deconstructing the stigma historically associated with the term queer and with all queer identities.

### **Counselor Competency**

**Counselor attitudes and behaviors.** Counselor competency with bisexual clients is affected by counselor attitudes and behaviors. Beneficial and helpful attitudes and behaviors pertaining to bisexuality may include a counselor's view on the importance of education on bisexuality, his or her demonstrating attitudes that legitimize bisexual identity, and the counselor being proactive in addressing in counseling issues related to a clients' bisexuality (Matthews & Selvidge, 2005; Matthews, Selvidge, & Fisher, 2005; Ochs, 1996).

**Academic training.** Another influence that impacts counseling competency with bisexual clients is the academic training that counseling students receive. Alderson (2004) determined that the training currently provided to graduate students related to counseling sexual minority clients is minimal and inadequate and that graduates are found to feel unprepared to work competently with sexual-minority individuals. This lack of training exists in spite of standards and competencies that have been adopted by professional counseling organizations such as CACREP and ACA.

**Identity development and treatment models.** Training associated with diverse groups has traditionally incorporated identity development and treatment models specific to the concerns of various marginalized groups. Despite this attention, the bulk of counseling literature focusing on the identity development and treatment of sexual minorities does not account for within-group differences. As a result, bisexuality is frequently conflated with or subsumed by attention to lesbian and gay issues when discussing identity development and treatment models. Because bisexual experience is both related to and frequently more complex than lesbian and gay experience, training that focuses on developing competency with lesbian and gay clients is not adequate to address the needs of bisexual clients.

### **Purpose and Goals of the Study**

Despite research that indicates that the infusion approach to multicultural training is most effective (Abreu et al., 2000), the single-course method continues to be the dominant approach in counselor education. Thus, my review focused on required courses associated with cross-cultural training. I chose not to review elective courses because my

intent was to review content associated with courses that all students in a program must take. My purpose was to gain a clearer understanding of course content as identified in the syllabi, textbooks and supplemental materials currently employed in multicultural and diversity- related courses as demonstrated in the three research questions that guided the study:

1. In what ways and to what extent is bisexuality addressed specifically in courses that are intended to help counselors-in-training become culturally competent (i.e., in multicultural counseling courses)?
2. How is bisexuality presented in the textbooks and supplementary materials used in multicultural counseling courses?
3. What information is provided in multicultural counseling courses specifically about counseling bisexual clients?

### **Method**

This study was conducted as a descriptive content analysis, which is a research tool capable of providing a systematic and objective account of the existing content of communications (Berelson, 1952; Holsti, 1969). In keeping with a constructivist foundation, this design focused on the variable, subjective, socially constructed nature of reality and the ability to find value in multiple perspectives. In addition, elements of post-positivism were added to find common themes in the data (Hays and Wood, 2011; Patton, 2003).

## Sample

The sample was derived from a population of 622 CACREP-accredited counselor education programs. The sample was comprised of 100 CACREP-accredited programs and the data sources consisted of 39 reports of supplemental materials, 30 textbooks used in multicultural counseling courses and 100 multicultural counseling syllabi. These were all analyzed with regard to bisexual visibility to determine the extent of training provided to counselors.

## Development of Categories and Coding Procedures

To code the syllabi for the required-texts category, I created a list of all texts appearing in the syllabi. I tallied their frequency as required texts in the courses. For coding the textbooks and supplemental materials, a multistep process was implemented to create criteria that emerged directly from the data. The first stage of textbook analysis showed that with regard to bisexual visibility, textbooks fell into three clusters: *invisible*, *dimly visible*, and *increasing visibility*. Five textbooks that fell into the *invisible* cluster made no mention of bisexuality at all. Thirteen textbooks were coded as *dimly visible*. These textbooks used the term “bisexual” only when conflated with the terms “lesbian” and “gay.” Twelve textbooks fell into the *increasing visibility* cluster.

The next stage involved further analyzing the textbooks that were classified *increasing visibility*. These textbooks were reviewed using the multicultural counseling competencies (Arredondo et al., 1996) as a lens. Textbooks were analyzed according to the extent to which each of the domains was addressed with respect to bisexuality and bisexual-identified clients. Further, textbooks were analyzed with respect to whether the

information provided pertaining to bisexuality was deemed problematic.

Finally, textbooks were reviewed specifically in terms of the information provided in the knowledge domain. The extent and content of visibility were coded for each textbook and descriptively analyzed. Once textbook analysis was complete, reports of supplemental materials were similarly coded and analyzed.

### **Data Analysis**

Initial data analysis began once the syllabi and reports of supplemental materials had been collected. Open coding of textbooks involved reading and rereading sections to grasp the overall tone (Corbin & Strauss, 2008; Creswell, 2007). In subsequent readings, I organized the themes into clusters. Initially, I identified several preliminary themes, but upon further analysis it became clear that the themes could first be organized according to the general categories of invisibility and visibility, and that visibility could then be further sub-categorized according to degree of coverage, domains of counselor competency addressed, and whether or not the illuminating discourse was problematic.

### **Results**

#### **Syllabi**

Analysis of results showed that the bulk of the syllabi were categorized as limited visibility (n=86). Overall, 34% of the syllabi indicated some degree of conflated visibility of bisexuality, 52% indicated some potential for inclusion due to the use of non-specific terms, with 14% of the syllabi leaving all discourse on sexuality entirely unrepresented. From 100 syllabi, I collected a list of 30 different textbooks in use. Each of the textbooks was analyzed for the extent to which bisexuality was visible and placed into one of three

categories: *invisibility*, *limited visibility*, and *increasing visibility*. Textbooks wherein bisexuality was entirely unrepresented were labeled invisible. This included textbooks that incorporated discourse on lesbians and gays but did not specifically mention bisexuality. Textbooks wherein bisexuality was consistently conflated and/or subsumed with lesbian and gay identity were placed in the category *limited visibility*. When bisexuality was addressed specifically, textbooks were categorized under the label *increasing visibility*. It is important to note that the textbooks that are in use more are not those that provide more visibility, nor is the reverse true.

**Tripartite domains of multicultural competence.** Although there were 12 textbooks categorized as increasing visibility of bisexuality, nine of these texts address only the knowledge domain of cultural competence. Only two textbooks address all three domains of the tripartite model: the McAuliffe text and the text by Hays and Erford.

### **Self-awareness**

Regarding self-awareness, both the McAuliffe text and the text by Erford and Hays provide the reader with questions designed to elicit reader reflection on biphobia. The McAuliffe text provides four prompts, and the Hays and Erford text provides one initial prompt with two follow-up prompts. The first two prompts provided in the McAuliffe text are intended to help the reader explore their awareness of biphobia and the second two prompts are invitations to the reader to become proactively engaged in deconstructing biphobia. Because of this call to action and because the prompts are bisexual-specific (not embedded in a list of cultural identities), the prompts provided by McAuliffe were weighted more heavily than the prompts used in the Hays and Erford



text. To further elucidate, Hays and Erford provide a prompt wherein the reader is presented with a list of 20 cultural identities. The reader is asked to record the stereotypes related to each identity-category to which they have been exposed. In the list created by Hays & Erford, *bisexuals* are third-to-last in a list that begins with *males*. *Gay men* is higher on the list than *lesbians* and *bisexuals* are third-to-last. After the list of categories, Hays and Erford provide these follow-up prompts: *How and from whom did you learn these generalizations? Have any of these stereotypes changed for you throughout your life so far?* Like the prompts used in the McAuliffe text, these prompts are intended to help the reader explore their awareness of biphobia, but these prompts do not use the word “biphobia” nor do they include a component of personal responsibility leading to action. Further, positioning bisexuals in a list beneath males, gay males, and lesbians reinforces rather than deconstructs pre-existing sexist, heterosexist and monosexist privilege. Thus, although each of the textbooks includes a component related to self-awareness with regard to biphobia, the two activities are not equivalent. Now that I have described how two of the texts provide opportunities for readers to develop self-awareness relevant to working with bisexual-identified clients, I will provide the results of applying the tripartite lens of multicultural skills competency to the texts.

### **Skills**

The Hays and Erford text approaches skill development through modeling competence with a bisexual client in a case study. By introducing a case study based on a client who struggles with her bisexuality, the authors are able to demonstrate some of the forces of oppression that may be present with a bisexual client and are able to

demonstrate some non-biased responses to the client's concerns. The case includes pressures from male and female partners to identify as monosexual and the case is a way of walking the reader through the counseling process with this individual. The focus of the discourse regarding counseling skills is on respecting the client's process in self-labeling and on providing patient, affirmative support. Although Hays and Erford suggest that advocacy is called for when working with queer-identified clients, advocacy competencies are not modeled in this case. The case demonstrates a client who is deeply embedded in biphobia and monosexism, but the counselor in the case does not demonstrate how to address these issues with the client. The reader is left with the message that the client simply needs the counselor to be patient with her identity development and respect her choices in terms of self-labeling. There is no integration of bisexual identity development models, nor is there an exploration of how to incorporate advocacy into the therapeutic relationship. This example highlights the need for detailed process commentary when case analysis with non-traditional clients is provided.

The McAuliffe text and the text by Terndrup and Ritter are the only two texts that approach skill development directly. McAuliffe describes a process of collaborating with clients to determine the impact of biphobia, beginning with the messages that a client received while growing up and progressing to how these messages might impact the client's capacity for self-acceptance. Other textbooks may describe a similar process when discussing lesbian and gay clients, but it is left up to the reader to translate this into work that would apply to bisexual clients. This monosexist approach contributes to bisexual invisibility. The McAuliffe text contributes to bisexual visibility and bisexual

inclusion by positioning the above paragraph within a section specifically dedicated to bisexual concerns.

The Ritter and Terndrup text approaches counseling skills with bisexual-identified clients in a similar manner, but focuses on the impact of biphobia on client relationships. The variation in these two perspectives further demonstrates the inherent complexity that often remains unaddressed in relation to counseling bisexual clients. Now that I have described the results of the data analysis with regard to the multicultural counseling domains of self-awareness and skills, I will describe the results of the data analysis with regard to the multicultural counseling domain of knowledge.

### **Knowledge**

The results of this section are provided in rank order based on the number of syllabi listing each textbook as required reading. It is important to note that the textbook that ranks highest in popularity (Sue and Sue) is not the textbook that provides the most comprehensive coverage of bisexuality and the needs of bisexual-identified clients (McAuliffe). It is also important to note that more coverage does not automatically equal better coverage. This is the case with the second-most popular textbook, by Baruth and Manning. The Baruth and Manning textbook presents three different case studies, each of which describes a bisexual-identified individual who is cheating on his or her spouse. This type of visibility reinforces rather than deconstructs pre-existing stereotypes and may have a harmful rather than positive effect. Finally, it is important to note that there are no examples of case studies that demonstrate positive relationship outcomes for

bisexual-identified clients. Keeping these points in mind, I will now present the results associated with four of the most frequently used textbooks.

**Sue and Sue.** Indicative of the profound impact that the Sue and Sue textbook may have, it is listed as required reading on 45 different syllabi. Sue and Sue provide a quote at the beginning of the chapter on sexual minorities (Chapter 23) which reveals the pain of dual stigma that is faced by bisexual-identified clients, but dual stigma is never addressed again. The next mention of bisexuality describes a study of counselors who demonstrate negative bias toward bisexuals. Unfortunately, this is not followed by an invitation to the reader to consider their own potential biases related to this population. The next time bisexuals are mentioned is in relation to the results of a study that suggest that bisexual teens experience more cognitive dissonance than their lesbian and gay peers. Sue and Sue hypothesize no relationship between that cognitive dissonance and the lack of social confirmation experienced by bisexuals, and the reader is left with the implication that bisexuals teens experience greater cognitive dissonance because of their bisexuality instead of because of the higher levels of oppression many bisexuals face. Finally, Sue and Sue provide a case study of a client named Tiffany who is a 25 year-old Haitian-American, bisexual, educated woman who has recently started a new job. Although the case describes situations where the client may be experiencing oppression due to her bisexuality, the process analysis attributes her experience of oppression mainly to her race. None of the discourse about Tiffany is constructed to reveal the unique challenges faced by bisexual individuals—the experiences she has could just as easily have happened to a lesbian. In light of the inattention to Tiffany's bisexuality in a chapter

dedicated to sexual minorities, the following statement seems ironic: “Finally, the therapist seems unaware that she has invalidated Tiffany’s experiential reality...”

While the Sue and Sue text was the most popular textbook in the data set, the next-most-popular text was Baruth and Manning (10 syllabi). I will provide the results of analyzing the text by Baruth and Manning next.

**Baruth & Manning.** It is important to note that most textbooks use some form of hierarchical list or letter strand when referring to the queer community. While some texts shift the order of the G and the L (or the words lesbian and gay), the placement of the B secures a position for bisexuals outside of monosexual privilege. Because of the consistency of this trend, it is significant whenever a textbook shifts and places the word bisexual first. The first information that the reader is given about bisexual individuals in this text associates them with vectors of the HIV and AIDS viruses. This is also the only place in the text where bisexuals are positioned before gays in the list/letter strand.

One paragraph provides an array of bisexual typologies. When bisexual typologies are presented (across all textbooks in the data set), the specific challenges faced by each type are not addressed. This is particularly disturbing, because without providing information about the barriers faced by each bisexual type, counselors-in-training are not given information that applies to their practice. Thus, a list of typologies becomes an exercise in “sorting the bisexuals” rather than an exercise to determine the particular challenges and treatment strategies that may be specific to each type. Further, it should be noted that this exercise of “sorting” is typically not applied to other cultural identities.

This is followed by three case studies which are inherently problematic because each of the cases focuses on a bisexual-identified client who is cheating on his or her spouse. This is not ideal because counselors-in-training are only given models of bisexual individuals in unsuccessful relationships. It is important that counselors-in-training know how to help bisexual clients process their relationships in healthy and affirmative ways, and that they know that bisexuals have problems associated with their bisexuality that are not situated in their intimate relationships, and it is also important that texts do not condition trainees to associate bisexuality with problem-saturated relationships.

The first case study involves a 45 year-old Hispanic bisexual woman who is married with a good marital sex life, has three grown children and two female partners. Although the case identifies the client as bisexual and she asserts that she does not wish to leave her husband, her female partners are referred to as her “lesbian lovers.” First, it is unclear whether these women are actually lesbians or whether the authors may be applying this label using behavior as a unilateral reference point. Next, the term “lovers” sexualizes the women. “Partners” would be the preferred term in this case. The first process question the authors ask in reference to this case is, “How is [the client] handling her bisexuality?” This question is problematic because similar cases involving other sexual minorities do not pose this question. A more appropriate question might be, “What are the social forces that may be working to cause the client’s choice of identity management?” The final process question, “What might be the possible long-term effects or consequences for Alisa actually living two “lives”?” This question has a hidden

implication that something negative is in store for Alisa, and there are no further process questions designed to assist the counselor in understanding how to help Alisa contextualize her identity management choices.

The next case study involves a middle-aged Hispanic American married bisexual man who is afraid that he will give his wife a sexually transmitted infection. As mentioned earlier, the tendency to link bisexual clients with the AIDS and HIV viruses imprints counselors-in-training with a schema about bisexual-identified clients that may evoke rather than assuage monosexist and heterosexist biases. There are other problems with this case study. For example, the authors refer to the client's "bisexualism," which is not explained. The preferred term would clearly be, "bisexuality." Process commentary on the case focuses on the client's choice not to "come out" and leaves out affirmative discourse on identity management. The counselor even wonders what the client hopes to gain out of counseling, since the client has no intention of coming out to his wife, employer or landlord. Placing this level of primacy on coming out restricts the counselor from providing support as the client goes through the ongoing challenge of identity management while embedded in several biphobic, monosexist systems.

The third case study involves a middle aged (race/ethnicity unidentified) married bisexual man who is cheating on his wife. The trends that are established in the first two case studies are repeated in the third. Next, I will present the results associated with the McAuliffe text.

**McAuliffe.** Out of the 12 textbooks that were determined to *be increasing visibility*, the McAuliffe textbook provides the most comprehensive discourse on

bisexuality. There is discourse on bisexual code-switching and identity management, external biphobia, common stereotypes applied to bisexual-identified individuals, delegitimization and dual stigma along with the associated internalized biphobia and the resultant fear of isolation, alienation, and rejection, the complexity of identity development and coming out, the relative fluidity and stability of the label, the lack of community, lack of social confirmation, and having assumptions made about one's sexual identity based on the gender identity of one's partner. Next, I will present the results of the text by Brammer.

**Brammer.** Consider the following passage: "I have worked with religious bisexuals who choose to live heterosexual lives. I believe this is possible and often fulfilling for them. However, we lack any coherent mechanism to identify who would be a good candidate for conversion therapy..." The preceding passage seems to suggest that while monosexual identity is rigidly fixed and therefore less likely to produce successful results in conversion therapy, individuals who identify as bisexual may experience successful results due to their identity being less "fixed." This passage is of particular concern in light of a recent study conducted with a sample of 1,328 mental health professionals in which 17% of respondents had assisted at least one client in trying to change her or his sexual identity (King, Smith, & Bartlett, 2009). This text also highlights the problems associated with referring to bisexual identity as "fluid." While attraction may be fluid, sexual identity is stable for many bisexuals. Further, making reference to shifts in bisexual self-identification without making reference to the social forces that oppress bisexuals as likely causes for identity management and without referencing code-



switching as a mechanism used to accommodate pressure to adopt monosexual labels further delegitimizes bisexual identity.

### **Supplemental Materials**

Supplemental materials used in classrooms have the potential to address populations that continue to be marginalized in the textbooks that are required reading for the courses. To create as comprehensive a picture as possible of the training associated with bisexuality in current counseling programs, the final step in data analysis involved reviewing the reports of supplemental materials supplied by the authors of the syllabi. Forty instructors responded to my request for responses to the following closed/open ended question: *Do you use supplemental materials in your multicultural counseling course that are not shown on your syllabus that address bisexuality? If yes, please describe those materials briefly.*

About half of the respondents provided information that indicated they did not include supplemental materials directed at increasing competence with bisexual-identified clients, and about half of the respondents provided information that they did provide some sort of supplemental material directed at increasing competence with this population. Responses were analyzed according to their relationship to the textbooks and no consistent patterns were found with regard to use of supplemental materials and textbook choice. Respondents' choice to provide supplemental materials does not appear to be associated with a particular textbook or set of textbooks except in the case of one respondent who explicitly chose to add supplemental materials to mitigate the problematic discourse in the textbook.

**Limitations**

The most serious limitation of this design is that it only recorded and analyzed what had already been determined would occur in courses that were subsequently molded in vivo according to the what, why, when and how of what students bring to the class. The next limitation is related to the nature of content analysis. A content analysis is not predictive and can only provide a snapshot of what is happening at the time the data are collected. Therefore, this content analysis cannot account for discourse created in vivo, nor can it account for counselor educators who might have responded to the request for syllabi and the open-ended question regarding supplemental materials by adjusting their content to be more inclusive of bisexuality. This snapshot of a limited sample might not reflect the field of counselor education as a whole, and these findings are about multicultural courses, not multicultural training at the program level. Thus, the current results are provided with some caution.

At the time this study was conducted, the list of textbooks collected from the sample was considered to be representative of the larger population of textbooks referenced on multicultural counselor education syllabi. However, with this design it is still possible that some textbooks were not represented by the sample, and it is possible that some supplementary materials were left out.

**Limitations associated with researcher bias.** Another limitation or challenge is related to the use of content analysis is researcher bias. Researcher bias has the potential to impact this study in at least three ways: bias embedded in the type and form of data selected for analysis, and bias embedded in coding schemes (codebooks), and bias in

interpretation (analysis) of data. Regarding bias associated with the type and form of data selected for analysis: I chose to seek data from every CACREP-accredited program in the United States, I analyzed every syllabus retrieved, as well as every textbook referenced in the syllabus data set and every report of supplemental materials that was received. Still, bias could have been transmitted through the way that the request for syllabi and reports of supplemental materials was worded. Regarding the other two potential risks—bias associated with coding schemes and also bias associated with interpretation of data—it is possible that some of the coding schemes and interpretations of data were influenced by my status as a bisexual-identified counselor educator.

It is not clear whether counselor educators help students in vivo translate information about lesbian- and gay-identified clients into information that applies to bisexual-identified clients. Finally, it was not possible to address all contextual information that may have impacted the results of this study. For example, I wonder if the age or number of years in the field impacts whether or not a counselor educator is more or less likely to address bisexuality in their course. I also wonder if the program from which the counselor educator received her or his doctorate has an impact on bisexual inclusion. As one method of dealing with bias and increasing trustworthiness, I chose to engage an auditor to review this dissertation study.

**Auditor.** To deal with the potential impact of my biases on this study, I enlisted an auditor. The auditor of this study is a straight-identified, third-year doctoral student in counselor education who has taken advanced research courses. I requested that the auditor associated with this study review all stages of dissertation writing (with particular

attention to data analysis) for embedded biases associated with my status as a bisexual-identified counselor educator. The auditor was provided with an audit trail which contained the dissertation proposal and follow-up chapters presenting results and discussion, data sets, code books, and my reflective/reflexive memos. Review by the auditor determined that my status as a bisexual-identified counselor educator had informed but did not negatively impact the process of analysis.

### **Discussion**

In terms of answering the research questions, results provided a number of insights. I found that bisexual visibility is neither comprehensive nor widespread in courses that are designed to help counselors-in-training become culturally competent. Bisexuality is highly visible and addressed in a comprehensive way with respect to facilitating self-awareness, knowledge and skills in only one textbook, which are listed as required reading on 7% of the syllabi in the data set. In the remaining textbooks bisexuality is invisible or limited in visibility. The textbook that is in widest circulation (45% of syllabi in the data set list this book as required reading) does not address self-awareness or skills relevant to work with bisexual-identified clients and provides a limited amount of knowledge with regard to this population. Thus, results showed that bisexuality is sometimes visible in the syllabi, textbooks and supplemental materials used in multicultural counseling courses, but where visibility exists, it is inconsistent, sometimes problematic and usually not applied to the multicultural competency domains of self-awareness and skills.

Bisexuality is typically presented along with other information about sexual identity in the textbooks and supplemental materials used in multicultural counseling courses. Although sexual identity was sometimes shown to be completely invisible, the strongest trend was to conflate bisexual identity with lesbian and gay identity. In some materials bisexuality was visible as both distinct from and related to lesbian and gay identity, with variations in degree of coverage that ranged from *dim visibility* to *increasing visibility*.

No evidence of skill development appeared in the syllabi or supplemental materials that comprised the data set. Analysis showed that one textbook approached skill development by providing a systematic approach to helping clients explore the impact of biphobia and heterosexism in their lives. Although other textbooks provided cases with bisexual-identified clients and case analysis would be one way of modeling appropriate counseling skills with bisexual-identified clients, no textbooks used this strategy with systematic process questions directed at producing cultural competence with this population. Further, analysis revealed that case studies were generally riddled with monosexist bias and unaddressed instances of external and internalized biphobia. For these cases to be useful in deconstructing oppression frequently encountered by bisexual individuals, these elements need to be explicitly addressed.

### **Suggestions for Increased Inclusion**

Future editions of established textbooks can make efforts at developing counselor self-awareness, knowledge and skills with respect to bisexuality. Counselor educators can

be conscious of bisexual inclusion when choosing supplementary materials such as films, reading materials, and panel participants. In addition, counselor educators can prepare process questions related to classroom experiences that are directed at developing competency with bisexual-identified clients. Thus, the implications of this study are directed at increasing visibility of bisexuality in counselor education.

### **Conclusion**

Overall, findings showed that the majority of multicultural courses—even those that provide some degree of bisexual visibility—are producing efforts that will likely generate only small degrees of limited competence with this population. Among the syllabi that comprised the data set, there were no cases where bisexuality was not conflated with lesbian and gay identity. Regarding the textbooks that comprised the data set, one textbook out of thirty was shown to sensitively increase bisexual visibility by addressing the tripartite model of multicultural competence with regard to bisexual-identified clients. Other textbooks were shown to have incomplete and problematic discourse associated with bisexuality and bisexual-identified clients. With regard to supplemental materials selected by instructors with the intention of increasing competence with bisexual-identified clients, it was shown that some instructors make efforts at bisexual inclusion, but these were neither comprehensive nor consistent across the data set.

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## APPENDIX A

### EMAIL COMMUNICATION WITH INSTRUCTORS

Dear Dr. \_\_\_\_\_,

I am a doctoral student in counselor education at Old Dominion University. I am currently conducting dissertation study of the content of multicultural counseling courses in CACREP-accredited programs. I am writing to request a copy of the syllabus that you use to teach this course. In addition, I ask that you respond to the following questions: **Do you use supplemental materials in your multicultural counseling course that are not shown on your syllabus that address bisexuality? If yes, please describe those materials briefly.**

If you have any questions about this study, I can be reached through email at this address or by cell phone at 757.630.7233. Thank you very much for your response to this inquiry.

Sincerely,

Laurie Bonjo, Doctoral Candidate  
Counselor Education and Supervision, Old Dominion University  
School Counseling Faculty, Brooklyn College, CUNY  
757-630-7233  
lauriebonjoresearch@gmail.com

## APPENDIX B

## EMAIL COMMUNICATION WITH IRB



## OFFICE OF THE VICE PRESIDENT FOR RESEARCH

Physical Address

4111 Monarch Way, Suite 203  
Norfolk, Virginia 23508

Mailing Address

Office of Research  
1 Old Dominion University  
Norfolk, Virginia 23529  
Phone (757) 683-1463  
Fax (757) 683-1502

## MEMORANDUM

TO: Laurie A. Bonjo, M.Ed, NCC  
Counseling Doctoral Student  
Department of Counseling and Human Services

FROM: Adam J. Rubenstein, Ph.D.  
Director of Research Compliance

RE: IRB submission

DATE: August 7, 2012

Dear Ms. Bonjo,

On August 6<sup>th</sup>, I received the IRB submission for your doctoral work entitled "A content analysis of bisexuality in resources used by CACREP accredited programs to teach multicultural counseling courses in CACREP accredited programs." After reading through your submission and discussing the project on the phone, I have determined that this project does not require human subjects review.

Although you are asking people to provide you with information, this information is focused upon the structure of courses. You are not collecting information about the people themselves, such as opinions about the course or effectiveness of the course. Rather, you are using them as a resource to obtain non-human subjects data. Given the focus of your project, you can proceed with data collection without obtaining approval of the IRB or your college's human subjects review committee.

Regards,

Adam J. Rubenstein, Ph.D.  
Director of Research Compliance

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## CURRICULUM VITA

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### EDUCATION

Ph.D	Old Dominion University Expected graduation	August 2013
M.Ed	The Pennsylvania State University School Counseling (CACREP Accredited)	May 2009
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### LICENSURE/ CERTIFICATION

National Certified Counselor	#252000
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### DISSERTATION

HOW COUNSELORS ARE TRAINED TO WORK WITH BISEXUAL-IDENTIFIED  
CLIENTS IN CACREP-ACCREDITED COUNSELOR EDUCATION PROGRAMS