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A Case Study Examining the Impact of Adventure Based Counseling on High School Adolescent Self-Esteem, Empathy, and Racism

by

Chris Cale

A dissertation submitted in partial fulfillment of the requirements for the degree of Doctor of Philosophy
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Keywords: adventure based counseling, racism, self-esteem, empathy, discrimination, adolescence.

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Dedication

This dissertation is dedicated to my mother and father, Sandra and Bennett Cale. Thank you for who you are to me: unconditional support, selfless expressions of love, generous contribution to others, and inspiration of all that is possible.



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A Case Study Examining the Impact of Adventure Based Counseling on High School

Adolescent Self-Esteem, Empathy, and Racism

Chris Cale

ABSTRACT

This study investigated the effectiveness of Adventure Based Counseling upon high school adolescents. The goals of this study were to (a) explore the effectiveness of ABC Counseling in increasing levels of self-esteem and empathy among adolescents; (b) study the efficacy of ABC counseling in reducing perceived racial discrimination, racist attitudes, or both; and (c) investigate the correlation between self-esteem, empathy, perceived racial discrimination, and racist attitudes as related to the effects of ABC counseling. In addition, the effects of ABC counseling on the school-related variables such as discipline, attendance, and academics, as well as possible outcome differences caused by demographic variables like gender and ethnicity were measured in relation to the effects of the ABC counseling treatment. Finally, this study also gathered descriptive data from participants through survey questionnaires regarding their prior knowledge and sensitivity to other races, their perception of racism occurring at the study site, and their experience in ABC counseling.

Research indicates that adolescents struggle with and are confronted by many developmental, psychological, and social phenomena while in high school. Salient



among these phenomena are self-esteem, empathy, and racism. Research shows that developmentally appropriate self-esteem and empathy have a positive effect on the well being and functioning of adolescents. Furthermore, research indicates that racism has a significant negative impact on the development of adolescents. Social Identity Theory suggests that increases in self-esteem could lead to decreases in racism (Tajfel & Turner, 1979; Tajfel, 1978, 1981, 1982). Research based on this theory indicates a possible correlation between increased empathy and a decrease in racism (Tajfel & Turner, 1979). In addition, ABC counseling has been shown to produce a positive impact on both self-esteem and empathy in adolescents (Tajfel & Turner, 1979).

A total of 108 African American, Latina/o, and Caucasian adolescents from one Southeastern high school participated in the study. Half the students received a one-day ABC counseling treatment, and half served as the control group receiving no treatment. Results of the study found significant increases for the ABC counseling group in both self-esteem and empathy, and significant decreases in perceived racial discrimination and racist attitudes. In addition, a significant reduction in discipline referrals occurred from baseline to one-month follow-up. An ancillary analysis showed significance for the variables gender and ethnicity: males experienced a significantly greater increase in self-esteem and empathy as compared to females; Latina/os had the most significant decrease in racist attitudes and highest overall scores on the same measure; African Americans possessed significantly higher perceived racial discrimination scores than Caucasians or Latina/os.

Limitations existed concerning the sample, instruments, and analysis. The sample was taken from a single high school in an affluent community; some of the instruments



do not have reported reliability and validity or prior use with high school students in the study; and the absence of multicollinearity was assessed through examination of the Variance Inflation Factors (VIF) and the assumption was violated with the outcome self-esteem. These limitations necessitate caution when making generalizations using the study's results.

Similar to previous research, the ABC group experienced a significant increase in self-esteem and empathy. Participating in the program also produced significant decreases in both perceived racism and racist attitudes. The latter results support the hypothesis made by the theoretical models used in this research, but it is believed that this is the first time such an effect has received empirical support. In addition, the significant negative relationships found between self-esteem and perceived racism, and empathy and perceived racism verified the prediction that increases in self-esteem and empathy would correlate with decreases in racism.



Chapter One: Introduction

Background of the Study

The adolescent life period is characterized by many new social and psychological challenges (Newman & Newman, 2009). Adolescents in the present century are exposed to issues and demands that appear to be more severe, prevalent, and multifaceted than adolescent experiences over the last 100 years (Hamburg, 1993; Newman, 2009). Current views define adolescence as a phase of transition in which physical, emotional, and cognitive changes generate challenges and growth (Newman & Newman, 2009). According to Santrock (2008), adolescent crises and turmoil are often associated with high levels of stress and conflict. The fundamental process occurring within adolescence is identity development, and according to Erickson (1968), inadequate completion of this process results in identity confusion. Furthermore, the common experiences of modern-day adolescence such as high parental divorce rates, adolescent pregnancy, increased mobility of families, lack of supervision and support from adults, and high rates of drug use function to confound adolescent development (Newman & Newman, 2009; Santrock, 2008). In particular, three key areas that empirical research established as significantly impacting adolescent development and well-being are selfesteem, empathy, and racism (Chen & Faruggia, 2002; Edwards & Romero, 2008; Jolliffe & Farrington, 2006; Newman & Newman, 2009).

A substantial developmental task of adolescence is the formation of a positive sense of self (Mandara, Richards, Gaylord-Harden, & Ragsdale, 2009). Adolescence is thought to be the most critical time for the development of self-esteem (DuBois & Tevendale, 1999). According to Rosenberg (1965), self-esteem is either a positive or negative attitude toward or about the self. Rosenberg posits that an individual who views himself as a person of worth—who is respected for who he is—indicates positive self-esteem. Conversely, negative or low self-esteem implies that an individual experiences self-dissatisfaction or self-contempt. Thus, a person's self-esteem, particularly during the developmental stage of adolescence, may influence certain behaviors including racial discrimination (Butler, 1995; Chen & Faruggia, 2002).

According to Mann, Hosman, Schaalma, and DeVries (2004), the construct of self-esteem is generally thought to be one of the most significant psychological elements for adolescent mental health both as an indicator and contributor. In the development of adolescent behavior, self-esteem plays an important role, with high self-esteem serving as a source of resiliency or positive adjustment (Rutter, 1987). Adolescents showing higher levels of self-esteem have been found to exhibit more positive mental health and are more resilient in the face of adversity as compared to those adolescents with low levels of self-esteem (Compas, Hinden, & Gerhardt, 1995; DuBois et al., 2002). On the contrary, low self-esteem has been associated with the occurrence and development of a wide range of maladaptive responses in adolescence such as depression, eating disorders, social withdrawal, and anxiety (Evans, Noam, Wertlieb, Paget, & Wolf, 1994; Hammen, 1992).

Empirical research has demonstrated that empathy plays a significant role in adolescent development as well as in adolescent well being and social performance



(Bandura, 1999; Davis & Oathout, 1987; Del Barrio, Aluja, & Garcia, 2004). According to Eisenberg and Fabes (1998), empathy is an affective response originating from a person's comprehension or apprehension of another person's emotional state or condition (p. 740). Empathy involves experiencing similar emotions and/or feelings that another person is experiencing, or would be expected to be experiencing. Over the last few decades, researchers have established that empathy is a fundamental social skill that allows an adolescent to anticipate, comprehend, and experience others' points of view (Davis & Franzoi, 1991; Ivey, Ivey, & Zalaquett, 2010).

According to Newman and Newman (2009), empathy reaches its highest developmental stage during late adolescence. Empirical research conducted on empathy related to adolescence has highlighted the role empathy plays in the attainment of social competence during this developmental stage. Examination of the social-emotional and cognitive components of empathy indicates that it helps adolescents create and sustain friendships (Del Barrio et al., 2004), impacts the quality of relationships with family members (Guerney, 1988), increases the satisfaction level in close relationships (Davis & Oathout, 1987), and positively influences communication (Henry, Sager, & Plunkett, 1996). Consequently, adolescents lacking empathy can experience difficulty in forming and maintaining relationships (Davis, 1994).

A bi-directional effect exists regarding empathy and relationships. Eisenberg and Fabes (1998) assert that in adolescence, the development of peer relationships impacts and enhances a person's empathic skills and ability. Notably, the development of positive relationships and increased empathic skills function to enhance each other.



Research has established that empathy can serve as a cushion for all forms of aggression and is positively associated with increased levels of social intelligence in adolescence (Burke, 2001; Feshbach, 1987; Jolliffe & Farrington, 2004). In addition, lack of empathy has been shown to be related to bullying and defending behavior in adolescents. Low levels of empathic responsiveness is correlated with adolescents' being involved in the bullying of others (Endresen & Olweus, 2001; Gini, Albiero, Benelli, & Altoe, 2007; Jolliffe & Farrington, 2006; Newman & Newman, 2009). Notably, McFarland (1998) describes that a lack of adolescent empathy can lead to a predisposition toward prejudice and discrimination.

In sum, the existing literature suggests that the constructs of self-esteem and empathy are central to the development of adolescents and they impact multiple social and psychological areas (Jolliffe & Farrington, 2006; Mandara et al., 2009; Mann et al., 2004; Newman & Newman, 2009). For these reasons, both self-esteem and empathy are included in this dissertation.

Racism is another significant issue affecting high school adolescent personal-social development, emotional well being, and school performance (Alladin, 1996; Dei, Mazzuco, Mcisaac, & Zine, 1997; Edwards & Romero, 2008; Gillborn, 1995; McCarthy & Crichlow, 1993; McLaren & Torres, 1999; Troyna, 1993; Troyna & Hatcher, 1992). For the purposes of this study two definitions of racism will be used. One will serve to define racism as the perception and experience of the victim, and the other to define racism as the attitude of the perpetrator: (a) Racism is a belief that one has been treated unfairly as a result of one's origin and ethnicity (Mesch, Turjeman, & Fishman, 2008); and (b) racism is a system of dominance and power based on the beliefs, behaviors, and



institutional arrangements that corroborate the superiority of certain racial/ethnic groups and denigrate others because of certain phenotypic characteristics (Clark, Anderson, Clark, & Williams, 1999). Several studies confirm the continued presence of racism in schools, and demonstrate this phenomenon has a negative impact on the well-being and mental health of adolescent minorities (Allison, 1998; Branscombe, Schmitt, & Harvey, 1999; Phinney, Madden, & Santos, 1998; Sanders-Thompson 1996). Research substantiates that high school age adolescents in the United States who perceive racial discrimination may experience outcomes such as depression, low self-esteem, delinquency, and substance abuse (Gibbons, Hsui-Chen et al., 2007; Greene, Way, & Phal, 2006; Lee, 2003, 2005; Romero & Roberts, 2003a, 2003b; Rosenbloom & Way, 2004; Simons, Simons, Stewart, Chen, & Brody, 2003; Ying, Lee, & Tsai, 2000). In addition, studies have found that high school adolescents' attitudes toward school, school functioning, and school accomplishments are negatively impacted by the presence of racial discrimination (Foster, 2000; Jasinskaja-Lahti, Liebkind, Horenczyk, & Schmitz, 2003; Liebkin, Jasinskaja-Lahti, & Solheim, 2004; Vega, Kolody, & Valle, 1987; Vega & Rumbaut, 1991).

There is persuasive evidence supporting the idea that adolescent academic success and failure are linked to race and issues of racism (Ryan, 2003). Some researchers go so far as to assert that institutional racism and discrimination are the central reasons why minority adolescents perform poorly in schools (Ogbu, 1994; Young & Laible, 2000). American high schools in particular experience difficulty in reducing racism (Wong, Eccles, & Sameroff, 2003). It is also likely that some adolescents emerge from their post-secondary education significantly impacted socially, emotionally, and / or



academically by racism (Brown & Bigler, 2005). In fact, empirical research has established that high school students struggle individually with the impact of racism (Lee, 2003, 2005; Romero & Roberts, 2003a, 2003b; Rosenbloom & Way, 2004) and that groups of adolescents struggle with inter-group racism (Hong et al., 2004).

The American School Counseling Association (ASCA) has outlined recommendations for delivery systems and a National Model with standards for high school counseling programs (American School Counseling Association [ASCA], 2007). These standards include offering counseling programs that address the personal social development of high school adolescents. The recommended model-outcomes incorporate students acquiring the knowledge, attitudes, and interpersonal skills to help them respect themselves and others.

Over the past three years at the high school in South Florida where this research was conducted, and where the primary researcher is an assistant principal, several instances of student violence related to racial discrimination occurred. Two years ago, at a point where the school was experiencing weekly physical and verbal altercations that were racially charged, a professional from the Safe and Drug Free Schools department suggested implementing an intervention called Unity Day. This day-long intervention is similar to Adventure Based Counseling and consisted of ropes course activities and a group counseling component focusing on issues of race, tolerance, culture and diversity. The Unity Day intervention took place on the school campus, and the participants included 50 high school boys of various ethnic groups spanning grades 9 – 12. The participants were selected by the school administration either because they were seen as school leaders or because they had been involved in school violence.



In the weeks following the intervention, the school administration noticed a decline in student violence related to racial discrimination, a phenomenon that lasted 2 months. Although this intervention was not part of a formal study, the basic data collected indicated that there was a 9% decrease in violent incidents related to racial discrimination from the time of the intervention to the end of the school year, as measured by discipline referrals and encompassing both verbal and physical altercations. In the proposed study, the researcher has distinguished key issues that adolescents are dealing with at the school where he is an Assistant Principal in South Florida. This was accomplished through a review of standardized school data including discipline referrals, guidance counselor referrals, and teacher and student survey data. The primary issue examined was student violence related to racial discrimination. This was measured by the total number of discipline referrals from a discipline incident category that indicates racial discrimination occurred. Discipline referral data reflected that the number of student violence incidents related to racial discrimination was higher than the number of student violence incidents in other incident categories. Guidance counselor referrals revealed that these students were struggling with communication and relationship issues, which included self-esteem deficits, empathy, and relating to others.

Based on the analysis indicating that violent incidents related to racial discrimination continued to exist at the school the following year, the need to improve the school environment as reported by teachers and students, the positive results observed at Unity Day, and the similarity of ABC counseling with the Unity Day program, this researcher decided to study the potential impact of Adventure Based Counseling on high school adolescents' self-esteem, empathy and racism.



In the last decade, Adventure Based Counseling (ABC) has emerged as a grouporiented approach to personal development and therapeutic activity. Empirical research has established the efficacy of adventure-based experiential programs as positively impacting the psychological, social, and vocational functioning of high school age adolescents (Niell, 2003). Research on ABC counseling reports increases in self-esteem, self-concept, and self-efficacy (Garst, Schieder, & Baker, 2001; Herbert, 2001; Neill, 2003; Neill & Richards, 1998; Sibthorp, 2003; Silka & Hart, 1994; Wick and Wick, 1997); empathy, social competence, and perceptions of others (Autry, 2001; Combs, 2001; Cook, 2008; Gillis & Speelman, 2008; Goldenberg, Klenosky, O'Leary, & Templin, 2000; McNamara, 2002); self confidence, locus of control and life-effectiveness (Cason & Gillis; 1994; Hattie, Marsh, Neill, & Richards, 1997; Newberry & Lindsay, 2000); and group cohesiveness and team building (Autry, 2001; Bolduc, 1998; Meyer & Wagner, 1998; Priest, 1998; Steinfel, 1997). In addition, two meta-analyses conducted by Hattie et al. (1997) and Cason and Gillis (1994) suggested that ABC counseling is beneficial to improving one's life effectiveness and dimensions of the self such as those listed above.

Statement of the Problem

High school is a psychologically, socially, and academically challenging period for adolescents. Although there are many highly functional adolescents in the U.S. public school system, the number of students struggling with issues arguably related to low self-esteem and poor empathic skills is constant and does not appear to be decreasing. One implication is that as a result of low self-esteem and empathy, adolescents might be faced with more social, psychological, and behavioral barriers than their higher-functioning



peer counterparts. Adolescent minorities in particular are faced with additional obstacles, both in and out of school, related to racism and discrimination. Furthermore, high schools in the U.S. continue to struggle with issues of physical altercations and racism-related violence. These issues negatively affect personal, social, and academic development of these students and create a need for further investigation into school-based interventions that can impact these issues (Hong et al., 2004; Rosenbloom & Way, 2004; Young & Laible, 2000).

Although school-based intervention programs designed to increase adolescent self-esteem and empathy do exist, many have not undergone empirical examination and often fail to provide validation of the program for use with specific demographic populations. In addition, a very limited number of programs address the problem of adolescent racism and discrimination, and an even smaller number possess experimental validation. It is important that we learn more about intervention programs that help adolescents thrive in their lives, benefitting from increased self-esteem, enhanced empathy, and a diminished experience of racism. Based on the school's positive results with an adventure based counseling program and the issues mentioned above, this investigation of the effects of ABC counseling on self-esteem, empathy, and racism was conducted.

Significance of the Study

Empirical research has established racism as having a significant negative impact on high school adolescents' personal and social development, and academic performance (Edwards & Romero, 2008; Small et al., 2007; Wong et al., 2003), a phenomenon also observed at the site at which this study took place. Thus, this study investigates the variables of self-esteem, empathy, and racism with the goal of improving students' social



and emotional adjustment, and reducing student violence related to racial discrimination in the school.

Efforts to find counseling interventions to impact self-esteem, empathy, and racism are promoted by counseling associations such as ASCA. Research that studies the potential efficacy of ABC counseling in increasing self-esteem and empathy, as well as in reducing racism, could be useful for educational administrators, school counselors, and mental health workers interested in implementing effective counseling interventions in high school campuses.

The proposed study is in alignment with the ASCA National Model encouraging guidance departments to implement programs which support the personal and social development of high school adolescents through effective processes and interventions (American School Counselor Association [ASCA], 2007). This research has practical implications for school counselors, both in practice as well as in collegiate counselor training programs that prepare aspiring school counselors, by further validating the efficacy of an intervention with adolescents and providing an empirical link between self-esteem, empathy and racism.

Purpose of the Study

The purpose of this dissertation is to (a) study the effectiveness of ABC counseling in increasing levels of self-esteem and empathy among adolescents; (b) investigate the potential efficacy of ABC Counseling in reducing racism; and (c) investigate the correlation between self-esteem, empathy, and racism. Accordingly, the study will explore whether increased self-esteem and empathy contribute to reduced



levels of perceived racism and racist attitudes among those in the treatment group, compared to those in a no-treatment control group.

ABC counseling was selected as the study treatment based on (a) its reported success in impacting self-esteem and empathy, and in altering human perceptions of others; (b) its efficacy working with adolescents; and (c) our school's positive experience with Unity Day, which is very similar to ABC counseling but lacks research and formal structure, which consequently hinders its implementation and replication.

The Adventure Based Counseling program selected for this study originated with Project Adventure, which is currently the largest ropes course training company in the world. All staff members that operate the local ABC counseling program in Florida have attended the Project Adventure training course. This ABC counseling model includes incorporating both high and low ropes course elements, both of which were used in this study. In addition, what makes this ropes course intervention unique is its inclusion of a group counseling component focused on group process around specific themes. For this study, the themes were tolerance and diversity. These themes were not assessed; they function to provide guidance and meaning to the group process component of the program. A significant body of literature supports the use of ABC counseling with the adolescent population (Bunting & Donley, 2001; Carson & Gillis, 1994; Hans, 2002; Neill, 2003). Therefore, ABC counseling is appropriate for use with the developmental stage of adolescence.

Conceptual Framework

As previously stated, Adventure Based Counseling has been found to increase participant's self-esteem (Herbert, 2001; Neill, 2003; Neill & Richards, 1998; Sibthorp,



2003; Silka & Hart, 1994; Wick & Wick, 1997), and increase empathy and alter perceptions of others (Autry, 2001; Combs, 2001; Cook, 2008; Gillis & Speelman, 2008; Goldenberg et al., 2000; McNamara, 2002). Based on these studies, the researcher hypothesizes that ABC counseling will have a positive impact on adolescent self-esteem and empathy, and will be helpful in reducing perceived racism and racist attitudes. In addition, this study predicts a correlation will exist between increases in self-esteem and empathy, and decreases in perceived racism and racist attitudes; alternatively, higher levels of self-esteem and empathy will be associated with lower levels of perceived racism and racist attitudes.

Historically, measuring the construct of racism has presented difficulties as a result of the many varying interpretations of the concept. It is the belief of the researcher that it is necessary to measure a collective occurrence of racism, both from an adolescent's *experience* as a perceived victim, and as *expressed* through racist attitudes or beliefs as a potential perpetrator. This approach to measuring racism takes into account both the experience of racism, and the expression of racist attitudes.; therefore, the research provides a comprehensive representation of the phenomenon.

For the purposes of this study, the researcher measured both experienced and expressed racism. Perceived racial discrimination is described as a belief that one has been treated unfairly because of one's origin or ethnicity (Mesch et al., 2008, p. 593). Expressed racist attitudes include attitudes and beliefs that corroborate the superiority of certain racial/ethnic groups and denigrate others because of certain phenotypic characteristics (Clark et al., 1999, pg. 237).



Social Identity Theory describes the occurrence of racial discrimination as the result of an attempt to enhance self-esteem and collective efficacy (Tajfel & Turner, 1979; Tajfel, 1978, 1981, 1982). Drawing on the Social Identity Theory, it is the prediction of the researcher that by increasing self-esteem and empathy by means other than the occurrence of discrimination (ABC counseling), a subsequent decrease in racial discrimination will occur.

Terror Management Theory (TMT; Greenberg, Pyszczynski, & Solomon, 1986) provides another account of the link between self-esteem and discrimination. This theory proposes that prejudice and discrimination may be regarded as a specific type of worldview defense, where the mere existence of other worldviews poses a threat to self-esteem (Das, Bushman, Bezemer, Kerkhof, & Vermeulen, 2009). One of the postulates of TMT is that high self-esteem reduces prejudice (Das et al., 2009)

Research by Davis (2004) describes a lack of empathy in adolescents as potentially negative to their worldview by not allowing insight into another's perspective and experience. Dovidio, Gaertner, and Loux (2000), suggest that enhancing empathy and social awareness can lead to a stronger inclusive group identity, resulting in a reduction in perceived racism. McFarland (1998) found a correlation between a lack of empathy and a predisposition toward experiencing and expressing racism.

This study predicts that ABC counseling will result in increased self-esteem and empathy scores, and a decrease in racism scores. Or articulated another way, for each group (ABC vs. control) there will exist a relationship, such that higher scores on self-esteem and empathy will be associated with lower scores on the perception of racial discrimination, and with lower scores on racist attitudes.



Research Questions

The following questions will guide the inquiry of this study:

RQ1: Does Adventure Based Counseling increase high school students' self-esteem?

RQ2: Does Adventure Based Counseling increase high school students' empathy?

RQ3: Does Adventure Based Counseling decrease high school students' perception of racial discrimination occurring in the school?

RQ4: Does Adventure Based Counseling decrease high school students' racist attitudes?

RQ5: Does Adventure Based Counseling decrease high school students' racism-related discipline referrals?

RQ6: For each group (ABC vs. control) is there a relationship between high school students' perceived racial discrimination occurring, racist attitudes, self-esteem and empathy at each time period (baseline, one-week posttest and one-month follow-up)?

RQ7: Is there a significant difference in the observed effects of ABC counseling based on ethnicity, gender, or both?

Definition of Major Terms

Adventure based counseling. A collection or series of events and programs which provide activities for individuals and groups of persons to actively engage in unique problem-solving activities and group process for self-discovery, physical challenge, risk-taking, and group support (Davis-Berman & Berman, 1994).

Culture. Culture refers to the cumulative deposit of knowledge, experience, beliefs, values, attitudes, meanings, hierarchies, religion, notions of time, roles, spatial relations, concepts of the universe, and material objects and possessions acquired by a



group of people in the course of generations through individual and group striving (Hofstede, 1997).

Discrimination. Negative behaviors toward out-groups (Romero & Roberts, 1998).

Empathy. An affective response that originates from a person's comprehension or apprehension of another person's emotional state or condition (Eisenberg & Fabes, 1998).

Ethnic group. A group in which the members have a similar social heritage involving practices, values, and beliefs (Atkinson, Morten, & Sue, 1983; Ocampo, Bernal, & Knight, 1993).

Perceived racial discrimination. A belief that one has been treated unfairly because of one's origin or ethnicity (Mesch et al., 2008).

Prejudice. Prejudice is described by Romero and Roberts (1998) as negative attitudes toward out-groups.

Race. A biological category that is primarily based in physical appearance and not related to learned cultural characteristics (Phinney, 1996).

Racial discrimination. Consists of those practices and actions of dominant groups that have a differential and negative effect on subordinate ethnic groups (Feagin & Eckberg, 1980).

Racism. A system of dominance and power based on the beliefs, behaviors, and institutional arrangements that corroborate the superiority of certain racial/ethnic groups and denigrate others because of certain phenotypic characteristics (Clark et al., 1999). A



belief that one has been treated unfairly because of one's origin or ethnicity (Mesch et al., 2008).

Self-esteem. An individual's sense of his or her value or worth, or the extent to which a person values, approves of, appreciates, prizes, or likes him or herself (Blascovich & Tomaka, 1991); a favorable or unfavorable attitude toward the self (Rosenberg, 1965).

Scope and Delimitation of the Study

For all human beings, the period of life called adolescence has been described as a time when a person's cognitive, social, psychological and biological characteristics are changing from child to adult (Siyez, 2008). For adolescents, this period of life has been described by Lerner and Galambos (1998) as a time of dramatic challenge, one that requires large adjustment to changes in themselves, in their families, and in their peer group. During adolescence, a significantly important developmental task is identity development which includes elements of self-esteem and empathy (Erickson, 1968).

Self-esteem has been described as a central factor of adolescent identity and is associated with pro-social development, positive psychosocial adjustment, mental health, and psychopathology (Swenson & Prelow, 2005). Empathy has been described by Bandura (1999) as a central element of social intelligence, and possession of empathic skills can help understand others, and can function as a shield against all forms of aggression and other difficult adolescent issues.

Racism and racial discrimination are important issues in the United States and around the globe. Racism is not limited to adolescents in schools, but rather is a phenomenon that negatively impacts millions of people around the world in any setting:



places of employment, entertainment, recreation, education, and within families. As such, the study of racism is important and applicable to fields of counseling, social work, education, psychology, medicine, business, and work industries.

Specifically, this study focused on how the ABC counseling intervention affected self-esteem, empathy and racism in a sample of adolescents, not adults or older adults. The treatment in this study, ABC counseling, functioned as the independent variable. Using a treatment and a control group, this study analyzed the effect of the ABC counseling on self-esteem, empathy, perceived, and expressed racism. In addition, the correlations between all four variables were examined and a prediction exploring the relationships between self-esteem, empathy, perceived racism, and racist attitudes was made. An analysis of potentially different effects of ABC counseling based on variables of gender and ethnicity was also conducted.

A clear limitation of this study is the generalizability of its results. Because the sample of this study is from a single high school in the state of Florida, it is reasonable to assume that the external validity and generalizability of the results to all high schools in the entire United States may not always be appropriate.

Overview of Dissertation Chapters

This dissertation is organized into five chapters. Chapter 1 provides an overview of the topics discussed in the study. Chapter 2 includes the historical background in the form of a literature review, as well as the framework on which this study is grounded. Chapter 3 provides a detailed description of research design and the methodology used for this study, the participants, and sampling. Next, the instruments are described as well as their respective psychometric properties; this is followed by the study procedures and



data analysis plan. Chapter 4 includes a comprehensive review of the results of the study by exposition of the questions that guide the inquiry of the study. In Chapter 5, a summary of the study results is presented, followed by a discussion of the study findings in relation to the hypotheses and related literature, and an investigation of study limitations. Finally, suggestions for future research are highlighted, followed by a conclusion.



Chapter Two: Literature Review

In this section, I present a critical discussion of the literature related to ABC counseling and review the background and current status of this counseling method in the United States. This initial discussion is followed by a review of the literature discussing the impact of ABC counseling on self-esteem and empathy. Next, I explore literature related to adolescent racism, and conclude with a discussion of the potential impact of ABC counseling on adolescent racism in high schools and a conclusion.

Adventure Based Counseling

Various groups and organizations in business, education, and human services organizations have utilized outdoor experiential education programs since the 1960s (Niell, 2003). These programs have evolved over the years and have been referred to as ropes courses, challenge courses, challenging outdoor personal experience (COPE), wilderness therapy, adventure based therapy, and Adventure Based Counseling. Most of these different program names appear to be used interchangeably to describe adventure-based outdoor experiential education and differ little in content, with the exception of ABC counseling. ABC counseling has been described as a combination of experiential learning and outdoor education utilizing group counseling techniques (Fletcher & Hinkle, 2002). According to Itin (2001) this is the only experiential adventure program that also incorporates group counseling techniques such as self-disclosure, dyads, active listening and encouragement into its processes (Itin, 2001). Because this study is based in a school



setting and designed to create an opportunity to impact the field of school counseling, and is similar to the United Day ropes program, the researcher has selected to utilize ABC counseling as the primary treatment. In addition, ABC counseling was selected because it is the only experiential adventure program that also incorporates a meaningful and intentional element of group counseling into its processes.

The history of ropes course programs began with a focus on children and adolescents. A ropes course can consist of either low or high elements, or both. Low element courses have a group-oriented focus and allow for participants to engage in interactions that emphasize shared responsibility, which encourages cooperative problemsolving. High element ropes course consist of the same group interactions as in low element courses, and include a combination of both vertical challenges and horizontal challenges, constructed from wood, cable and ropes installed above the ground and strung between trees, wood poles or steel framework. Previous research by Glass and Meyers (2001) established that low and high element ropes courses are most successful when appropriate activities were utilized, proper equipment was used, and the staff was both experienced and well-trained.

The trend of ropes course programs focusing on adolescents and children continued with a specific emphasis on youth ages 13 to 17 years old who are dealing with psychological, sociological, behavioral, emotional, cultural, academic, or family problems (Fletcher & Hinkle, 2002; Moote & Wodarski, 1997). This focus on youth atrisk has led to adventure education research in many settings, such as camps, residential centers, and public schools. Empirical studies beginning in the 1980s established the



efficacy of adventure-based experiential programs positively impacting adolescents and adults in their psychological, social, and vocational functioning (Niell, 2003).

For the purposes of this literature review, my focus is on existing research regarding adventure-based experiential programs such as ropes courses and other challenge course programs and their impact on sociological and psychological issues and experiences. I specifically focus on addressing studies conducted with adolescent populations; however, some studies are included that address particular areas I believe to be important in order to establish the overall efficacy of adventure-based experiential education programs.

Gibson's (1979) historical account of experiential and outdoor adventure education programs explains that these programs first began in the United States in the 1930s, when medical professionals first discovered the benefits of outdoor activities such as therapeutic camping on the psychological needs of their child patients. Fletcher and Hinkle (2002) assert that one of the first structured experiential education programs was Outward Bound. In the 1940s in Wales, Hahn and Holt created the basic tenets of the Outward Bound experiential education program for youth that were planning to enter the armed services. These tenets included leadership skills, communication, risk-taking, and team building.

Hahn and Holt's development of outdoor experiences revolved around the central themes that the program (1) has students pledge themselves to their personal goals, (2) controls for time and location, (3) maintains elements of adventure and risk, (4) operates in small groups to allow for leadership traits to emerge, and (5) includes a component of community service (Fletcher & Hinkle, 2002). Later, after World War II, Outward



Bound expanded the philosophies and guidelines of the program to include additional principles such as fitness, initiative, memory, skill, self-discipline, and compassion.

Outward Bound first emerged from Europe to the United States in the 1960s and laid the foundation and imputes for experiential education programs.

Notably, ABC counseling draws its core principles from experiential education programs such as Outward Bound and group counseling (Itin, 2001). Existing literature provides a clear distinction between ABC counseling and other experiential outdoor education programs: this difference is ABC counseling's inclusion of counseling strategies and techniques into the process of outdoor adventure experiences.

Roberts and Yerkes (2000) assert that in the past 25 years, there has been an increase in research investigating the impact of experiential education. Meyer and Wagner (1998) investigated the short and long-term effects of an ABC counseling process that took place on a single day. Their focus was on examining the impact on team building in athletes, as well as the residual impact on the athlete's performance in the team sport. The participants in this study were adolescent females on a tennis team. An analysis of the data concluded that both individual and group benefits relating to group cohesion were achieved as a result of their participation in the ABC counseling program. Although individual differences existed in regard to the scope and magnitude of the gain, the study concluded that adolescent athletes can attain psychosocial benefits through their participation in an ABC counseling course, such as increased self-esteem and increased leadership skills.

In another study, Glass and Benshoff (2002) examined ABC counseling in conjunction with clinically-based group counseling. Adolescent clients participating in



group counseling were also exposed to the treatment of ABC counseling. This study also focused on a one-day low ropes challenge course focusing on increasing cooperation, while at the same time moving the clients to confront their emotional and physical comfort zones (Glass & Meyers, 2001). Glass and Benshoff (2002) reported that the adolescents who participated in the ABC counseling experienced an increase in group cohesion, and allowed the participants to take responsibility and experience success in the group activities. In addition, the participating adolescents reported they were able to find ways to transfer the learning from the program to their everyday lives.

A study examining the effect of an adventure-based program on the development of resiliency in low-income minority youth was conducted by Green, Kleiber, and Tarrant (2000). In this study, an adventure based ropes course program was offered over the course of a summer and students ages 10-16 were asked to volunteer for participation. The program included low ropes course elements and the program facilitator conducted education processing with the participants prior to, during, and after each activity. The result indicated that overall student resiliency improved significantly. However, the scores declined six weeks after the treatment, indicating a need to further examine the long-term impact of these types of programs.

Neill (2003) asserted that the most effective and relevant way to evaluate the effectiveness of adventure therapy programs was through meta-analyses. Currently there are a few meta-analyses examining studies that have investigated various aspects of adventure based education programs (Bunting & Donley, 2001; Carson & Gillis, 1994; Hans, 2002; Hattie et al., 1997), as well as studies that have summarized meta-analyses in adventure or outdoor education (Neill, 2002; Neill & Richards, 1998). Neill (2003)



summarized the results of all of the above mentioned studies representing a total sample population of 12,000 participants. This researcher concluded that adventure based education had an impact on outcomes such as an increase in self-confidence, locus of control, and self-esteem with an effect size between .3 to .4.

Two meta-analyses of particular importance are the work of Cason and Gillis (1994) and Hattie et al. (1997), whose research suggests that adventure education programs are beneficial to improving one's life effectiveness and dimensions of the self. One notable attribute asserted by Hattie et al. (1997) was that these treatment effects were seen to increase with time as measured in periodic future intervals and that a theme emerged regarding the length of programs, in that longer time lengths tended to yield more positive results. Because of the numerous types of adventure based experiential education programs, Neill (2003) cautioned making blanket claims about the effectiveness of adventure therapy programs. Instead, Neill explains that existing studies examining varieties of adventure therapy programs "suggest potential, and encourage closer analysis of particular types of adventure based programming" (2003, p. 318).

The impact of ABC counseling on adolescent self-esteem. Self-esteem has long been recognized as a vastly important construct in adolescent development (Mandara et al., 2009; Newman & Newman, 2009). Research has established that ABC counseling is efficacious in enhancing adolescent sense of self and self-esteem (Faulkner, 2001; Garst et al., 2001; Neill & Richards, 1998; Wick & Wick, 1997). This change in self-esteem is believed to be the result of participation in problem solving tasks, risk-taking activities, and individual and group processing of the events (Neill & Richards, 1998). Self Determination Theory (SDT) might suggest these elements positively impact



self-esteem by providing competence feedback; or more generally, by satisfying the psychological needs for competence, relatedness, and autonomy. The following studies represent a sample of existing literature addressing the topic of utilizing ABC counseling to increase levels of adolescent self-esteem.

Wick and Wick (1997) investigated the efficacy of adventure therapy improving self-esteem with elementary school children. Their study consisted of six brief sessions using adventure therapy and focused on employing specific adventure therapy tasks based on Adlerian thought. The most significant characteristics of these tasks are: (1) group, (2) unfamiliar, (3) noncompetitive, and (4) cooperative. The participants in this study were 42 fifth grade students at a single elementary school. The researchers used the Piers-Harris Self-Concept Scale (Piers & Harris, 1984) and found a significant increase in self-esteem scores following the adventure therapy interventions.

A study by Garst et al. (2001) examined studies of outdoor adventure programs and their impact on adolescent self-esteem and self perception. These researchers concluded that although some studies support that a positive impact on self-esteem and self perception occurs as a result of one's participation in an adventure education program, other studies show mixed results. In regards to study design, Garst and colleagues found that most researchers examining outdoor adventure programs use quantitative experimental designs with pre-test and post-test questionnaires to evaluate the impact of outdoor adventure program participation. Interestingly, the researchers found that few studies collected longitudinal data to establish the long-term impact of such programs.



Sibthorp (2003) examined the relationship between antecedent factors of participants, self-efficacy, and participant perceptions of the characteristics of a particular outdoor adventure experience. The researcher found that participants' perceptions of characteristics of the adventure experience were found to be associated with positive changes in individually reported self-efficiency. Herbert (2001) conducted a study with supported employment workers who were randomly assigned to participate in an adventure based counseling program. The results indicated those people who were in the experiential treatment group developed greater self-esteem than those from the control group.

Faulkner (2001) evaluated the impact of a ropes course on foster children and parents before and after participating in a low-elements ropes course. The study investigated the effect of the ropes course intervention on self-esteem and cohesion among family members and used a quasi-experimental design with pre and post tests. The scales used included the Self Report Family Instrument, the Kansas Family Life Satisfaction Scale, the Self-Esteem Rating Scale, and the Rosenberg Self-Esteem Scale. An analysis of covariance was conducted and controlled for the variables of ethnicity and income. The Self-Esteem Rating Scale results were found to be significant F (1, 26) = 14.15. p = 0.001, indicating a significant increase in self-esteem scores occurred.

Aghazarian (1996) conducted a mixed methods study on ABC counseling to determine the impact on adolescent self-esteem. A one-day program of ABC counseling was utilized as the treatment for 17 high school students, with a control group comprised of 23 students who did not receive the treatment. Self-esteem was measured three times (pre, post and follow-up) by the Self-Perception Profile for Adolescents, as well as



qualitative data in the form of participant comments. A two-way t-test was conducted to compare gain scores; the results showed a significant increase in global self-esteem for the treatment group as opposed to the control. In addition, a qualitative analysis of the participant comments and feedback on the treatment supported the self-esteem increase.

The impact of ABC counseling on adolescent empathy. Emotional expression and understanding include both verbal and non-verbal expressions of individual feelings as well as focused listening skills and awareness of others (Cook, 2008). ABC counseling programs provide group experiences that allow participants opportunities to experience, express and explore their emotions, as well as to listen and become aware of the emotions of others. This programmatic group experiences has been shown to catalyze a potential increase in interpersonal skills including understanding others and developing increased levels of empathy (Cook, 2008; Russell, 2001). The following studies investigated the impact of ABC counseling in the areas of empathy development, social competence, self-awareness, and awareness of others.

A study conducted by Autry (2001) with adolescent, at-risk girls investigated the impact of ABC counseling on their feelings, their attitudes, and their perceptions of others. In this qualitative study, the researcher sought to explore the feelings, attitudes, and perceptions of at-risk girls subsequent to their participation in an adventure therapy program. Autry analyzed qualitative data from interviews of nine participants between the ages of 13 and 18 years old. Specific themes emerged from data gathered from the participants, including trust, understanding others, empathy, empowerment, teamwork, and the recognition of personal value. The study also indicated that the participants experienced empowerment in these thematic areas.



Boudette (1989) conducted a study to examine a 24-day ABC counseling course as a supplemental component to a traditional probation program. The participants in this study were 69 juvenile offenders who were referred to the program by their probation offices or counselors. Control and treatment groups were utilized in this study and all participants completed the Jesness Inventory Scale, the Global Self-Esteem Scale, a Student Attitude Questionnaire, and a self-report scale prior to their participation. The Jesness Inventory Scale and Global Self-Esteem Scale were administered again at intervals of one month and four months after the completion of the program. Results showed that participants experienced a significant increase in empathy and relatedness to others, self-awareness, and a sense of belonging.

Combs (2001) completed a study to evaluate ABC counseling with at-risk youth and found that the counseling intervention enhanced self-efficacy of the participants, including their experience of empathy and self-competence. This study included an 8-week ABC counseling intervention. Participants completed the Children's Nowwicki-Strickland Internal External Local of Control Scale (CNSIE), the Coopersmith Self-Esteem Inventory (SEI), and the Children's Self-Efficacy for Peer Interaction Scale (SSRS). Each participant completed the scales three times, one before the treatment and twice afterwards in intervals, one week and one month. Repeated measure ANOVAs were completed and the results indicated that the ABC counseling intervention produced a significantly positive change in participant levels of self-understanding and empathy as well as levels of self-efficacy.

A study by Saunders (2002) examined the efficacy of an adolescent leadership program which was primarily based on outdoor, experiential education. The program



lasted one semester and included 67 contact hours with 25 participants. The finding of this qualitative study produced central themes which included increased confidence, self and social awareness, and empathy.

A study by Eagle, Gordon, and Lewis (2000) investigated the impact of a one-day ABC counseling program using challenge ropes course activities with 100 students in a Maryland school district. The 24-item Life Effectiveness Questionnaire (LEQ-H) was completed by all 100 participants who ranged in age from 10-18. The questionnaire was completed twice, once before the treatment and once again 30 days after the experience. A review of the data showed improvement in the areas of empathy, emotional control, emotional understanding, and task leadership.

Additionally, McCormick (1995) completed a descriptive research study which utilized a naturalistic inquiry paradigm to gain insight and understanding into the ways individuals perceive that an adventure counseling experience for couples is useful in building skills for healthy intimate relationships. The participants for this qualitative study included five couples. Interviews were conducted with each participant prior to the 15 hour ABC counseling treatment, which included low and high element challenge activities as well as workshop time in a group counseling format. Telephone interviews were conducted three months after the treatment with all participants. From the data analysis, themes emerged indicating that the participants found value in the ABC counseling treatment relating specifically to self-awareness, empathy, awareness of other, and awareness of relationship issues.

In sum, there have been several studies exploring ABC counseling with adolescents investigating outcomes such as self-esteem and empathy. Most studies have



shown ABC counseling to be efficacious in increasing both self-esteem and empathy of the participants.

The Impact of Racism on High School Adolescents

The impact of racism has been well established in the literature as having detrimental effects on high school adolescents (Alladin, 1996; Dei et al., 1997; Gillborn, 1995; Lee, 2003, 2005; McCarthy & Crichlow, 1993; McLaren & Torres, 1999; Troyna, 1993). Research demonstrates that a substantial number of adolescents in the United States experience discrimination on a consistent basis and these experiences have been found to be associated with negative outcomes such as delinquency and substance abuse (Greene et al., 2006; Gibbons et al., 2007; Rosenbloom & Way, 2004; Seaton, 2006; Simmons et al., 2003). In addition, research investigating the impact of racism on adolescent psychological well-being shows that racism leads to lower self-concept and feelings of hopelessness (Nynorg & Curry, 2003).

The impact of racism on adolescents in the public school setting is also significant. Research supports that adolescent minorities in the United States encounter numerous barriers in the educational system that impact their ability to experience success in school and in their future career attainment (Arbona, 1990; Constantine, Erickson, Banks, & Timberlake, 1998; D'Andrea, 1995; Fisher, Wallace, & Fenton, 2000; Wong et al., 2003). In particular, the school setting has been described in studies as providing elements that support racism such as social exclusion, presence and awareness of racial group stereotypes, and heightened racial salience (Rosenbloom & Way, 2004; Seidman, Allen, Aber, Mitchell, & Feinman, 1994).



Leibkind et al. (2004) examined racism with adolescents and asserted that school functioning is adversely impacted, resulting in deficiencies in academics, discipline, attendance, social skills, and peer relationships. Research also shows that a negative correlation exists between the academic achievement of adolescent ethnic minorities and racism (Fisher et al., 2000; Small et al., 2007; Steele, 1997; Wong et al., 2003). In addition, studies have found that adolescent school functioning, accomplishments achieved in school, and adolescent attitudes toward school are adversely effected by the perception that racial discrimination exists (Foster, 2000; Liebkin et al., 2004; Vega et al., 1987; Vega & Rumbaut, 1991).

The potential impact of ABC counseling on racism. ABC counseling has been found through empirical research to positively impact participant self-esteem, self-efficacy, and self-concept (Herbert, 2001; Neill, 2003; Neill & Richards, 1998; Sibthorp, 2003; Silka & Hart, 1994; Wick & Wick, 1997), as well as to increase empathy, interpersonal skills, and understanding of others (Autry, 2001; Combs, 2001; Cook, 2008; Russell, 2001). Although there have been many studies examining the impact of ABC counseling with adolescents in various areas, literature specifically addressing ABC counseling as a treatment for reducing racism is lacking. Searches based on PsycINFO (EBSCO), MEDLINE (CSA), ERIC (Cambridge Scientific Abstracts), Wilson Omnifile Full Text Mega Edition, and Academic Search Premier with key terms such as Adventure Based Counseling, ABC counseling, Ropes Course, Racism, Discrimination, and Racist produced no results. The potential impact of ABC counseling reducing racism is established by the theoretical assumptions of the Social Identity Theory (Tajfel & Turner,



1979) and research by Davis (2004), Dovidio et al. (2000), Hong et al. (2004), and McFarland (1998), and our own observations in our high school.

Based on Social Identity Theory, adolescents treat their social group and other groups differently, often favoring their in-group while discriminating against out-groups (Tajfel, Flament, Billig, & Bundy, 1971). Houston and Andreopoulou (2003) assert that human beings possess an innate need for positive self-esteem, and as a result, threatened or low self-esteem will motivate individuals toward intergroup discrimination. Tajfel and Turner (1979) suggest that an individual's self-esteem is viewed as being significantly linked to the actions and shared identities of the groups to which they belong. The Social Identity Theory describes the occurrence of discrimination as the result of groups attempting to enhance individual self-esteem and collective group efficacy (Tajfel & Turner, 1979; Tajfel, 1978, 1981, 1982).

Summary

It is clear from existing literature that ABC counseling produces positive outcomes with adolescents and adults in various areas including self-esteem, self-efficacy, and self-concept (Herbert, 2001; Neill, 2003; Neill & Richards, 1998; Sibthorp, 2003; Silka & Hart, 1994; Wick & Wick, 1997), increasing empathy, interpersonal skills, and understanding of others (Autry, 2001; Combs, 2001; Cook, 2008; Russell, 2001); self confidence, locus of control and life-effectiveness (Cason & Gillis; 1994; Hattie et al., 1997; Newberry & Lindsay, 2000), group cohesiveness, team building, and group perceptions (Bolduc, 1998; Glass & Benshoff, 2002; Meyer & Wagner, 1998; Priest, 1998; Steinfel, 1997), and adolescent resiliency (Green et al., 2000). As a result of this



comprehensive literature review, no studies were found that address the impact of ABC counseling on adolescent racism.

It is clear that self-esteem and empathy are vitally important elements in adolescent development and play key roles in the social-emotional experience of high school adolescents (Newman & Newman, 2009). In addition, the efficacy of ABC counseling positively impacting these variables has been well-established in the literature. There were, however, no studies found that address self-esteem and empathy related to ABC counseling and racism. It is the belief of the researcher after reviewing existing research that by enhancing self-esteem and empathy using ABC counseling, a reduction in perceived racism and racist attitudes may be achieved by those adolescents engaged in the treatment.



Chapter Three: Methodology

In Chapter three, I present the research questions, structure, and design of the proposed study. I will provide a description of the participants, sample size justification, sampling method, and a thorough explanation of the instruments to be used. Next, I will include a thorough explanation of the data collection and instrument implementation procedures. I will provide the data analysis plan, and conclude with a discussion of the limitations of the study.

Research Design

In this study, a cross-sectional quantitative research design was used to investigate subset populations comparing differences among subjects in two groups of a single treatment. A descriptive statistical approach was utilized for tabulating, depicting and describing sets of data collected from participants and teacher observers completing preand post-surveys (Glass & Hopkins, 1996). Inferential statistics were used to establish the occurrence of statistical difference between control and ABC counseling group for each outcome variable: self-esteem, empathy, perceived racial discrimination, and racist attitudes. Correlational statistics were used to examine the relationships between outcome variables. Finally, an inferential statistical approach was used to examine differences by group and time for the variables: gender, ethnicity, total discipline referrals, racism-related discipline referrals, attendance and grade point average.



This study examined the dependent or criterion variables self-esteem, empathy, perceived racial discrimination, and racist attitudes. Additional dependent variables used in the ancillary analysis included total discipline referrals, racism-related discipline referrals, attendance, and grade point average. The independent or predictor variable for this study was ABC counseling serving as the treatment. Additional variables examined included gender and ethnicity; these were grouping variables—independent variables used in the analysis for hypothesis 7.

The dependent variables self-esteem, empathy, perceived racial discrimination, and racist attitudes were measured at baseline, one-week posttest, and one-month follow-up. The study specifically sought to establish any significant differences that occurred between the control and ABC groups for two time periods: baseline to one-week posttest, and one-week posttest to one-month follow-up. The rational for measuring these two time periods was to establish if any significant changes occurred immediately following the treatment (baseline to one-week posttest), as well as to determine if the treatment continued to produce a significant effect from one-week posttest to one-month follow-up.

The ABC counseling facility selected for this study was the local YMCA. The facility is located on a 10-acre wooded property, at a reasonable distance from the high school, and includes large open space for the low elements; high elements include a 65 foot Alpine Tower, and a 55-foot multi-faced climbing wall. All the staff members at this YMCA are trained in the ABC counseling model. This four-day, 28-hour training is conducted at the Project Adventure headquarters in Massachusetts, which is recognized in the field as a premiere training site for this type of adventure counseling in the United States. The two trainers who conducted the ABC counseling program for this study



completed the Project Adventure ABC counseling training: one trainer was approaching completion of his master's degree in counseling, and one trainer had completed her bachelor's degree in recreation.

To reduce potential biases and threats to the study, methodological precautions were taken. First, a double-blind experimental method was utilized. A double-blind experiment is an experimental method used to ensure impartiality, and avoid errors arising from bias (Shuttleworth, 2008). This approach was used to both ensure participants' confidentiality and eliminate subjective biases on the part of the student participants, the four teachers assisting with the research, and the researcher. Because the researcher and teachers work with this population of students, the double-blind model greatly lessened the potential impact of conscious or unconscious biases by eliminating possible contamination of sample selection or data by subjectivity. Second, because the primary researcher is also an assistant principal at the study site, arrangements were made for him to stay removed from the students; the teachers handled sampling, instrument administration, data collection, and ABC counseling supervision.

ABC counseling format. The ABC counseling format used for this intervention included team building activities, leadership skill building, problem solving, and physical challenges. The first half of the day consisted of several low rope course activities intermixed with group counseling and the second half of the day included the same group counseling component with two high ropes course elements. Each activity was always followed by a leader-led group process, similar to group counseling. The participants were asked to share perspectives on their personal contribution to the group, their experience in the group, and the group's ability to function together as a whole. In each



group process activity the leaders included themes of diversity, tolerance, world view, and perceptions of others. During the ABC counseling program the students were often divided into their respective groups of 18 and asked to function as a group to solve various puzzles, problems, and activities. The group counseling components mostly took place in these smaller group formats.

Prior to conducting this study, the study proposal was submitted to the University's Institutional Review Board (IRB). Once approved by the IRB, participant recruitment began.

Participants

A sample of 108 students attending a large suburban high school in a southern state of United States participated in this study. Participants in this study included 36 (33.3%) African American, 36 (33.3%) Caucasian, and 36 (33.3%) Latina/o students attending grades 9-12. The gender of the participants was comprised of 54 (50%) males and 54 (50%) females. The age range of the participants was approximately 14-18 years old; data on age was not collected on participants.

The participants in this study were recruited from four teachers' classrooms at the high school where the researcher is an assistant principal and special actions to reduce potential biases were taken (see Research Methods for a description of these actions). These four teachers volunteered to assist with the study, and were recruited by the researcher because of their ethnically diverse classrooms, and their willingness to further research in the area of the study. In addition, these teachers were recruited because the courses they teach are all "core" courses, meaning that the entire student body must take the courses, not a specific population or special subgroup. The teachers understood that



by participating they would also chaperone the ABC counseling events functioning as 'observers,' assist with collecting the student measurements, and complete two surveys.

The four teachers announced the study to their students, reading a script provided by the researcher (see Appendix A). Participation was voluntary and interested students received permission forms that included the Institutional Review Board Parental Consent (see Appendix B) and the Institutional Review Board Student Assent (Appendix C), and the YMCA Ropes Course liability release (see Appendix D). Students were given one week to return the packets. The four teachers collected a total of 252 returned and completed permission packets out of 291 distributed, a response rate of 86%.

The permission packets were given by the teachers to a secretary who has no knowledge of the research design and who agreed to assist with the returned information but was not involved in any other practical aspects of the research. The secretary was given instructions to assign a sequential number to each of the returned student permission packets. In addition, a letter was added next to the number to represent the student's ethnicity; "L" for Latina/o, "A" for African American, and "C" for Caucasian. Then, a second letter was added to represent the student's gender, M or F accordingly. Thus, each student that returned a signed permission packet was assigned a number to represent him/her, a letter to represent their ethnicity, and a letter to represent their gender such as "31AF." This would indicate student number 31 is an African American Female. Because this study is specifically examining African American, Latina/o and Caucasian adolescents, nine permission packets received from students of other ethnicities were not included. A total of 243 completed packages were included in the study.



To protect the confidentially of the participants, the 243 participant permission packets, each containing a code next to the student name, were entered by the secretary into a spreadsheet. This data included the student names and two identifying codes, each entered into a separate Excel cell. The data input was then double-checked for accuracy by a second secretary, who did not have any additional knowledge of the research nor participated in any other procedures involved in it. The permission packets containing the student names were locked in a secure cabinet in a locked private room. The master file containing the student names and identifying codes was stored as an encrypted file, on a password protected computer in a locked and secure office. The researcher was provided with a modified master list of coded potential participants (no student names), with the identifying codes only indicating student number, ethnicity and gender. Both secretaries were given explicit instructions on data input procedures including the importance of following protocol to maintain student confidentiality.

Sample Size Justification

Cohen (1992b) describes the importance in research of establishing an appropriate sample size necessary for the statistical analysis with considerations of power, population effect size, and level of significance. Cohen (1992b) wrote:

Statistical power analysis exploits the relationships among the four variables involved in statistical inference: sample size (N), significance criterion (ft), population effect size (ES), and statistical power. For any statistical model, these relationships are such that each is a function of the other three. For example, in power reviews, for any given statistical test, we can determine power for given a,



N, and ES. For research planning, however, it is most useful to determine the N necessary to have a specified power for given *a* and ES. (p. 99)

It is important to determine when to reject the null hypothesis (i.e., the probability of committing a Type I error), and this is accomplished through the determination of an acceptable significance level. For this study the standard values for significance level represented by α are set according to Aczel and Sounderpandian (2006) at 10%, 5%, and 1%. An $\alpha=.05$ corresponds to $(1-\alpha)=0.95$ probability of a correct statistical conclusion when the null hypothesis is true (Lipsey, 1990). A .95 probability is equivalent to a 95% confidence level to reject H_0 (Aczel & Sounderpandian, 2006). For the purposes of this research, the level $\alpha=.05$, the most commonly designated value in social science research for this parameter, was used for the analysis (Lipsey, 1990).

The probability of rejecting the null hypothesis when the null hypothesis is false is referred to as the power of significance test. An acceptable level of power for the proposed study is .80, making the Type II error four times as likely as the Type I error. Cohen (1992a) asserts that because it is usually more serious to make a false positive claim than it is to make a false negative claim, .80 is an acceptable level and for this study was considered in determining the sample size a priori.

Regarding regression, Cohen (1992a) asserts that effect sizes are small if they are .02, medium if they are .15 and large if they are .35. Regarding a correlation, effect sizes are small if they are .10, medium if they are .30, and large if they are .50. Cohen discusses that in choosing an effect size, researchers need to decide how small a difference they are willing to accept and still find the results worthwhile. A large sample is required in order to allow a very small effect size. On the contrary, a small sample size



is required to allow a large effect size. Thus, the power of a test is proportionate to the sample size with greater power from a larger effect size. A medium effect size is appropriate for the proposed study and was used in the determination of the sample size.

The proposed study includes correlations, ANOVAs, and regression analyses. Of these, the correlation analyses require the most stringent sample size. Considering the medium effect size of .30, a generally accepted power of .80, and a .05 level of significance, the necessary sample size to achieve empirical validity is a total of 85 participants (Cohen, 1992a). The size of the sample used in this study is 108 and exceeds the required sample size.

Sampling

A stratified sampling method, also known as proportional random sampling was used for this study. The students were divided into homogeneous subgroups and then assigned using a simple random sample into 6 groups. This sampling approach was most appropriate because the study sought to examine distinct categories of ethnicities; African American, Latina/o, and Caucasian. The coded list of 243 potential participants was organized by the researcher into separate categories containing 48 Caucasian males, 30 Latino males, 23 African American males, 70 Caucasian females, 41 Latina females, and 31 African American females. Each stratum was then sampled as an independent subpopulation, out of which individual elements were randomly selected. Based on the sample size justification, this study included a total of 108 participants. To insure that the sample represented a balanced number of Caucasian, African America, Latina/o, male and female students, the stratified sampling process allowed the researcher to randomly and anomalously[sp?] select 6 groups of 18 students. Each group contained the following



categories: 3 African American males, 3 African American females, 3 Latino males, 3 Latina females, 3 Caucasian males, and 3 Caucasian females.

The researcher used a random number table to create the 6 randomly balanced groups. The coded data was provided to the secretary who created a list of student names. The list with the student names was given to the four teachers with instructions to notify the students who were selected for study and the group number that they were assigned.

All students were informed that the selection process was random, and the four teachers were asked to present a short classroom lesson on basic statistical random selection that the researcher supplied. Students who were not selected as participants were placed on a waiting list and informed that if a place opened, they may be asked to participate. During the day of the ABC counseling event four substitute teachers taught the remaining students. No additional class work was given to this group; the day was used as review time and a study hall.

All student participants and parents were informed that students could refuse to participate in the study at any time with no consequence. During the course of this study, three students chose to withdraw or were unable to participate in the ABC counseling event. For sampling purposes, these three participants were replaced with students from the original waiting list.

School-Based Student Data

At the high school where this study took place, inter-racial violence and racial discrimination are measured through discipline incidents and documented on discipline referrals. Specific codes are used to indicate if an incident was racism-related. In order



to operationally define and measure the behavioral occurrence of racism, as well as the potential impact of the ABC counseling treatment, student behavioral data were gathered. This behavioral data included the number of general discipline referrals from all categories and the number of specific discipline referrals that were racism-related. In addition, data on student attendance and academic performance were collected to establish if there was any residual impact from the ABC counseling treatment on these variables. Attendance data measured truancy represented by the total number of unexcused absences. Unexcused absences are those where the student is unaccounted for and recognized by the school district as truant. Baseline data for discipline referrals and attendance was collected for a period of one month prior to the intervention, while outcome data was collected for one month after the intervention. Academic performance was measured by grade point average (GPA). Baseline was taken from the semester GPA before the ABC counseling treatment, and outcome was taken from the third quarter GPA after the treatment, given that the follow-up was only a month afterwards.

All student behavioral data information was pulled from the school database by a secretary naïve to the research and total numbers for each student, control and experimental, were entered into a master spreadsheet. All data entered was non-identifiable to any of the participants. The participants' confidentiality was protected on the master data sheet by coding each participant with a corresponding number.

Instruments

The instrument utilized in this study will be described and explained in the following sections.



Rosenberg Self-Esteem Scale. The Rosenberg Self-Esteem Scale (see Appendix E) was developed by Rosenberg (1965) and used as a global measure of self-esteem, including self-respect and self-acceptance. The 10-item self-report questionnaire utilizes a 4-point Likert-type scale that ranges from "strongly disagree" (1) to "strongly agree" (4). A few sample items from the instrument are (1) I feel that I'm a person of worth, at least on an equal plane with others, and (2) I feel that I have a number of good qualities. Total points range from 0-30; 30 indicates the highest possible score and high scores relate to greater self-esteem. The Rosenberg Self-Esteem Scale operationally defines self-esteem with this instrument as scores above 25 indicating high self-esteem, scores between 15 and 25 within normal range, and scores below 15 suggesting low self-esteem.

This instrument was developed on a sample of 5,024 high school students in New York State and is shown to have high reliability. Test-retest correlation coefficients range from .77 to .85 and Cronbach's alpha range from .74- .80, depending upon the sample (see Mccarthy & Hoge, 1982; Silbert & Tippett, 1965; and Shahani, Dipboye, & Phillips, 1990 for details).

Multiple studies have validated use of the Rosenberg Self-Esteem Scale with various adolescent populations such as Latina/o, African American, Caucasian, and biethnic adolescents (Connor, Poyrazli, Ferrer-Wreder, & Grahame, 2004), Chinese adolescents (Song, Thompson, & Ferrer, 2009), and across age groups with White and African American adolescents and adults (Whiteside-Mansell & Corwyn, 2003).

This instrument is known as the most widely used and accepted measurement of self-esteem. It was selected for use in this study based on its extensive usage with and established appropriateness for research with the adolescent population.



General Ethnic Discrimination Scale. The General Ethnic Discrimination Scale (GEDS) is an 18-item self-report questionnaire that measures perceived ethnic discrimination. This scale (see Appendix F) measures the degree to which participants feel discriminated against. This instrument provides the opportunity to measure participant responses related to perceiving racial discrimination in "the past year," in their "entire life," and the stress level experienced as a result of the racism. For the preset study, the researcher measured the participants' perception of racism in the "current school year." This was clearly indicated in the directions for the students completing the instrument.

The 18-item self-report questionnaire utilizes a 6-point Likert-type scale that ranges from 1 "never" to 6 "almost all the time." The first two items of the scale are: (1) How often have you been treated unfairly by teachers because of your race/ethnic group? And, (2) How often have you been treated unfairly by your employers, bosses and supervisors because of your race/ethnic group?

Total points range from 0-90; 90 indicates the highest possible score. Originally developed for use with African Americans, the GED scale has been utilized with other race/ethnic groups (Landrine, Klonoff, Corral, Fernandez & Roesch, 2006). Internal consistency reliability was shown to be high for four major ethnic groups with Cronbach's alpha ranging between .91-.95 for Whites, .93-.95 for African Americans, .93-.94 for Latinos and .91-.94 for Asian Americans (Landrine et al, 2006). It has a reading level of grade 5.4 (Flesch, 1948, 1974 in Landrine et al, 2006).

Factorial validity supports the scale as a measure of the underlying construct of perceived ethnic discrimination, with strong factor loadings that range between .82 and



.99 for a sample of multi-ethnic adults, and between .80 and .98 for a sample of collegeage students from four ethnic groups, African American, Asian, Latina/o, and Caucasian (Landrine et al, 2006). This study used the GED to examine several ethnic groups and found that women experience less discrimination than men, and that African Americans report more discrimination than Asian Americans. Asian Americans report higher levels than Latinos over their lifetime, and all groups reported more perceived discrimination than Caucasian Americans (Landrine et al., 2006).

Previous research has indicated that the GED demonstrates high internal consistency (r=.94 –.95), one-month test–retest reliability (r=.95–.96) and validity (Klonoff & Landrine, 1999, 2000; Landrine & Klonoff, 1996, 2000; Landrine et al., 2006), and adequately differentiates frequency of discriminatory events across ethnic groups (Landrine et al., 2006). In a study by Hwang and Goto (2008), the researchers examined perceived discrimination with a sample of 186 Latina/o and Asian young adults from a local college. In this study, the GED demonstrated strong internal consistency (r=.94 –.95).

There is no published cut-off that defines excessive perceptions of racism occurring related to this scale. For the purposes of this study the following operational definitions of perceived racism were used; above 60 indicates an elevated level of perceived racial discrimination, 30-60 indicates a moderate amount, and below 30 indicates a low amount. This decision was based on a similar model provided by McConahay (1986) for the *Modern Racism Scale*.

There are a very limited number of instruments examining perceived ethnic discrimination. This instrument was selected for use with this study because it is the only



existing scale measuring perceived racism that has established reliability with the three ethnic groups in this study, African Americans, Latina/os, and Caucasians.

Basic Empathy Scale. The Basic Empathy Scale (BES) was developed by Jolliffe and Farrington (2006), who examined the relationship between low empathy and aggressive behaviors with adolescents such as bullying (see Appendix G). The scale measures two components of empathic responsiveness, including emotional congruence with another individual's emotions (affective empathy) and the ability to understand another individual's emotions (cognitive empathy). The 20-item questionnaire asks participants to endorse their level of agreement with items based on a 5-point Likert scale that ranges from 1 ("strongly disagree") to 5 ("strongly agree"). Sample items from the instrument include (a) My friend's emotions don't affect me much, and (b) After being with a friend who is sad about something, I usually feel sad.

There is a possible total score of 80, and no published operational definition exists regarding the BES. For this study, scores above 54 indicate an elevated level of perceived racial discrimination, 28-54 a moderate level, and below 28 a low level. This was created after Rosenberg's (1965) model for the *Rosenberg Self-Esteem Scale*.

The instrument includes two subscales, the Affective BES subscale and the Cognitive BES subscale, which can be used individually or combined for a total score (BES Total score). For this study, the BES Total score was used to provide a single measure of empathy. Factorial validity supports the scale as a measure of two underlying constructs (affective empathy and cognitive empathy). Cronbach's alpha values for the cognitive scale (alpha = .79) and the affective scale (alpha = .85) were sufficient or better. Nine items correspond to the cognitive scale and 11 items correspond to the



affective scale. The two subscales were shown to be well-correlated with a sample of 720 adolescents; males (r = .41) and females (r = .43). Furthermore, convergent validity was demonstrated with other measures on sympathy, perspective taking, agreeableness, conscientiousness, and openness (Jolliffe & Farrington, 2006).

A study by D'Ambrosio, Olivier, Didon, and Besche (2008) utilized the BES with a sample of 446 French adolescents. Although no specific ethnicities were reported in this study, results showed an internal consistency of the BES as measured by the Cronbach coefficient of 0.80 (0.77 for affective empathy measured on 11 items and 0.66 for cognitive empathy measured on 9 items). The temporal stability coefficient (with correction for attenuation) was 0.83.

This instrument has been established as having sufficient construct validity, both convergent and divergent, and was originally designed for young persons and adolescents (Jolliffe & Farrington, 2006). For these reasons, the Basic Empathy Scale was selected for use with this study for this study.

Modern Racism Scale. The Modern Racism Scale (see Appendix H) was developed in 1986 by McConahay. The scale was originally developed to measure the extent of persons' racial attitudes and beliefs toward African Americans, but Ducote-Sabey (1999) modified the wording by substituting the word *minority* for Black to apply the measure to all minority groups. The scale has seven items, and responses are rated on a 5-point Likert scale ranging from 1 ("strongly disagree") to 5 ("strongly agree"). Sample items from the instrument include (a) It is easy to understand the anger of minority people in America, and (b) Discrimination against minorities is no longer a problem in the United States. A total score of 28 is obtained by summing the ratings on



each of the seven items. No research exists that operationally defines the cut-offs for racists attitudes. For the present study, a score above 19 indicates an elevated racist attitude, 9-19 a moderate level, and below 9 a low level or lack of racist attitude.

Internal consistency reliability estimates were established in several samples with alpha coefficients ranging from .75 to .86, considered moderate to moderately high.

Test-retest reliabilities range from moderate to high (.72 to .93) among these samples, factor analysis supported the items as a distinct construct (McConahay, 1986).

There is sound evidence that supports the Modern Racism Scale's convergent, divergent, and predictive validity. The MRS correlates with political conservatism (Feldman & Huddy, 2005) as well as with other measures of prejudice (Ziegert & Hanges, 2005). The MRS predicts attitudes toward racial policies (Henry & Sears, 2002; McConahay, 1986), and political conservatism and other forms of prejudice (Sears & Henry, 2005). The Modern Racism Scale has been refined (Henry & Sears, 2002), primarily to fit modern social contexts and minority groups such as women (Swim, Aikin, Hall, & Hunter, 1995), Asians (Son Hing, Li, & Zanna, 2002) and visible minorities (Bobocel, Son Hing, Davey, Stanley, & Zanna, 1998).

The Modern Racism Scale is the most widely used and recognized instrument designed to measure racists attitudes (Ziegert & Hanges, 2005). Convergent, divergent, and predictive validity has been established with multiple populations. It is for these reasons that this scale was selected for use in this study.

Perception of Racism Existing in the School Survey. This survey (see Appendix I) was created by the researcher for this study for the purpose of reporting student participant and teacher observers' perceptions of racism existing in the school.



This survey serves an important function by reporting the perceptions of both students and teachers regarding perceived presence of racism in the school, and thereby confirming the need for this research. The survey has three items, and responses are rated on a 5-point Likert scale ranging from 1 ("strongly disagree") to 5 ("strongly agree"). The three items on the instrument include (a) I believe that students in this school often act in a racist manner toward other students who are of a different race from themselves, (b) I believe that teachers in this school often act in a racist manner toward students or other teachers who are of a different race from themselves, and (c) I believe that administrators in this school often act in a racist manner toward students or teachers who are a different race from themselves. The survey was designed to be given one time to all participants and teacher observers prior to the intervention. Currently no psychometric properties have been established for the survey, and no consistency alphas exist. The survey results were presented with descriptive statistics, differentiating gender, ethnicity, control, experimental, and teacher observers.

Prior Exposure and Sensitivity to Other Races Survey. This survey (see Appendix J) was developed by the researcher with the purpose of examining participants' prior exposure and sensitivity to other races. As discussed, each of the 6 sample groups is mixed ethnically and contains equal amounts of African American, Latino, and Caucasian students. A body of literature exists discussing how mere exposure to the outgroup and cross-racial contact can reduce bias and prejudice (Ebert, 2004; Pettigrew, 2008; Pettigrew & Tropp, 2006; Zajonc, 1968, 2001). This survey examines participants' previous exposure to other races, and sensitivity to other cultures and ethnicities. Sample questions include (a) In my life, I have NOT been exposed to a lot of people who are of a



different race than I am (reverse coded), (b) I am *sensitive* to the experiences of people of other cultures and races that are different from my own culture or race, and (c) I have traveled around the United States and/or foreign countries and have experienced cultures and races different than my own. The survey has four items. Responses are rated on a 5-point Likert scale ranging from 1 ("strongly disagree") to 5 ("strongly agree"). The survey was designed to be given one time to all participants prior to the intervention. Currently no psychometric properties have been established for the survey, and no consistency alphas exist. The survey results were presented with descriptive statistics, differentiating gender, ethnicity, control, and experimental.

Experience in ABC Counseling Survey. This survey (see Appendix K) was created by the researcher for the purpose of reporting the student participants' experience in the ABC counseling event. In particular, the survey asks about the participants' experience with physical touch in the ABC counseling event, their opinion on whether the intervention altered their perception of other people, and whether it influenced how they feel about themselves and the potential of ABC counseling reducing racism.

The survey has five items. Participant responses are rated on a 5-point Likert scale ranging from 1 ("strongly disagree") to 5 ("strongly agree"). Sample questions include (a) The physical contact with other students made me uncomfortable, (b) The Adventure Based Counseling experience changed how I view others in a positive way, and (c) I believe that Adventure Based Counseling has the potential to reduce racism in high schools. The survey was designed to be given one time to all participants in the experimental group one week after the intervention. Currently no psychometric properties have been established for the survey, and no consistency alphas exist. The



survey results were presented with descriptive statistics, differentiating gender and ethnicity.

Perceptions of the Students' Experience in ABC Counseling Survey. This survey (see Appendix L) was developed by the researcher to gather information on the teacher observers' perceptions of the students' experience in the ABC counseling event. Similar to the student ABC counseling experience survey, this instrument asked the same questions, worded from the teacher's perspective. The survey has five items. Teacher responses are rated on a 5-point Likert scale ranging from 1 ("strongly disagree") to 5 ("strongly agree"). Sample questions include (a) I believe the physical contact with other students made some students uncomfortable, (b) I feel the Adventure Based Counseling experience changed how students view other students, leading them to view others in a more positive way, and (c) I believe that Adventure Based Counseling has the potential to reduce racism in high schools. The survey was designed to be given one time to teacher observers one week after the intervention. Currently no psychometric properties have been established for the survey, and no consistency alphas exist. The survey results were presented with descriptive statistics.

Procedure

Two events of ABC counseling took place, the first included students from groups 1, 3, and 5. The second ABC counseling event took place approximately 1 month later for groups 2, 4, and 6. To support the double-blind methodology, neither the teachers nor the participants knew if the first or second ABC counseling event was the experimental or the control. The researcher established that the first ABC counseling event would serve as the experimental group, and the second as the control. For this reason, all the



instruments were administered to the control group before they completed their ABC counseling event, including the pretest, one-week follow-up, and one-month follow-up. The control groups' ABC counseling event took place shortly after the one-month follow-up instruments were administered. Because a secretary did all the data input, the researcher was not exposed to any of the participant names during the entire study.

A total of seven instruments were administered to the student participants in this study; four scales and three surveys. Regarding which participants specifically completed each instrument, a small variance exists between the control and experimental groups as noted below. The instruments were administered on three separate occasions, two days prior to the ABC counseling event, one week after, and one month after. All measurements were administered to the student participants in a classroom setting by a teacher participant. At each of the three occurrences, adequate time (fifty minutes) was given for students to complete the instruments in class. Each instrument packet was previously labeled with a number that corresponded to a student participant. Teachers distributed the instrument packets to the respective students according to a master list that proctors were provided identifying students and their assigned number. This same number was used on all measurements administered to the participants. Teachers informed student participants each time before completing the documents that the materials they were completing were confidential. While participants were completing the measurements, other students in the class who were not completing an instrument were engaged in a silent reading activity.

After each instrument was administered, the teacher proctor bundled the completed instruments in a sealed envelope and personally delivered it to the researcher



the same day. The completed instruments were then given to the data secretary for input and afterwards secured in a locked cabinet. Teachers in this State are very experienced with handling and proctoring high-stakes exams: in fact, each year, mandatory professional development training occurs communicating the importance of maintaining test security and confidentiality. This includes procedures for securing raw test data and transporting materials from room to room.

Two days prior to the ABC counseling treatment, all student participants (control and experimental) completed two surveys and four scales: Perception of Racism Existing in the School, Prior Exposure and Sensitivity to Other Races, Rosenberg Self-Esteem, Basic Empathy Scale, General Ethnic Discrimination, and Modern Racism. The six instruments were combined together into a single packet for ease and organization. The packet was copied in light blue paper to distinguish it as the pretest.

One week after the experimental group completed ABC counseling, the experimental and control groups completed four scales; Rosenberg Self-Esteem, Basic Empathy Scale, General Ethnic Discrimination, and Modern Racism. The experimental group completed an additional survey; Experience in the ABC counseling Event. The control group did not complete this survey. The five instruments for the experimental group and the four instruments for the control group were combined together into two different packets and copied in white paper (experimental) and pink paper (control) to signify the one-week posttest.

One month after the experimental group completed the ABC counseling event, the experimental and control groups completed four scales: Rosenberg Self-Esteem, Basic Empathy, General Ethnic Discrimination, and Modern Racism. The four instruments



were combined together into a single packet and copied in lime-green paper to distinguish it as the one-month follow-up.

Two days prior to the ABC counseling event, the four teacher observers completed the *Perception of Racism Existing in the School* survey. This was the same survey that the students completed. After witnessing the ABC counseling event, the same teachers completed a survey that measured their *Perceptions of the Students' Experience in the ABC Event.* Teacher observers were given a two-day window to complete each of the surveys. Teachers returned the completed surveys directly to the data entry secretary. The four teacher participants did not write their name on the surveys; they were assigned an identifying number which was pre-printed on both the pre- and post-surveys.

Data Analysis

Data were entered into SPSS version 18.0 for Windows for analysis. Descriptive statistics were used to describe the sample characteristics. This included material collected on demographic information as well as data related to baseline (pretest) and outcome (posttest). Baseline and outcome records were collected on the following student behavioral data: total number of discipline referrals, the number of racism-related discipline referrals, the total number of unexcused absences (Attendance), and student Grade point average (GPA). Baseline data for student behavior was collected for a period of one month prior to the intervention, while outcome data was collected for one month after the intervention.

Students completed a pretest survey about their *Perception of Racism Existing in the School*, and a survey about their *Prior Exposure and Sensitivity to Other Races*.



Students who participated in ABC counseling first, completed a questionnaire regarding their *Experience in Adventure Based Counseling*. Similarly, teacher observers completed a post intervention questionnaire about their *Perceptions of the Students' Experience in ABC Counseling* and a pretest survey about their *Perception of Racism Existing in the School*. Information obtained from these questionnaires is described in frequencies and percentages.

The descriptive statistics will include the frequencies and percentages, means and standard deviations. Means and standard deviations were carried out on interval/ratio data, and for categorical or nominal data, frequencies and percentages were conducted (Howell, 2010).

For all analyses Adventure Based Counseling group (i.e., a predictor variable) was dichotomous (students either participated in the counseling [yes] or they did not [no]). These were dummy coded to 1 (participated) and 0 (did not participate).

Research question 1. Does Adventure Based Counseling increase high school students' self-esteem?

 ${
m H2}_{
m ol}$: Adventure Based Counseling will not increase high school students' self-esteem from baseline to one-week posttest.

 ${
m H2}_{\rm o2}$: Adventure Based Counseling will not increase high school students' self-esteem from one-week posttest to one-month follow-up.

H2_{a1}: Adventure Based Counseling will result in increases in high school students' self-esteem from baseline to one-week posttest.

H2_{a2}: Adventure Based Counseling will result in increases in high school students' self-esteem from one-week posttest to one-month follow-up.



To investigate research question 1, hierarchical regressions were conducted to assess if Adventure Based Counseling impacts high school students' self-esteem. Self-esteem at baseline, one-week, and one-month are continuous or interval variable measured by the *Rosenberg Self-Esteem Scale*.

The first regression examined whether self-esteem scores changed from baseline to one-week as a result of the ABC intervention. At step 1, the mean-centered self-esteem baseline scores were entered into the model along with the group membership variable. At step 2, the interaction term (group*centered baseline self-esteem) were entered which investigated the interaction between the self-esteem baseline score and group. The outcome variable in this regression was self-esteem at one-week.

The second regression examined whether self-esteem scores changed between one-week and one-month. At step 1, the mean-centered self-esteem one-week scores were entered into the model along with the group membership variable. At step 2, the interaction term (group*centered self-esteem one-week posttest) was entered which investigated the interaction between the self-esteem one-week scores and group. The outcome variable in this regression was self-esteem at one-month.

Research question 2. Does Adventure Based Counseling increase high school students' Empathy?

H2_{o1}: Adventure Based Counseling will not increase high school students' empathy from baseline to one-week posttest.

 $H2_{o2}$: Adventure Based Counseling will not increase high school students' empathy from one-week posttest to one-month follow-up.



H2_{a1}: Adventure Based Counseling will result in increases in high school students' empathy from baseline to one-week posttest.

 $H2_{a2}$: Adventure Based Counseling will result in increases in high school students' empathy from one-week posttest to one-month follow-up.

To investigate research question 2, hierarchical regressions were conducted to assess if Adventure Based Counseling impacts high school students' empathy. Empathy at baseline, one-week, and one-month are continuous or interval variable measured by the *Basic Empathy Scale*.

The first regression examined whether empathy scores changed from baseline to one-week as a result of the ABC intervention. At step 1, the mean-centered empathy baseline scores were entered into the model along with the group membership variable. At step 2, the interaction term (group*centered baseline empathy) were entered which investigated the interaction between the empathy baseline score and group. The outcome variable in this regression was empathy at one-week.

The second regression examined whether empathy scores changed between one-week and one-month. At step 1, the mean-centered empathy one-week scores were entered into the model along with the group membership variable. At step 2, the interaction term (group*centered empathy one-week posttest) was entered which investigated the interaction between the empathy one-week scores and group. The outcome variable in this regression was empathy at one-one-month.

Research question 3. Does Adventure Based Counseling decrease high school students' perception of racial discrimination occurring in the school?



H3_{o1}: Adventure Based Counseling will not decrease high school students' perception of racial discrimination occurring from baseline to one-week posttest.

H3_{o2}: Adventure Based Counseling will not decrease high school students' perception of racial discrimination occurring from one-week posttest to one-month follow-up.

H3_{a1}: Adventure Based Counseling will result in decreases in high school students' perception of racial discrimination occurring from baseline to one-week posttest.

 ${
m H3}_{
m a2}$: Adventure Based Counseling will result in decreases in high school students' perception of racial discrimination occurring from one-week posttest to one-month follow-up.

To investigate research question 3, hierarchical regressions were conducted to assess if Adventure Based Counseling impacts high school students' perception of racial discrimination. Perception of racial discrimination at baseline, one-week, and one-month are continuous or interval variable measured by the *General Ethnic Discrimination Scale* (GEDS).

The first regression examined whether GEDS scores changed from baseline to one-week as a result of the ABC intervention. At step 1, the mean-centered GEDS baseline scores were entered into the model along with the group membership variable. At step 2, the interaction term (group*centered baseline GEDS) were entered which investigated the interaction between the GEDS baseline score and group. The outcome variable in this regression was GEDS at one-week.



The second regression examined whether GEDS scores changed between one-week and one-month. At step 1, the mean-centered GEDS one-week scores were entered into the model along with the group membership variable. At step 2, the interaction term (group*centered GEDS one-week posttest) was entered which investigated the interaction between the GEDS one-week scores and group. The outcome variable in this regression was GEDS at one-one-month.

Research question 4. Does Adventure Based Counseling decrease high school students' racist attitudes?

H4_{o1}: Adventure Based Counseling will not decrease high school students' racist attitudes from baseline to one-week posttest.

H4_{o2}: Adventure Based Counseling will not decrease high school students' racist attitudes from one-week posttest to one-month follow-up.

H4_{a1}: Adventure Based Counseling will result in a decrease in high school students' racist attitudes from baseline to one-week posttest.

H4_{a2}: Adventure Based Counseling will result in a decrease in high school students' racist attitudes from one-week posttest to one-month follow-up.

To investigate research question 4, hierarchical regressions were conducted to assess if Adventure Based Counseling impacts high school students' MRS. MRS at baseline, one-week, and one-month are continuous or interval variable measured by the *Modern Racism Scale* (MRS).

The first regression examined whether scores changed from baseline to one-week as a result of the ABC intervention. At step 1, the mean-centered MRS baseline scores were entered into the model along with the group membership variable. At step 2, the



interaction term (group*centered baseline MRS) were entered which investigated the interaction between the MRS baseline score and group. The outcome variable in this regression was MRS at one-week.

The second regression examined whether MRS scores changed between one-week and one-month. At step 1, the mean-centered MRS one-week scores were entered into the model along with the group membership variable. At step 2, the interaction term (group*centered MRS one-week posttest) was entered which investigated the interaction between the MRS one-week scores and group. The outcome variable in this regression was MRS at one-one-month.

Research question 5. Does Adventure Based Counseling decrease high school students' racism-related discipline referrals?

H5_o: Adventure Based Counseling will not decrease high school students' racism-related discipline referrals from one-month prior the intervention, to one-month after the intervention.

H5_a: Adventure Based Counseling will result in a decrease of high school students' racism-related discipline referrals from one-month prior to the intervention, to one-month after the intervention.

To investigate research question 5, hierarchical regressions were conducted to assess if Adventure Based Counseling impacts high school students' racism-related discipline referrals. Racism-related discipline referrals at baseline, one-week, and one-month are continuous or interval variable.

The first regression examined whether scores changed from baseline to one-week as a result of the ABC intervention. At step 1, the mean-centered referrals baseline scores



were entered into the model along with the group membership variable. At step 2, the interaction term (group*centered baseline referrals) were entered which investigated the interaction between the referrals baseline score and group. The outcome variable in this regression was referrals at one-week.

The second regression examined whether referrals scores changed between one-week and one-month. At step 1, the mean-centered referrals one-week scores were entered into the model along with the group membership variable. At step 2, the interaction term (group*centered referrals one-week posttest) was entered which investigated the interaction between the referrals one-week scores and group. The outcome variable in this regression was referrals at one-one-month.

Research question 6. For each group (ABC vs. control) is there a relationship between high school students' perceived racial discrimination occurring, racist attitudes, self-esteem and empathy at each time period (baseline, one-week posttest and one-month follow-up)?

H6_o: For each group (ABC vs. control) there is no relationship between high school students' perceived racial discrimination occurring, racist attitudes, self-esteem and empathy.

H6_a: For each group (ABC vs. control) there is a relationship, such that higher scores on self-esteem and empathy are associated with lower scores on the perception of racial discrimination, and with lower scores on racist attitudes.

To examine research question 6, 36 Pearson r correlations (6 for each group) were conducted to assess if relationships exist between high school students' perceived racial discrimination, racist attitudes, self-esteem and empathy. Twelve correlations were



conducted for each time period (baseline, one-week posttest and one-month follow-up). Correlation is an appropriate statistical measure when the research purpose is to determine if a relationship exists, and the magnitude of any relationship (Pagano, 1990). Given that all variables are continuous (interval/ratio data) and the hypothesis seeks to assess the relationships, or how the distribution of the z scores vary, Pearson r correlations are the appropriate bivariate statistic. Continuous scores were taken from the four survey instruments (*General Ethnic Discrimination Scale, Modern Racism Scale, Rosenberg Self-Esteem Scale* and *Basic Empathy Scale*).

To evaluate the correlation coefficient, Cohen's (1992a) standard was used, where .10 represents a weak association between the two variables, .30 represents a moderate association, and .50 represents a strong association.

Research question 7. Is there a significant difference in the observed effects of ABC counseling based on gender, ethnicity or both?

H7_o: There is a significant difference in the observed effects of ABC counseling based on gender, ethnicity or both.

H7_a: There is no significant difference in the observed effects of ABC counseling based on gender, ethnicity or both.

To examine research question 7, four mixed model ANOVAs were conducted to examine if differences exist on self-esteem, empathy, perceived racial discrimination and racist attitudes, within assessment periods (baseline vs. one-week posttest vs. one-month follow-up), between gender (male vs. female), ethnicity (African American vs. Caucasian vs. Latina/o), and group membership (control vs. ABC).



Behavioral outcome variables. In order to investigate the impact of ABC counseling on the behavioral outcome variables (total discipline referrals, racism-related discipline referrals, GPA and attendance), an ancillary analysis of four repeated measures ANOVAs with between-subjects factors were conducted.

To assess whether or not there were differences by group (control vs. ABC) on the four behavioral outcome variables by time (baseline vs. one-month follow-up) repeated measures ANOVAs with between-subjects factors were conducted. In preliminary analysis, Box's Test of Equality of Covariance Matrices was examined to verify that the assumption of equality of covariance was met in addition, the Levene's test for the equality of error variances were examined to verify that the assumption of equal variances was met.

Limitations and Delimitations

The proposed study is focused on assessing the impact of ABC counseling on high school adolescent self-esteem, empathy, perceived racism, and racist attitudes. The participants in this study were from one high school in a large urban site of a southern state of the United States. This element of the study presents the largest limitation in regards to the external validity and generalizability of the results and conclusions to high school adolescents in other states and regions of the United States. As a result, it is possible that the results are not generalizable to other schools, states or regions.

Another limitation of this study relates to self-selection by participants or their parents. Based on requirements from the Institutional Review Board process, the students and parents were aware that the study involved looking at ABC counseling's impact on self-esteem, empathy, and racism. The researcher feels that this presented a



study limitation regarding students who chose not to participate, and parents who may have prevented their children from participating based on their own social, political or personal views concerning racism. Fundamentally, a limitation exists where potentially racist students, or students experiencing significant racism occurring, did not participate in the study, as these students may have been most in need of such an intervention.

A final limitation relates to the lack of reliability and validity established for the survey questionnaires. As stated the researcher created these instruments to function as a stand-alone analysis to gather additional information on the participants' perceptions and experience related to ABC counseling. Data from the surveys are therefore reported descriptively with frequencies and percents.



Chapter Four: Results

In the following chapter, the results of analyses will be concisely presented, beginning with a thorough presentation of demographic data, followed by descriptive statistical data relating to the four test instruments, and distinguished by group, gender, and ethnicity. Next, data collected from the survey questionnaires will be reviewed, followed by a sequential presentation of all data relating to each of the seven hypotheses. The chapter will conclude with a review of the data obtained from the participant behavior outcome variable analysis, summary and conclusion.

Sample Demographics

One hundred and eight individuals participated in the study, and of these 54 (50%) were female and 54 (50%) were male. Participants were placed into one of two groups. There were 54 (50%) participants in the control group and 54 (50%) participants in the Adventure Based Counseling (ABC) group. Participants were then classified by three ethnic groups, of which 36 (33.3%) participants were African American, 36 (33.3%) were Caucasian and 36 (33.3%) were Latina/o. The frequencies and percentages for gender, group and ethnicity are presented in Table 1.



Table 1

Demographic Characteristics of Participants

Characteristic	N	%
Gender		
Male	54	50.0
Female	54	50.0
Group		
Control	54	50.0
ABC	54	50.0
Ethnicity		
African American	36	33.3
Caucasian	36	33.3
Latina/o	36	33.3

Teacher Demographics

Four teachers completed surveys as part of the study, and of these, the majority (3, 75%) were female and Caucasian (2, 50%). The frequencies and percentages for teacher gender and ethnicity are presented in Table 2.

Table 2

Demographic Characteristics of Teachers

Characteristic	N	%
Gender		
Male	1	25.0
Female	3	75.0
Ethnicity		
African American	1	25.0



Caucasian	2	50.0
Hispanic/Latino	1	25.0

Descriptive Statistics

Means and standard deviations for participant scores on the four test instruments for each time period and each group (control and ABC) are presented in Table 3. In addition, in Table 3 Cronbach's Alphas are reported for this study for each instrument by each time period. The scores for each group on the four instruments varied slightly. The most notable discrepancies were found on racist attitudes, where the control group had a mean score of 2.47 (SD = 0.87) on the one-month follow up as compared to the ABC group (M = 2.21, SD = 0.64); self-esteem where the control group had a mean score of 2.49 (SD = 0.63) on one-week follow-up as compared to the ABC group (M = 2.60, SD = 0.52) and the control group had a mean score of 2.53(SD = 0.56) on one-month follow-up as compared to the ABC group (M = 2.79, SD = 0.58).

Table 3

Means and Standard Deviations for Participant Scores on Four Test Instruments for each

Time Period by Group (Control and ABC)

		Control			ABC				
Instrument and time period	Alpha	n	M	SD	n	M	SD		
BES (BES)									
Baseline	.98	53	3.25	0.96	53	3.32	0.96		
1-week	.98	53	3.24	0.96	54	3.50	0.76		
1-month	.96	53	3.24	0.97	54	3.45	0.69		



GEDS (perceived racial discrimination)							
Baseline	.96	54	3.17	1.31	54	3.10	1.23
1-week	.96	54	3.16	1.26	54	2.98	1.16
1-month	.96	54	3.15	1.29	54	2.97	1.13
MRS (racist attitudes)							
Baseline	.76	54	2.46	0.90	54	2.38	0.86
1-week	.74	54	2.46	0.90	54	2.30	0.75
1-month	.74	54	2.47	0.87	54	2.21	0.64
RSES (self-esteem)							
Baseline	.85	54	2.49	0.63	54	2.48	0.70
1-week	.85	54	2.49	0.57	54	2.60	0.52
1-month	.75	54	2.53	0.56	54	2.79	0.58

The means and standard deviations for participant scores on the four test instruments for each time period and each gender are presented in Table 4. The scores for each gender (males and females) on the four instruments varied, with the largest discrepancies noted on empathy, perceived racial discrimination, and self-esteem.

Overall, females received higher mean scores than males for each time period measured on empathy and self-esteem, and males received higher mean scores than females for each time period measured on perceived racial discrimination. For racist attitudes, the mean scores were fairly similar by gender.



Table 4

Means and Standard Deviations for Participant Scores on Four Test Instruments for each

Time Period by Gender

	Male				Female				
Instrument	\overline{n}	М	SD	n	М	SD			
BES (empathy)									
Baseline	54	2.83	0.98	52	3.76	0.67			
1-week	54	2.97	0.91	53	3.77	0.61			
1-month	54	2.95	0.86	53	3.75	0.59			
GEDS (perceived racial discrimination)									
Baseline	54	3.39	1.29	54	2.88	1.19			
1-week	54	3.33	1.25	54	2.81	1.12			
1-month	54	3.30	1.25	54	2.82	1.14			
MRS (racist attitudes)									
Baseline	54	2.41	0.92	54	2.42	0.83			
1-week	54	2.40	0.87	54	2.35	0.79			
1-month	54	2.37	0.80	54	2.32	0.75			
RSES (self-esteem)									
Baseline	54	2.06	0.44	54	2.91	0.57			
1-week	54	2.36	0.53	54	2.74	0.49			
1-month	54	2.47	0.53	54	2.85	0.58			

The means and standard deviations for participant scores on the four test instruments for each time period and each ethnicity (African American, Caucasian and Latina/o) are presented in Table 5. Mean scores varied among several of the instruments by ethnic group and time period assessed. The Latina/o group stood out as having the

highest mean scores for empathy at baseline (M = 3.37, SD = 0.91), posttest (M = 3.48, SD = 0.81) and one-month follow-up (M = 3.44, SD = 0.77) and for racist attitudes at baseline (M = 3.33, SD = 0.86), posttest (M = 3.23, SD = 0.83) and one-month follow-up (M = 3.12, SD = 0.81) when compared to the other two groups. The African American group displayed the highest mean scores for perceived racial discrimination baseline (M = 4.07, SD = 1.00), posttest (M = 3.95, SD = 0.96) and one-month follow-up (M = 3.96, SD = 0.97) when compared to the other two groups. The three groups scored relatively similarly on self-esteem across each time period.

Table 5

Means and Standard Deviations for Participant Scores on Four Test Instruments for each

Time Period by Ethnicity (African American, Caucasian and Latina/o)

	African		(Caucas	ian		Latina	/o	
		American							
Instrument	n	М	SD	n	М	SD	n	M	SD
BES (empathy)									
Baseline	36	3.17	0.96	3	3.3	1.0	3	3.3	0.9
1-week posttest	36	3.24	0.86	3	3.3	0.9	3	3.4	0.8
1-month follow-up	36	3.23	0.84	3	3.3	0.9	3	3.4	0.7
GEDS (perceived racial									
Baseline	36	4.07	1.00	3	3.3	1.0	3	2.0	0.7
1-week posttest	36	3.95	0.96	3	3.2	1.0	3	2.0	0.6
1-month follow-up	36	3.96	0.97	3	3.2	1.0	3	1.9	0.6
MRS (racist attitudes)									



Baseline	36	1.99	0.39	3	1.9	0.4	3	3.3	0.8
1-week posttest	36	2.01	0.37	3	1.8	0.3	3	3.2	0.8
1-month follow-up	36	1.99	0.35	3	1.9	0.3	3	3.1	0.8
RSES (self-esteem)									
Baseline	36	2.41	0.58	3	2.5	0.7	3	2.5	0.6
1-week posttest	36	2.52	0.45	3	2.5	0.5	3	2.5	0.6
1-month follow-up	36	2.55	0.39	3	2.7	0.6	3	2.7	0.7

Survey Questionnaires

Student participants and teacher observers completed pre and post-intervention surveys in the form of a questionnaire. All students completed a pretest survey about their *Prior Exposure and Sensitivity to Other Races* and a survey about their *Perception of Racism Existing in the School*. Students who participated in the ABC treatment completed an additional posttest questionnaire to evaluate their *Adventure Based Counseling Experience*. Teachers completed a pretest survey about their *Perception of Racism Existing in the School* and a posttest survey of their *Perceptions of the Students' Experience in the ABC Event*. All data collected from these surveys are reported in frequencies and percentages. The following sections will present survey results by participant, participant group (control and ABC), and teacher.

Pretest: prior exposure and sensitivity to other races. Students were asked about their prior exposure and sensitivity to other races in the *Prior Exposure and*Sensitivity to Other Races pretest survey, which contained four items upon which Participants were asked to rate their level of agreement using a five-point Likert scale (1= strongly disagree; 2 = disagree; 3 = neither agree nor disagree; 4 = agree; 5 = strongly



agree). The scaling was combined for analysis into disagree (strongly disagree + disagree), neither agree nor disagree, and agree (agree + strongly agree).

For students who participated in ABC, the majority of students (34, 63%) disagreed regarding their prior experience of other cultures and races through travel (Question 1). Twenty-one (38.9%) selected neither agree nor disagree regarding their lack of exposure to people who were of a different race than themselves (Question 2). Twenty-five (46.3%) selected neither agree nor disagree regarding their lack of experience in communicating with people who were of a different race than themselves (Question 3). Half (27, 50%) selected neither agree nor disagree regarding their sensitivity to the experiences of people of other cultures and races different from their own (Question 4).

For the control group, the majority of students (33, 61.1%) disagreed regarding their prior experience of other cultures and races through travel (Question 1). Twenty-one (38.9%) selected neither agree nor disagree regarding their lack of exposure to people who were of a different race them themselves (Question 2). Twenty-five (46.3%) selected neither agree nor disagree regarding their lack of experience in communicating with people who were of a different race than themselves (Question 3). Twenty-five (46.3%) selected neither agree nor disagree regarding their sensitivity to the experiences of people of other cultures and races different from their own (Question 4).

Responses from the control and ABC groups differed only slightly. Overall, students indicated they had not traveled around the United States or foreign countries to experience different cultures and races. Students neither agreed nor disagreed with regard to their level of exposure, communication and sensitivity to people of different cultures



and races. Frequencies and percentages for student life experiences are presented by group (ABC vs. control) in Table 6.

Table 6

Prior Exposure and Sensitivity to Other Races

	A.	ВС	Control		
Item		%	n	%	
1.I have traveled around the United States and / or foreign countries and have experienced cultures and races different than my own.					
Disagree	34	63.0	33	61.1	
Neither agree nor disagree	12	22.2	9	16.7	
Agree	8	14.8	12	22.2	
2. In my life, I have NOT been exposed to a lot of people who are of a different race than I am.					
Disagree	14	25.9	14	25.9	
Neither agree nor disagree	21	38.9	21	38.9	
Agree	19	35.2	19	35.2	
3. I feel that in my life I have NOT communicated with many other people who are a different race than I am.					
Disagree	13	24.1	10	18.5	
Neither agree nor disagree	25	46.3	25	46.3	
Agree	16	29.6	19	35.2	
4. I am <i>sensitive</i> to the experiences of people of other					
cultures and races that are different from my own culture or					
race.					
Disagree	21	38.9	20	37.0	
Neither agree nor disagree	27	50.0	25	46.3	
Agree	6	11.1	9	16.7	

Pretest: perception of racism existing in the school. Students and teachers

were asked about their prior exposure and sensitivity to other races in the Perception of



Racism Existing in the School survey, which contained four items. Students and teachers completed the survey which provided participants with a definition of the term racist/racism as well as response options for levels of agreement (1= strongly disagree; 2 = disagree; 3 = neither agree nor disagree; 4 = agree; 5 = strongly agree) with three questions. The scaling was combined for analysis into disagree (strongly disagree + disagree), neither agree nor disagree, and agree (agree + strongly agree).

Question 1 asked students and teachers about their beliefs on whether students in their school often act in a racist manner toward other students who are of a different race than themselves. The majority of students in both groups (ABC= 30, 55.6%; control = 32,59.3%) agreed with this statement, while the teachers were split, with half of the teachers (2, 50%) selecting neither agree nor disagree, 1 (25%) selecting agree and 1 (25%) selecting disagree. Question 2 asked students and teachers about their beliefs that teachers in their school often act in a racist manner toward students or other teachers who are of a different race than themselves. The majority of students in both groups (ABC= 28, 51.9%; control = 26, 48.1%) disagreed with this statement, while the majority of the teachers (3, 75%) disagreed with this statement. Question 3 asked students and teachers about their belief that administrators in their school often act in a racist manner toward students or other teachers who are of a different race than themselves. The majority of students in both groups (ABC= 24, 44.4%; control = 23, 42.6%) disagreed, whereas the teachers were split, with half of the teachers (2, 50%) selecting neither agree nor disagree, 1 (25%) selecting agree and 1 (25%) selecting disagree. Frequencies and percentages for school climate are presented in Table 7.



Table 7
Student and Teacher Responses to Perception of Racism Existing in the School

	Students								
	ABC Control			l Teachers					
Item	n	%	n	%	n	%			
1.Beliefs that students at their school often act in a racist manner toward other students who are of a different race than themselves									
Disagree	16	29.6	15	27.8	1	25.0			
Neither agree nor disagree	8	14.8	7	13.0	2	50.0			
Agree	30	55.6	32	59.3	1	25.0			
2.Beliefs that teachers in their school often act in a racist manner toward students or other teachers who are of a different race than themselves									
Disagree	28	51.9	26	48.1	3	75.0			
Neither agree nor disagree	9	16.7	10	18.5	1	25.0			
Agree	17	31.5	18	33.3	0	0.0			
3. Beliefs that administrators in their school often act in a racist manner toward students or other teachers who are of a different race than themselves									
Disagree	24	44.4	23	42.6	1	25.0			
Neither agree nor disagree	13	24.1	12	22.2	2	50.0			
Agree	17	31.5	19	35.2	1	25.0			

Posttest: adventure based counseling experience. The *Adventure Based*

Counseling Experience survey provided students an opportunity to rate their experiences in ABC and provided teachers an opportunity to rate their perceptions of students' experiences in ABC. These surveys were used to gain a deeper understanding of the effectiveness of ABC counseling. Only students who participated in the ABC treatment and teacher observers completed this survey; students in the control group did not

complete this survey. The five items in these surveys provided a Likert-scale for rating the level of agreement with each item (1= strongly disagree; 2 = disagree; 3 = neither agree nor disagree; 4 = agree; 5 = strongly agree) with three questions. The scaling was combined for analysis into disagree (strongly disagree + disagree), neither agree nor disagree, and agree (agree + strongly agree).

Question 1 asked participants to rate the benefits of ABC; the majority of students (35, 64.8%) agreed that ABC was beneficial while all of the teachers (100%) neither agreed nor disagreed. Question 2 asked participants about the physical contact with other students, more specifically the uncomfortable nature of that contact; the majority of students (34, 63%) disagreed while half of the teachers (2, 50%) neither agreed nor disagreed and half (2, 50%) of the teachers agreed, perceiving the physical contact as uncomfortable for students. Question 3 asked participants about a positive change in how they (the student) viewed others or how teachers perceived the students' view of others following ABC participation; twenty-five students (43.6%) agreed, while most of the teachers (3, 75%) agreed that students viewed others more positively. Question 4 asked participants about the change in how they (the student) viewed themselves or how teachers perceived this change following ABC participation; twenty-six students (48.1%) and most of the teachers (3, 75%) neither agreed nor disagreed. Question 5 asked participants about the potential for ABC to reduce racism in high schools; twenty-five students (46.3%) and most of the teachers (3, 75%) agreed there was potential for ABC to reduce racism in high schools.

Overall, participants agreed that ABC had the potential to reduce racism in high schools, and that the experience resulted in positive changes in the way students view



others. Teachers and students perceived the physical contact differently: while students tended to disagree that the physical contact in ABC was uncomfortable for them, some teachers perceived the contact as uncomfortable for students. Also, while students tended to agree that ABC was beneficial, all of the teachers neither agreed nor disagreed. The majority of students and teachers neither agreed nor disagreed that ABC changed how students felt about themselves in a positive way. Frequencies and percentages for ABC experience are presented for students and teachers in Table 8.

Table 8
Student and Teacher Responses to Adventure Based Counseling Experience

	Students		Tea	achers
Item	n	%	n	%
The Adventure Based Counseling experience was beneficial.				
Disagree	4	7.4	0	0.0
Neither agree nor disagree	15	27.8	4	100.0
Agree	35	64.8	0	0.0
The physical contact with other students was uncomfortable.				
Disagree	34	63.0	0	0.0
Neither agree nor disagree	15	27.8	2	50.0
Agree	5	9.3	2	50.0
The ABC experience changed how students view others in a positive way.				
Disagree	9	16.7	0	0.0
Neither agree nor disagree	20	37.0	1	25.0
Agree	25	46.3	3	75.0
The ABC experience changed how students feel about themselves in a positive way.				

19 26	35.2 48.1	0	0.0
26	48.1	3	75.0
		5	75.0
9	16.7	1	25.0
10	18.5	0	0.0
19	35.2	1	25.0
25	46.3	3	75.0
	10 19	10 18.5 19 35.2	10 18.5 0 19 35.2 1

Hypotheses

Four test instruments served as the primary dependent variables for analysis of the hypotheses. These included: the *Rosenberg Self-Esteem Scale* (RSES), the *Basic Empathy Scale* (BES), the *General Ethnic Discrimination Scale* (GEDS), and the *Modern Racism Scale* (MRS). Participants completed the instruments at three time periods (baseline, one-week posttest and one-month follow-up). Participant scores on each instrument and each time period were examined by group (control and ABC), gender (male and female) and ethnicity (African American, Caucasian, and Latina/o).

Hypothesis 1. To examine hypothesis 1—Adventure Based Counseling will have a positive impact on high school students' self-esteem, such that self-esteem will increase from baseline (T1) to one-week posttest (T2), or from one-week posttest to one-month follow-up (T3)—a hierarchical linear regression was conducted. Two analyses were performed, one to assess the outcome at one-week posttest (from baseline) and one to assess the outcome at one-month follow-up (from one-week posttest).

The first regression determined the outcome at one-week posttest. In preliminary analysis, the assumptions of multiple regression were assessed. The assumptions of



normality, linearity and homoscedasticity were evaluated through an examination of the residual scatter plots. Tabachnick and Fidell (2001) state, "the residual scatter plot should reveal a pileup of residuals in the center of the plot at each value of predicted score and a normal distribution of residuals trailing off from the center" (p. 127). The assumptions were met. The absence of multicollinearity was assessed through examination of the Variance Inflation Factors (VIF); VIF values over 10 will suggest the presence of multicollinearity (Stevens, 2002). The assumption was violated due to correlation between the centered pretest self-esteem score and the interaction term and caution should be given to interpretation of the results; the pretest self-esteem score was highly correlated with the interaction term. For this particular analysis, no control was available; generalization of results should be made with caution.

Group membership (control vs. ABC) and the mean-centered self-esteem baseline scores were entered into the first block of the regression. Group membership was dummy coded as 1 = ABC group membership and 0 = non ABC group membership prior to analysis. At step 1, the mean-centered self-esteem pretest scores were entered into the model along with the group membership variable. At step 2, the interaction term (group*centered self-esteem pretest) was entered to investigate the interaction between the self-esteem pretest score and group.

The results of the first block regression with the group and baseline self-esteem scores predicting one-week self-esteem posttest scores was significant, F(2, 105) = 71.94, p = .000. As expected, baseline self-esteem accounted for variance in self-esteem at one-week posttest ($\beta = .75$, p < .01); the greater one's self-esteem at baseline, the greater one's self-esteem at follow-up. Group membership and baseline self-esteem scores



accounted for (R²) 57.8% of the variance in one-week self-esteem posttest scores in block one. The results of the first block regression with group and baseline self-esteem scores predicting one-week self-esteem posttest scores are summarized in Table 9.

The interaction term (group*centered baseline self-esteem) was entered into the second block of the regression. The results of the second block regression with the interaction of group and baseline self-esteem predicting one-week self-esteem posttest scores was significant, F(3, 104) = 51.04, p = .000, suggesting that the combined independent variables predict one-week self-esteem posttest scores after controlling for group membership and baseline self-esteem scores. The results for the second block of the regression with the interaction of group and baseline self-esteem predicting one-week self-esteem posttest scores are summarized in Table 9 which suggest that after controlling for group membership and centered-baseline self-esteem scores, the interaction between baseline self-esteem scores and group was significant. However, within the model, only the pretest self-esteem score was a significant predictor; group membership, when entered into the model independently, was not a predictor. However, after controlling for group and centered pretest self-esteem scores, for every one unit increase in the interaction variable, the outcome variable (self-esteem posttest score) will decrease by .22 units. The alternative hypothesis, that ABC counseling will result in increases in student self-esteem from baseline to one-week posttest is accepted.



Table 9

Hierarchical Regression Analysis Summary for Adventure Based Counseling Predicting

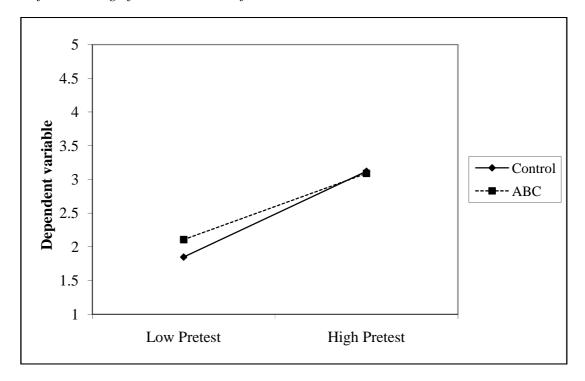
Self-Esteem from Baseline to One-week Posttest

Step and predictor variable	В	SE B	β	R^2	ΔR^2
Step 1:				.58**	.58**
Group membership	0.11	0.07	.10		
Baseline self-esteem score	0.62	0.05	.75**		
Step 2:				.60*	.02*
Group membership	0.11	0.07	.11		
Baseline self-esteem score	0.96	0.17	1.17**		
Interaction term (group*baseline self-esteem score)	-0.22	0.10	43*		

Note. * p<.05, ** p <.01, *** p <.001.

The significant interaction (Figure 1) indicates that at baseline self-esteem, the treatment group had higher one-week-self-esteem scores than the control group, while those with high self-esteem baseline scores both group had about the same one-week-self-esteem scores.

Figure 1
Self-Esteem Significant Interaction from Baseline to One-week Posttest



The second regression assessed the outcome at one-month follow-up. In preliminary analysis the assumptions of multiple regression were assessed. The assumptions of normality, linearity and homoscedasticity were evaluated through an examination of the residual scatter plots. The assumptions were met. The absence of multicollinearity was assessed through examination of the Variance Inflation Factors (VIF); the assumption was met.

Group membership (control vs. ABC) and the mean-centered self-esteem oneweek posttest scores were entered into the first block of the regression. Group membership was dummy coded as 1 = ABC group membership and 0 = non ABC group membership prior to analysis. At step 1, the centered self-esteem one-week posttest



scores were entered into the model along with the group membership variable. At step 2, the interaction term (group*centered self-esteem posttest) was entered to investigate the interaction between the self-esteem one-week posttest score and group.

The results of the first block regression with the group and one-week posttest self-esteem scores predicting one-month follow-up self-esteem scores was significant, F(2, 105) = 107.45, p < .001, suggesting that group membership and one-week posttest self-esteem scores predict one-month follow-up self-esteem scores. Group membership and one-week posttest self-esteem scores accounted for (R^2) 67.2% of the variance in one-month follow-up self-esteem scores. The results of the first block regression with group and one-week posttest self- esteem scores predicting one-month follow-up self-esteem scores are summarized in Table 10.

The interaction term (group*centered self-esteem posttest scores) was entered into the second block of the regression. The results of the second block regression with the interaction of group and one-week posttest self-esteem predicting one-month follow-up self-esteem scores was significant, F(3, 104) = 71.37, p < .001, suggesting that the independent variables predict one-month follow-up self-esteem scores after controlling for group membership and posttest self-esteem scores. However, the independent variables accounted for an additional (ΔR^2) 0.0% of the variance in one-month follow-up self- esteem scores which was not a significant increase, F(1, 104) = .417, p = .520, the total (R^2) for the model is 67.3%. The results for the second block of the regression with the interaction of group and one-week posttest self-esteem predicting one-month follow-up self-esteem scores are summarized in Table 10, and suggest that after controlling for group membership and one-week posttest self-esteem scores, the interaction between



one-week posttest self-esteem scores and group is not significant. The alternative hypothesis, that ABC counseling will increase high school students' self-esteem from one-week posttest to one-month follow-up is accepted.

Table 10

Hierarchical Regression Analysis Summary for Adventure Based Counseling Predicting

Self-Esteem from One-week Posttest to One-month Follow-up

Step and predictor variable	В	SE B	β	R^2	ΔR^2
Step 1:				.67***	.67***
Group membership	0.17	0.07	.15*		
Posttest self-esteem score	0.85	0.06	.79**		
Step 2:				.67	.00
Group membership	0.17	0.07	.15*		
Posttest self-esteem score	0.96	0.19	.90**		
Interaction term (group*posttest self-esteem score)	-0.08	0.12	11		

Note. * p<.05, ** p<.01, *** p<.001.

Hypothesis 2. To examine hypothesis 2—Adventure Based Counseling will have a positive impact on high school students' empathy, such that empathy will increase from baseline (T1) to one-week posttest (T2), or from one-week posttest (T2) to one-month follow-up (T3)— hierarchical linear regressions were conducted. Two analyses were conducted, one to assess the outcome at one-week posttest and one to assess the outcome at one-month follow-up posttest.

The first regression assessed the outcome at one-week posttest. In preliminary analysis the assumptions of multiple regression were assessed. The assumptions of normality, linearity and homoscedasticity were evaluated through an examination of the residual scatter plots; the assumptions were met. The absence of multicollinearity was assessed through examination of the Variance Inflation Factors (VIF); the assumption was met.

Group membership (control vs. ABC) and the mean-centered empathy baseline scores were entered into the first block of the regression. Group membership was dummy coded as 1 = ABC group membership and 0 = non ABC group membership prior to analysis. At step 1, the mean-centered empathy pretest scores were entered into the model along with the group membership variable. At step 2, the interaction term (group*centered empathy pretest) was entered which will investigate the interaction between the empathy pretest score and group.

The results of the first block regression with the group and baseline empathy scores predicting one-week empathy posttest scores was significant, F(2, 103) = 1400.37, p < .001, suggesting that group membership and baseline empathy score predicts one-week posttest empathy score. Group membership and baseline empathy scores accounted for (R^2) 96.5% of the variance in one-week empathy posttest scores. The results of the first block regression with group and baseline empathy scores predicting one-week empathy posttest scores are summarized in Table 11.

The interaction term (group*centered baseline self-esteem) was entered into the second block of the regression.



Table 11

Hierarchical Regression Analysis Summary for Adventure Based Counseling Predicting

Empathy from Baseline to One-week Posttest

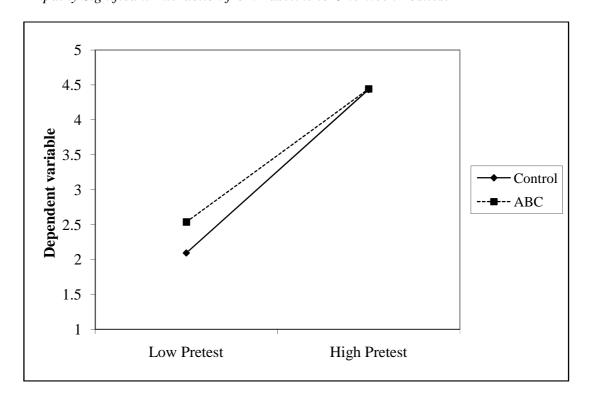
Step and predictor variable	В	SE B	β	R^2	ΔR^2
Step 1:				.97***	.97***
Group membership	0.23	0.03	.13**		
Baseline BES score	0.88	0.02	.97**		
Step 2:				.98***	.02
Group membership	0.23	0.02	.13**		
Baseline BES score	1.22	0.04	1.34**		
Interaction term (group*baseline BES score)	-0.23	0.03	39**		

Note. * p<.05, ** p <.01, *** p <.001.

The interaction was significant, such that for the control group, those who were initially high in empathy showed a greater increase in empathy at 1-week than those who were initially low in empathy (Figure 2).

Figure 2

Empathy Significant Interaction from Baseline to One-week Posttest



The second regression assessed the outcome at one-month follow-up. In preliminary analysis the assumptions of multiple regression were assessed. The assumptions of normality, linearity and homoscedasticity were evaluated through an examination of the residual scatter plots; the assumptions were met. The absence of multicollinearity was assessed through examination of the Variance Inflation Factors (VIF); the assumption was met.

Group membership (control vs. ABC) and the mean-centered empathy one-week posttest scores were entered into the first block of the regression. Group membership was dummy coded as 1 = ABC group membership and 0 = non ABC group membership prior to analysis. At step 1, the mean-centered empathy one-week posttest scores were

entered into the model along with the group membership variable. At step 2, the interaction term (group*centered empathy posttest) was entered to investigate the interaction between the empathy one-week posttest score and group.

The results of the first block regression with the group and one-week posttest empathy scores predicting one-month follow-up empathy scores were significant, F (2, 104) = 5421.27, p < .001, suggesting that group membership and one-week posttest empathy scores predict one-month follow-up empathy scores. Group membership and one-week posttest empathy scores accounted for (R^2) 99.0% of the variance in one-month follow-up empathy scores. The results of the first block regression with group and one-week posttest empathy scores predicting one-month follow-up empathy scores are summarized in Table 12.

The interaction term (group*centered posttest self-esteem) was entered into the second block of the regression. The results of the second block regression with the interaction of group and one-week posttest empathy predicting one-month follow-up empathy scores were significant, F(3, 103) = 4801.77, p < .001, suggesting that the independent variables predict one-month follow-up empathy scores after controlling for group membership and one-week posttest empathy scores. The independent variables accounted for an additional (ΔR^2) 0.2% of the variance in one-month follow-up empathy scores which was a significant increase, F(1, 103) = 34.84, p = .000, the total (R^2) for the model is 99.3%. The results for the second block of the regression with the interaction of group and one-week posttest empathy predicting one-month follow-up empathy scores are summarized in Table 12, and suggest that after controlling for group membership and one-week posttest empathy scores, the interaction between one-week posttest empathy

scores and group was significant. For every one unit increase in the interaction variable, the outcome variable (empathy follow-up score) will decrease by .10 units. The alternative hypothesis that ABC counseling will increase high school students' empathy from one-week posttest to one-month follow-up is accepted.

Table 12

Hierarchical Regression Analysis Summary for Adventure Based Counseling Predicting

Empathy from One-week Posttest to One-month Follow-up

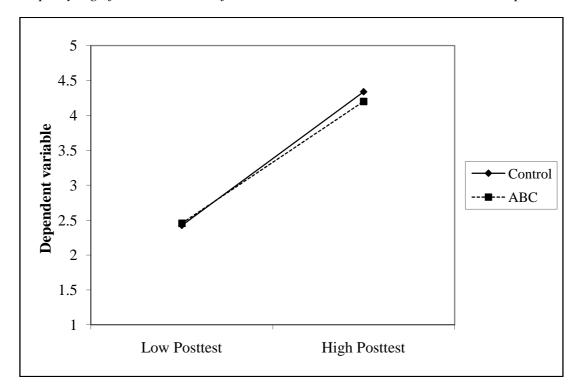
Step and predictor variable	В	SE B	β	R^2	ΔR^2
Step 1:				.99***	.99***
Group membership	-0.06	0.02	03**		
Posttest BES score	0.97	0.01	1.00***		
Step 2:				.99***	.002***
Group membership	-0.05	0.01	03***		
Posttest BES score	1.10	0.03	1.14***		
Interaction term (group*posttest BES score)	-0.10	0.02	15***		

Note. * p<.05, ** p <.01, *** p <.001.

The significant interaction (Figure 3) indicates that at pretest empathy, the treatment group had about the same 1-month post-empathy scores as the control group, while those in the control group had higher 1-month empathy scores compared to the treatment group at higher pre-treatment empathy scores.

Figure 3

Empathy Significant Interaction from One-week Posttest to One-week Follow-up



Hypothesis 3. To examine hypothesis 3—Adventure Based Counseling will have a positive impact on high school students' perception that racial discrimination is occurring, such that perceived racism will decrease from baseline (T1) to one-week posttest (T2), or from one-week posttest (T2) to one-month follow-up (T3)—a hierarchical linear regression was conducted. Two analyses were performed, one to assess the outcome at one-week posttest and one to assess the outcome at one-month follow-up posttest.

The first regression assessed the outcome at one-week posttest. In preliminary analysis the assumptions of multiple regression were evaluated. The assumptions of normality, linearity and homoscedasticity were assessed through an examination of the residual scatter plots; the assumptions were met. The absence of multicollinearity was

assessed through examination of the Variance Inflation Factors (VIF); the assumption was met.

Group membership (control vs. ABC) and the mean-centered perception of racial discrimination baseline scores were entered into the first block of the regression. Group membership was dummy coded as 1 = ABC group membership and 0 = non ABC group membership prior to analysis. At step 1, the mean-centered GEDS pretest scores were entered into the model along with the group membership variable. At step 2, the interaction term (group*centered GEDS pretest) was entered to investigate the interaction between the GEDS pretest score and group.

The results of the first block regression with the group and baseline perception of racial discrimination scores predicting one-week perception of racial discrimination posttest scores were significant, F(2, 105) = 8346.57, p < .001, suggesting that group membership and baseline perception of racial discrimination scores predict one-week posttest perception of racial discrimination scores. Group membership and baseline perception of racial discrimination scores accounted for (R^2) 99.4% of the variance in one-week perception of racial discrimination posttest scores. The results of the first block regression with group and baseline perception of racial discrimination scores predicting one-week perception of racial discrimination posttest scores are summarized in Table 13.

The interaction term (group*centered baseline perception of racial discrimination) was entered into the second block of the regression. The results of the second block regression with the interaction of group and baseline perception of racial discrimination predicting one-week perception of racial discrimination posttest scores were significant,



F(3, 104) = 5681.11, p < .001, suggesting that the independent variables predict one-week perception of racial discrimination posttest scores after controlling for group membership and baseline perception of racial discrimination scores. However, the independent variables accounted for an additional (ΔR^2) 0.0% of the variance in one-week perception of racial discrimination posttest scores which was not a significant increase, F(1, 104) = 3.18, p = .077, the total (R^2) for the model is 99.4%. The results for the second block of the regression with the interaction of group and baseline perception of racial discrimination was not significant (Table 13). The alternative hypothesis that ABC counseling will decrease high school students' perception of racial discrimination baseline to one-week posttest is rejected.

Table 13

Hierarchical Regression Analysis Summary for Adventure Based Counseling Predicting

Perception of Racial Discrimination from Baseline to One-week Posttest

Step and predictor variable	В	SE B	β	R^2	ΔR^2
Step 1:				.99***	.99***
Group membership	-0.11	0.02	05***		
Baseline perception of racial discrimination score	0.95	0.01	1.00***		
Step 2:				.99	.00
Group membership	-0.11	0.02	05***		
Baseline perception of racial discrimination score	0.99	0.02	1.04***		



Interaction term -.003 0.02 -.04 (group*baseline perception of racial discrimination score)

Note. * p<.05, ** p <.01, *** p <.001.

The second regression assessed the outcome at one-month follow-up. In preliminary analysis the assumptions of multiple regression were assessed. The assumptions of normality, linearity and homoscedasticity were evaluated through an examination of the residual scatter plots; the assumptions were met. The absence of multicollinearity was assessed through examination of the Variance Inflation Factors (VIF); the assumption was met.

Group membership (control vs. ABC) and the mean-centered perception of racial discrimination one-week posttest scores were entered into the first block of the regression. Group membership was dummy coded as 1 = ABC group membership and 0 = non ABC group membership prior to analysis. At step 1, the mean-centered GEDS one-week posttest scores were entered into the model along with the group membership variable. At step 2, the interaction term (group*centered GEDS posttest) was entered to investigate the interaction between the GEDS one-week posttest score and group.

The results of the first block regression with the group and one-week posttest perception of racial discrimination scores predicting one-month follow-up perception of racial discrimination scores were significant, F(2, 105) = 7616.81, p < .001, suggesting that group membership and one-week posttest perception of racial discrimination score predicts one-month follow-up perception of racial discrimination scores. Group membership and one-week posttest perception of racial discrimination scores accounted

for (R²) 99.3% of the variance in one-month follow-up perception of racial discrimination scores. The results of the first block regression with group and one-week posttest perception of racial discrimination scores predicting one-month follow-up perception of racial discrimination scores are summarized in Table 14.

The interaction term (group*centered posttest perception of racial discrimination) was entered into the second block of the regression. The results of the second block regression with the interaction of group and one-week posttest perception of racial discrimination predicting one-month follow-up perception of racial discrimination scores were significant, F(3, 104) = 5526.84, p < .001, suggesting that the independent variables predict one-month follow-up perception of racial discrimination scores after controlling for group membership and one-week posttest perception of racial discrimination scores. The independent variables accounted for an additional (ΔR^2) 1% of the variance in one-month follow-up perception of racial discrimination scores which was a significant increase, F(1, 104) = 10.21, p = .002, the total (\mathbb{R}^2) for the model is 99.4%. The results for the second block of the regression with the interaction of group and oneweek posttest perception of racial discrimination predicting one-month follow-up perception of racial discrimination scores are summarized in Table 14. This suggests that after controlling for group membership and one-week posttest perception of racial discrimination scores, the interaction between one-week posttest perception of racial discrimination scores and group is significant; for every one unit increase in the interaction term, one-month follow-up perception of racial discrimination scores will decrease by 0.5 units. The alternative hypothesis that ABC counseling will decrease high



school students' perception of racial discrimination one-week posttest to one-month follow-up is accepted.

Table 14

Hierarchical Regression Analysis Summary for Adventure Based Counseling Predicting

Perception of Racial Discrimination from One-week Posttest to One-month Follow-up

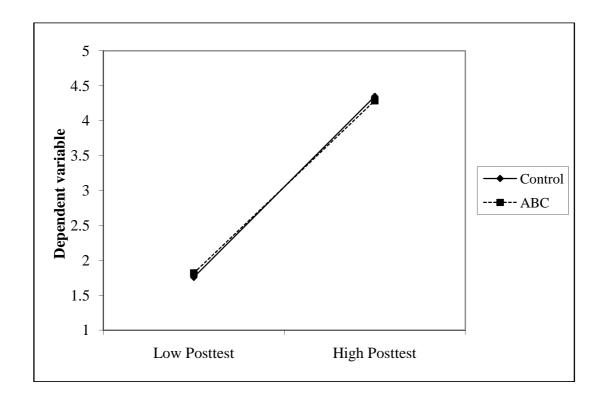
Step and predictor variable	В	SE B	β	R^2	ΔR^2
Step 1:				.99***	.99***
Group membership	0.00	0.02	*00		
Posttest perception of racial discrimination score	1.00	0.01	1.00***		
Step 2:				.99**	.00**
Group membership	0.00	0.02	.00		
Posttest perception of racial discrimination score	1.07	0.02	1.07***		
Interaction term (group*posttest perception of racial discrimination score)	-0.05	0.02	08**		

Note. * p<.05, ** p <.01, *** p <.001.

The interaction was statistically significant (Figure 4). For the control group, those who were high in GED at 1-wk were likely to be even higher in GED at 1-month followup, compared to those in the ABC group.

Figure 4

Perceived Racial Discrimination Significant Interaction from One-week Posttest to Onemonth Follow-up



Hypothesis 4. To examine hypothesis 4—Adventure Based Counseling will have a positive impact on high school students' racist attitudes, such that racist attitudes will decrease from baseline (T1) to one-week posttest (T2), or one-week posttest (T2) to one-month follow-up (T3)—a hierarchical linear regression was conducted. Two analyses were performed, one to assess the outcome at one-week posttest and one to assess the outcome at one-month follow-up posttest.

The first regression assessed the outcome at one-week posttest. In preliminary analysis the assumptions of multiple regression were evaluated. The assumptions of normality, linearity and homoscedasticity were assessed through an examination of the



residual scatter plots; the assumptions were met. The absence of multicollinearity was assessed through examination of the Variance Inflation Factors (VIF); the assumption was met.

Group membership (control vs. ABC) and the mean-centered racist attitudes baseline scores were entered into the first block of the regression. Group membership was dummy coded as 1 = ABC group membership and 0 = non ABC group membership prior to analysis. At step 1, the mean-centered MRS pretest scores were entered into the model along with the group membership variable. At step 2, the interaction term (group*centered MRS pretest) was entered to investigate the interaction between the MRS pretest score and group.

The results of the first block regression with the group and baseline racist attitudes scores predicting one-week racist attitudes posttest scores were significant, F(2, 105) = 1264.57, p < .001, suggesting that group membership and baseline racist attitudes scores predicts one-week posttest racist attitudes scores. Group membership and baseline racist attitudes scores accounted for (R^2) 96.0% of the variance in one-week racist attitudes posttest scores. The results of the first block regression with group and baseline racist attitudes scores predicting one-week racist attitudes posttest scores are summarized in Table 15.

The interaction term (group*centered baseline racist attitudes) was entered into the second block of the regression. The results of the second block regression with the interaction of group and baseline racist attitudes predicting one-week racist attitudes posttest scores were significant, F(3, 104) = 1003.52, p < .001, suggesting that the independent variables predict one-week racist attitudes posttest scores after controlling



for group membership and baseline racist attitudes scores. The independent variables accounted for an additional (ΔR^2) .6% of the variance in one-week racist attitudes posttest scores which was a significant increase, F(1, 104) = 20.15, p = .000, the total (R^2) for the model is 96.7%. The results for the second block of the regression with the interaction of group and baseline racist attitudes predicting one-week racist attitudes posttest scores are summarized in Table 15, and suggest that after controlling for group membership and centered-baseline racist attitudes scores, the interaction between baseline racist attitudes scores and group was significant. For every one unit increase in the interaction term, one-month follow-up perception of racial discrimination scores will decrease by 0.15 units. The alternative hypothesis that ABC counseling will decrease high school students' racist attitudes from baseline to one-week posttest is accepted.

Table 15

Hierarchical Regression Analysis Summary for Adventure Based Counseling Predicting
Racist Attitudes from Baseline to One-week Posttest

Step and predictor variable	В	SE B	β	R^2	ΔR^2
Step 1:				.96***	.96***
Group membership	-0.09	0.03	05*		
Baseline racist attitudes score	0.92	0.02	.98***		
Step 2:				.97***	.00***
Group membership	-0.08	0.03	05**		
Baseline racist attitudes score	1.14	0.05	1.21***		

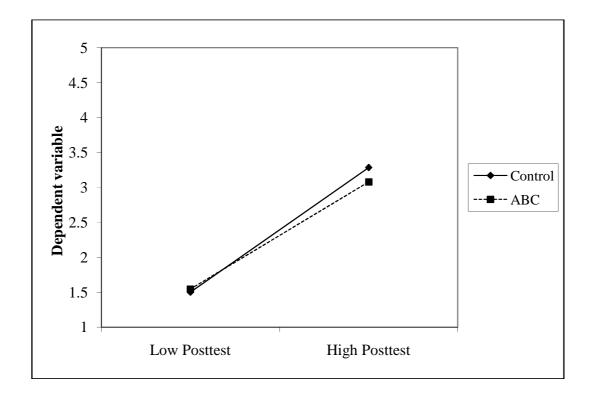
Interaction term -0.15 0.03 -.25***
(group*baseline racist attitudes score)

Note. * p<.05, ** p <.01, *** p <.001.

The significant interaction (Figure 5) indicates that at baseline racial attitudes, the treatment group and control group had about the same one-week posttest racial attitudes, while those with high levels of baseline racial attitudes scores the control group had greater one-week posttest racial attitudes compared to the treatment group.

Figure 5

Racist Attitudes Significant Interaction from Baseline to One-week Posttest



The second regression assessed the outcome at one-month follow-up. In preliminary analysis the assumptions of multiple regression were assessed. The assumptions of normality, linearity and homoscedasticity were evaluated through an

examination of the residual scatter plots; the assumptions were met. The absence of multicollinearity was assessed through examination of the Variance Inflation Factors (VIF); the assumption was met.

Group membership (control vs. ABC) and the mean-centered racist attitudes one-week posttest scores were entered into the first block of the regression. Group membership was dummy coded as 1 = ABC group membership and 0 = non ABC group membership prior to analysis. At step 1, the mean-centered MRS one-week posttest scores were entered into the model along with the group membership variable. At step 2, interaction term (group*centered MRS posttest) was entered to investigate the interaction between the MRS one-week posttest score and group. The results of the first block regression with the group and one-week posttest racist attitudes scores predicting one-month follow-up racist attitudes scores were significant, F(2, 105) = 1604.49, p < .001, suggesting that group membership and one-week posttest racist attitudes scores predict one-month follow-up racist attitudes scores. Group membership and one-week posttest racist attitudes scores accounted for (R^2) 96.8% of the variance in one-month follow-up racist attitudes scores. The results of the first block regression with group and one-week posttest racist attitudes scores. The results of the first block regression with group and one-week posttest racist attitudes scores predicting one-month follow-up racist attitudes scores predicting one-month follow-up racist attitudes scores are summarized in Table 16.

The interaction term (group*centered posttest racist attitudes) was entered into the second block of the regression. The results of the second block regression with the interaction of group and one-week posttest racist attitudes predicting one-month follow-up racist attitudes scores were significant, F(3, 104) = 1209.73, p < .001, suggesting that the independent variables predict one-month follow-up racist attitudes scores after



controlling for group membership and one-week posttest racist attitudes scores. The independent variables accounted for an additional (ΔR^2) 0.4% of the variance in one-month follow-up racist attitudes scores which was a significant increase, F(1, 104) = 14.28, p = .000, the total (R^2) for the model is 97.2%. The results for the second block of the regression with the interaction of group and one-week posttest racist attitudes predicting one-month follow-up racist attitudes scores are summarized in Table 16, and suggest that after controlling for group membership and one-week posttest racist attitudes scores, the interaction between posttest racist attitudes scores and group is significant, for every one unit increase in the interaction term, one-month follow-up racist attitudes scores will decrease by 0.12units. The alternative hypothesis that ABC counseling will decrease high school students' racist attitudes one-week posttest to one-month follow-up is accepted.

Table 16

Hierarchical Regression Analysis Summary for Adventure Based Counseling Predicting
Racist Attitudes from One-week Posttest to One-month Follow-up

Step and predictor variable	В	SE B	β	R^2	ΔR^2
Step 1:				.968***	.968***
Group membership	-0.11	0.03	07***		
Posttest racist attitudes score	0.91	0.02	.98***		
Step 2:				.972***	.004***
Group membership	-0.11	0.03	07***		

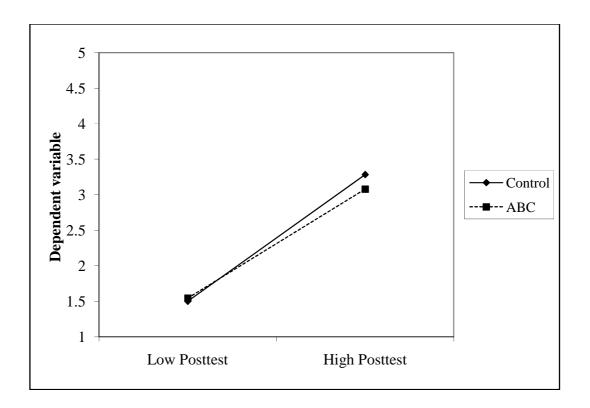
racist attitudes score 1.08 0.05 1.15***
on term -0.12 0.0319*** costtest racist score)

Note. * p<.05, ** p <.01, *** p <.001.

The significant interaction (Figure 6) indicates that at one-week posttest racial attitudes, the treatment group and control group had about the same one-month follow-up racial attitudes, while those with high levels of one-week posttest racial attitudes scores the control group had greater one-month follow-up racial attitudes compared to the treatment group.

Figure 6

Racist Attitudes Significant Interaction from One-week Posttest to One-month Follow-up



Hypothesis 5. To examine hypothesis 5—Adventure Based Counseling will have a positive impact on high school students' racism-related discipline referrals, such that racism-related discipline referrals will decrease from baseline (T1) to one-month follow-up (T3)—a hierarchical linear regression was conducted. The regression assessed the outcome at one-month follow-up. In preliminary analysis the assumptions of multiple regression were assessed. The assumptions of normality, linearity and homoscedasticity were evaluated through an examination of the residual scatter plots; the assumptions were met. The absence of multicollinearity was assessed through examination of the Variance Inflation Factors (VIF); the assumption was violated due to correlation between the centered racism specific discipline referrals and the interaction term and caution should be given to interpretation of the results

Group membership (control vs. ABC) and the mean-centered racism-related discipline referrals baseline values were entered into the first block of the regression.

Group membership was dummy coded as 1 = ABC group membership and 0 = non ABC group membership prior to analysis. At step 1, the mean-centered racism-related discipline referrals baseline values were entered into the model along with the group membership variable. At step 2, the interaction term (group* mean-centered racism-related discipline referrals baseline) was entered to investigate the interaction between the racism-related discipline referrals baseline values and group.

The results of the first block regression with the group and baseline racism-related discipline referrals predicting follow-up racism-related discipline referrals were significant, F(2, 26) = 4.84, p = .016, suggesting that group membership and baseline racism-related discipline referrals predict one-month follow-up racism-related discipline



referrals. Group membership and baseline racism-related discipline referrals accounted for (R²) 27.1% of the variance in one-month follow-up racism-related discipline referrals. The results of the first block regression with group and baseline racism-related discipline referrals predicting one-month follow-up racism-related discipline referrals are summarized in Table 17.

The interaction term (group*centered baseline racism-related discipline referrals) was entered into the second block of the regression. The results of the second block regression with the interaction of group and baseline racism-related discipline referrals predicting one-month follow-up racism-related discipline referrals were not significant, F (3, 25) = 3.10, p = .045, suggesting there was no significant interaction between group and baseline (Table 17). The alternative hypothesis that ABC counseling will reduce high school students' racism-related discipline referrals from baseline to one-month follow-up is rejected.

Table 17

Hierarchical Regression Analysis Summary for Adventure Based Counseling Predicting
Racism-Related Discipline Referrals from Baseline to One-month Follow-up

Step and predictor variable	В	SE B	β	R^2	ΔR^2
Step 1:				.27*	.27*
Group membership	-0.33	0.15	39*		
Baseline racism-related discipline referrals	0.27	0.12	.39*		



Step 2:				.27	.00
Group membership	-0.33	0.42	39		
Baseline racism-related discipline referrals	0.27	0.37	.39		
Interaction term (group*baseline racism- related discipline referrals)	0.00	0.24	.00		

Note. * p<.05, ** p<.01, *** p<.001.

Hypothesis 6. To examine hypothesis 6—for each group (ABC vs. control) there is a relationship, such that higher scores on self-esteem and empathy will be associated with lower scores on the perception of racial discrimination, and with lower scores on racist attitudes—36 Pearson correlations were conducted. Correlations were conducted for each group (ABC vs. control) and for each time period (baseline, one-week posttest and one-month follow-up).

For the control group at baseline, there was a significant positive correlation between empathy and self-esteem (r = .62, p < .01), and between perceived racial discrimination and racist attitudes (r = .40, p < .01), suggesting that as the empathy scores increase, self-esteem scores also increase, and as perceived racial discrimination scores decrease, racist attitude scores also decrease. There was a significant negative relationship between several variables, including, perceived racial discrimination and empathy (r = -.43, p < .01), and perceived racial discrimination and self-esteem (r = -.40, p < .01), suggesting that as perceived racial discrimination scores decrease the scores on self-esteem and empathy increase. See Table 18.



Table 18

Pearson r Correlations between Empathy, Perceived Racial Discrimination, Racist

Attitudes and Self-Esteem for the Control Group at Baseline

Baseline Variables	Empathy	Perceived Racial Discrimination	Racist Attitudes
Perceived Racial Discrimination	43**		
Racist Attitudes	.03	.40**	
Self-Esteem	.62**	40*	03

For the ABC group at baseline, there was a significant positive correlation between empathy and self-esteem (r = .62, p < .01), and between perceived racial discrimination and racist attitudes (r = .37, p < .01), suggesting that as the empathy scores increase, self-esteem scores also increase, and as perceived racial discrimination scores decrease, racist attitude scores also decrease. There was a significant negative relationship between several variables, including perceived racial discrimination and empathy (r = -.44, p < .01), and perceived racial discrimination and self-esteem (r = -.29, p < .01), suggesting that as perceived racial discrimination scores decrease the scores on self-esteem and empathy increase. See Table 19.



Table 19

Pearson r Correlations between Empathy, Perceived Racial Discrimination, Racist

Attitudes and Self-Esteem for the ABC Group at Baseline

Baseline Variables	Empathy	Perceived Racial Discrimination	Racist Attitudes
Perceived Racial Discrimination	45**		
Racist Attitudes	02	.37**	
Self-Esteem	.62**	29*	08

For the control group at one-week posttest, there was a significant positive correlation between empathy and self-esteem (r = .60, p < .01), and between perceived racial discrimination and racist attitudes (r = .39, p < .01), suggesting that as the empathy scores increase, self-esteem scores also increase, and as perceived racial discrimination scores decrease, racist attitude scores also decrease. There was a significant negative relationship between several variables, including perceived racial discrimination and empathy (r = -.43, p < .01), and perceived racial discrimination and self-esteem (r = -.42, p < .01), suggesting that as perceived racial discrimination scores decrease the scores on self-esteem and empathy increase. See Table 20.

Table 20

Pearson r Correlations between Empathy, Perceived Racial Discrimination, Racist

Attitudes and Self-Esteem for the Control Group at One Week Posttest

One Week Posttest Variables	Empathy	Perceived Racial Discrimination	Racist Attitudes
Perceived Racial Discrimination	43**		
Racist Attitudes	.00	.39**	
Self-Esteem	.60**	42**	.07

For the ABC group at one-week posttest, there was a significant positive correlation between empathy and self-esteem (r = .65, p < .01), and between perceived racial discrimination and racist attitudes (r = .34, p < .01), suggesting that as the empathy scores increase, self-esteem scores also increase, and as perceived racial discrimination scores decrease, racist attitude scores also decrease. There was a significant negative relationship between several variables, including perceived racial discrimination and empathy (r = -.44, p < .01), and perceived racial discrimination and self-esteem (r = -.32, p < .01), suggesting that as perceived racial discrimination scores decrease the scores on self-esteem and empathy increase. See Table 21.

Table 21

Pearson r Correlations between Empathy, Perceived Racial Discrimination, Racist

Attitudes and Self-Esteem for the ABC Group at One-week Posttest

One Week Posttest Variables	Empathy	Perceived Racial Discrimination	Racist Attitudes
Perceived Racial Discrimination	44**		
Racist Attitudes	03	.34**	
Self-Esteem	.65**	32**	20

For the control group at one-month follow-up, there was a significant positive correlation between empathy and self-esteem (r = .66, p < .01), and between perceived racial discrimination and racist attitudes (r = .38, p < .01), suggesting that as the empathy scores increase, self-esteem scores also increase, and as perceived racial discrimination scores decrease, racist attitude scores also decrease. There was a significant negative relationship between several variables, including perceived racial discrimination and empathy (r = -.43, p < .01), and perceived racial discrimination and self-esteem (r = -.37, p < .01), suggesting that as perceived racial discrimination scores decrease the scores on self-esteem and empathy increase. See Table 22.

Table 22

Pearson r Correlations between Empathy, Perceived Racial Discrimination, Racist

Attitudes and Self-Esteem for the Control Group at One-month Follow-up

One Month Follow-up Variables	Empathy	Perceived Racial Discrimination	Racist Attitudes
Perceived Racial Discrimination	43**		
Racist Attitudes	.00	.38**	
Self-Esteem	.66**	37**	07

For the ABC group at one-month follow-up, there was a significant positive correlation between empathy and self-esteem (r = .53, p < .01), and between perceived racial discrimination and racist attitudes (r = .32, p < .01), suggesting that as the empathy scores increase, self-esteem scores also increase, and as perceived racial discrimination scores decrease, racist attitude scores also decrease. There was a significant negative relationship between several variables, including perceived racial discrimination and empathy (r = -.38, p < .01), and perceived racial discrimination and self-esteem (r = -.35, p < .01), suggesting that as perceived racial discrimination scores decrease the scores on self-esteem and empathy increase. See Table 23.

Table 23

Pearson r Correlations between Empathy, Perceived Racial Discrimination, Racist

Attitudes and Self-Esteem for the ABC Group at One-month Follow-up

One Month Follow-up Variables	Empathy	Perceived Racial Discrimination	Racist Attitudes
Perceived Racial Discrimination	38**		
Racist Attitudes	.02	.32*	
Self-Esteem	.53**	35**	24

In reviewing the interrelationships among the variables at each time period, significant relationships were found. The significant correlation coefficients were evaluated according to Cohen's standard, where .30 or less represents a small association, .30-.49 represents a medium association, and .50 or larger correlations represent a large size effect or correlation between the two variables (Cohen, 1988).

Significant positive relationships with a large effect size (.50 or larger) were noted at all three time periods between empathy and self-esteem and perceived racial discrimination and racist attitudes for both groups (control and ABC), suggesting that as empathy scores increase, self-esteem scores also increase, and as perceived racial discrimination scores decrease, racist attitude scores also decrease.

Significant negative relationships were found among the other variables. This includes for each time period between perceived racial discrimination and empathy for



both the ABC and control group, suggesting that as perceived racial discrimination decreases, empathy increases. Significant negative relationships were found at each time period between perceived racial discrimination and self-esteem both groups, suggesting that as perceived racial discrimination decreases, self-esteem increases. Many of the negative relationships were found to have a medium effect size (between 30-.49) but a small effect size (less than .30) was found for the ABC group at baseline between perceived discrimination and empathy and self-esteem (less than .30). Overall, the strength of the relationships remained relatively constant over time.

The alternative hypothesis—for each group (ABC vs. control) there is a relationship, such that higher scores on self-esteem and empathy will be associated with lower scores on the perception of racial discrimination, and with lower scores on racist attitudes— is partially accepted. Both significant positive and significant negative relationships were found among several variables.

Hypothesis 7. To examine hypothesis 7—there is no significant difference in the observed effects of ABC counseling based on ethnicity or gender—4 mixed model ANOVAs were conducted to examine if significant differences exist on the outcomes of self-esteem, empathy, perceived racial discrimination, and racist attitudes within assessment periods (baseline vs. one-week follow-up vs. one month follow-up) and between gender (male vs. female), ethnicity (African American vs. Caucasian vs. Latina/o) and group membership (control vs. ABC).

Self-Esteem. To examine if significant differences exist on self-esteem within assessment periods (baseline vs. one-week follow-up vs. one month follow-up) and between gender (male vs. female), ethnicity (African American vs. Caucasian vs.



Latina/o) and group membership (control vs. ABC) a mixed model ANOVA was conducted. Several interactions were statistically significant.

Self-esteem, group, ethnicity, and gender interaction. Self-esteem, group, ethnicity, and gender interaction was statistically significant. Post-hoc tests revealed for males in the ABC counseling group, African Americans had significantly greater self-esteem scores at one-week follow-up compared to baseline, and had significantly greater one-month follow-up compared to one-week follow-up scores. For males in the ABC counseling group, Caucasians had significantly greater self-esteem scores at one-week follow-up compared to baseline, and had significantly greater one-month follow-up compared to one-week follow-up scores. For males in the ABC counseling group, Latinos had significantly greater one-week follow-up compared to baseline scores. For males in the control group, African Americans' self-esteem scores were significantly greater at one-week follow-up compared to baseline. For Latino males in the control group, one-month follow-up scores were significantly greater than at baseline.

For female African American and Caucasian participants in the ABC counseling group, baseline self-esteem scores were significantly greater than at one-week follow-up. For Latina females in the ABC counseling group, one-month follow-up self-esteem scores were significantly greater than both their baseline and one-week. For African American females in the control group, baseline self-esteem scores were significantly greater than at one-week. For Caucasian women in the control group, one-month follow-up self-esteem scores were significantly greater than at baseline. For Latina females in



the control group, both baseline and one-week follow-up self-esteem scores were significantly greater than one-month follow-up scores.

Self-esteem and gender interaction. Self-esteem and gender interaction was statistically significant. Males had significantly greater one-week follow-up and one-month follow-up self-esteem scores compared to baseline, and one-month follow-up scores were significantly greater than at one-week follow-up.

For females, baseline and one-month follow-up self-esteem scores were significantly greater than one-week follow-up scores. For baseline, one-week, and one-month follow-up, females had significantly greater self-esteem scores than males.

Self-esteem and group interaction. Self-esteem-group interaction was statistically significant. One-month follow-up self-esteem scores were significantly greater than at both baseline and one-week. At one-month follow-up, the ABC counseling group had significantly greater self-esteem scores than controls.

Self-esteem overall. There was a main effect on self-esteem scores. One-month follow-up self-esteem scores were significantly greater than at both baseline and one-week.

No other post-hoc tests were statistically significant.

Table 24

Means and Standard Deviations of Self-Esteem

Group	Gender	Ethnicity	M	SD	n
Control	Male	African American	2.03	0.41	9
		Caucasian	1.99	0.20	9
		Latina/o	2.27	0.53	9



Female						
Caucasian 3.06 0.58 9			Total	2.10	0.40	27
Latina/o 2.84 0.63 9 7 7 7 7 18 2.49 0.63 9 18 18 18 18 18 18 18		Female	African American	2.73	0.49	9
Total			Caucasian	3.06	0.58	9
Total African American 2.38 0.57 18 Caucasian 2.52 0.69 18 Latina/o 2.56 0.64 18 Total 2.49 0.63 54 ABC Male African American 1.99 0.41 9 Caucasian 1.96 0.30 9 Latina/o 2.10 0.67 9 Total 2.01 0.47 27 Female African American 2.90 0.38 9 Caucasian 3.17 0.60 9 Latina/o 2.78 0.69 9 Total 2.95 0.58 27 Total African American 2.44 0.61 18 Caucasian 2.56 0.77 18 Latina/o 2.44 0.75 18 Total 2.48 0.70 54 Total Male African American 2.01 0.40 18 Caucasian 1.97 0.24 18 Latina/o 2.18 0.59 18 Total 2.06 0.44 54 Female African American 2.82 0.44 18 Caucasian 3.11 0.57 18 Total 2.91 0.57 54 Total 2.91 0.57 54 Total 2.91 0.57 54 Total African American 2.91 0.57 54 Total 2.91 0.57 54 Total 2.91 0.57 54 Total 2.91 0.57 54 Total African American 2.91 0.57 54 Total 2.91 0.57 54 Total 2.91 0.57 54 Total 2.91 0.57 54 Total African American 2.41 0.58 36 Caucasian 2.54 0.72 36			Latina/o	2.84	0.63	9
Caucasian 2.52 0.69 18 Latina/o 2.56 0.64 18 Total 2.49 0.63 54 ABC Male African American 1.99 0.41 9 Caucasian 1.96 0.30 9 Latina/o 2.10 0.67 9 Total 2.01 0.47 27 Female African American 2.90 0.38 9 Caucasian 3.17 0.60 9 Latina/o 2.78 0.69 9 Total 2.95 0.58 27 Total African American 2.44 0.61 18 Caucasian 2.56 0.77 18 Latina/o 2.44 0.75 18 Latina/o 2.44 0.75 18 Total 2.48 0.70 54 Total 2.96 0.40 18 Caucasian 1.97 0.24 18 Latina/o 2.18 0.59 18 Total 2.06 0.44 54 Female African American 2.82 0.44 18 Caucasian 3.11 0.57 18 Latina/o 2.81 0.64 18 Caucasian 3.11 0.57 18 Latina/o 2.81 0.64 18 Total 2.91 0.57 54 Total African American 2.91 0.57 54 Total 2.91 0.57 54 Total African American 2.91 0.57 54 Total 2.91 0.57 54 Total African American 2.91 0.55 36			Total	2.88	0.56	27
Latina/o 2.56 0.64 18 Total 2.49 0.63 54 ABC Male African American 1.99 0.41 9 Caucasian 1.96 0.30 9 Latina/o 2.10 0.67 9 Total 2.01 0.47 27 Female African American 2.90 0.38 9 Caucasian 3.17 0.60 9 Latina/o 2.78 0.69 9 Total 2.95 0.58 27 Total African American 2.44 0.61 18 Caucasian 2.56 0.77 18 Latina/o 2.44 0.75 18 Latina/o 2.44 0.75 18 Total African American 2.01 0.40 18 Caucasian 1.97 0.24 18 Latina/o 2.18 0.59 18 Total Caucasian 3.11 0.57 18 Latina/o 2.18 0.59 18 Total Caucasian 3.11 0.57 18 Latina/o 2.81 0.64 18 Total Total 2.91 0.57 54 Total African American 2.41 0.58 36 Caucasian 2.54 0.72 36		Total	African American	2.38	0.57	18
ABC Male African American 1.99 0.41 9 Caucasian 1.96 0.30 9 Latina/o 2.10 0.67 9 Total 2.01 0.47 27 Female African American 2.90 0.38 9 Caucasian 3.17 0.60 9 Latina/o 2.78 0.69 9 Total 2.95 0.58 27 Total African American 2.44 0.61 18 Caucasian 2.56 0.77 18 Latina/o 2.44 0.75 18 Total 2.48 0.70 54 Total Male African American 2.01 0.40 18 Caucasian 1.97 0.24 18 Latina/o 2.18 0.59 18 Total 2.06 0.44 54 Female African American 2.82 0.44 18 Caucasian 3.11 0.57 18 Latina/o 2.81 0.64 18 Total 2.91 0.57 54 Total African American 2.91 0.57 54 Total 2.91 0.57 54 Total 2.91 0.57 54 Total African American 2.91 0.58 36 Caucasian 3.11 0.57 54 Total 2.91 0.57 54 Total 2.91 0.57 54 Total African American 2.41 0.58 36 Caucasian 2.54 0.72 36			Caucasian	2.52	0.69	18
ABC Male African American 1.99 0.41 9 Caucasian 1.96 0.30 9 Latina/o 2.10 0.67 9 Total 2.01 0.47 27 Female African American 2.90 0.38 9 Caucasian 3.17 0.60 9 Latina/o 2.78 0.69 9 Total 2.95 0.58 27 Total African American 2.44 0.61 18 Caucasian 2.56 0.77 18 Latina/o 2.44 0.75 18 Total 2.48 0.70 54 Total Male African American 2.01 0.40 18 Caucasian 1.97 0.24 18 Latina/o 2.18 0.59 18 Total 2.06 0.44 54 Female African American 2.82 0.44 18 Caucasian 3.11 0.57 18 Latina/o 2.81 0.64 18 Total 2.91 0.57 54 Total African American 2.41 0.58 36 Caucasian 2.54 0.72 36			Latina/o	2.56	0.64	18
Caucasian 1.96 0.30 9 Latina/o 2.10 0.67 9 Total 2.01 0.47 27 Female			Total	2.49	0.63	54
Latina/o 2.10 0.67 9	ABC	Male	African American	1.99	0.41	9
Female African American 2.01 0.47 27 Female African American 2.90 0.38 9 Caucasian 3.17 0.60 9 Latina/o 2.78 0.69 9 Total 2.95 0.58 27 Total African American 2.44 0.61 18 Caucasian 2.56 0.77 18 Latina/o 2.44 0.75 18 Total 2.48 0.70 54 Total Male African American 2.01 0.40 18 Caucasian 1.97 0.24 18 Latina/o 2.18 0.59 18 Total 2.06 0.44 54 Female African American 2.82 0.44 18 Caucasian 3.11 0.57 18 Latina/o 2.81 0.64 18 Total 2.91 0.57 54 Total African American 2.41 0.58 36 Caucasian 2.54 0.72 36			Caucasian	1.96	0.30	9
Female African American 2.90 0.38 9 Caucasian 3.17 0.60 9 Latina/o 2.78 0.69 9 Total 2.95 0.58 27 Total African American 2.44 0.61 18 Caucasian 2.56 0.77 18 Latina/o 2.44 0.75 18 Total 2.48 0.70 54 Total Male African American 2.01 0.40 18 Caucasian 1.97 0.24 18 Latina/o 2.18 0.59 18 Total 2.06 0.44 54 Female African American 2.82 0.44 18 Caucasian 3.11 0.57 18 Latina/o 2.81 0.64 18 Total 2.91 0.57 54 Total African American 2.41 0.58 36 Caucasian 2.54 0.72 36			Latina/o	2.10	0.67	9
Caucasian 3.17 0.60 9 Latina/o 2.78 0.69 9 Total 2.95 0.58 27 Total African American 2.44 0.61 18 Caucasian 2.56 0.77 18 Latina/o 2.44 0.75 18 Total 2.48 0.70 54 Total 2.48 0.70 54 Total 2.18 0.59 18 Caucasian 1.97 0.24 18 Latina/o 2.18 0.59 18 Total 2.06 0.44 54 Female African American 2.82 0.44 18 Caucasian 3.11 0.57 18 Latina/o 2.81 0.64 18 Total 2.91 0.57 54 Total 2.91 0.57 54 Total 2.54 0.72 36			Total	2.01	0.47	27
Latina/o 2.78 0.69 9 Total 2.95 0.58 27 Total African American 2.44 0.61 18 Caucasian 2.56 0.77 18 Latina/o 2.44 0.75 18 Total 2.48 0.70 54 Total 2.48 0.70 54 Total 2.01 0.40 18 Caucasian 1.97 0.24 18 Latina/o 2.18 0.59 18 Total 2.06 0.44 54 Female African American 2.82 0.44 18 Caucasian 3.11 0.57 18 Latina/o 2.81 0.64 18 Total 2.91 0.57 54 Total African American 2.41 0.58 36 Caucasian 2.54 0.72 36		Female	African American	2.90	0.38	9
Total			Caucasian	3.17	0.60	9
Total African American 2.44 0.61 18 Caucasian 2.56 0.77 18 Latina/o 2.44 0.75 18 Total 2.48 0.70 54 Total Male African American 2.01 0.40 18 Caucasian 1.97 0.24 18 Latina/o 2.18 0.59 18 Total 2.06 0.44 54 Female African American 2.82 0.44 18 Caucasian 3.11 0.57 18 Latina/o 2.81 0.64 18 Total 2.91 0.57 54 Total African American 2.41 0.58 36 Caucasian 2.54 0.72 36			Latina/o	2.78	0.69	9
Caucasian 2.56 0.77 18 Latina/o 2.44 0.75 18 Total 2.48 0.70 54 Total African American 2.01 0.40 18 Caucasian 1.97 0.24 18 Latina/o 2.18 0.59 18 Total 2.06 0.44 54 Female African American 2.82 0.44 18 Caucasian 3.11 0.57 18 Latina/o 2.81 0.64 18 Total 2.91 0.57 54 Total African American 2.41 0.58 36 Caucasian 2.54 0.72 36			Total	2.95	0.58	27
Total 2.44 0.75 18 Total 2.48 0.70 54 Total African American 2.01 0.40 18 Caucasian 1.97 0.24 18 Latina/o 2.18 0.59 18 Total 2.06 0.44 54 Female African American 2.82 0.44 18 Caucasian 3.11 0.57 18 Latina/o 2.81 0.64 18 Total 2.91 0.57 54 Total 2.41 0.58 36 Caucasian 2.54 0.72 36		Total	African American	2.44	0.61	18
Total Male African American 2.01 0.40 18 Caucasian 1.97 0.24 18 Latina/o 2.18 0.59 18 Total 2.06 0.44 54 Female African American 2.82 0.44 18 Caucasian 3.11 0.57 18 Latina/o 2.81 0.64 18 Total 2.91 0.57 54 Total African American 2.41 0.58 36 Caucasian 2.54 0.72 36			Caucasian	2.56	0.77	18
Total Male African American 2.01 0.40 18 Caucasian 1.97 0.24 18 Latina/o 2.18 0.59 18 Total 2.06 0.44 54 Female African American 2.82 0.44 18 Caucasian 3.11 0.57 18 Latina/o 2.81 0.64 18 Total 2.91 0.57 54 Total African American 2.41 0.58 36 Caucasian 2.54 0.72 36			Latina/o	2.44	0.75	18
Caucasian 1.97 0.24 18 Latina/o 2.18 0.59 18 Total 2.06 0.44 54 Female African American 2.82 0.44 18 Caucasian 3.11 0.57 18 Latina/o 2.81 0.64 18 Total 2.91 0.57 54 Total African American 2.41 0.58 36 Caucasian 2.54 0.72 36			Total	2.48	0.70	54
Latina/o 2.18 0.59 18 Total 2.06 0.44 54 Female African American 2.82 0.44 18 Caucasian 3.11 0.57 18 Latina/o 2.81 0.64 18 Total 2.91 0.57 54 Total 2.41 0.58 36 Caucasian 2.54 0.72 36	Total	Male	African American	2.01	0.40	18
Total 2.06 0.44 54 Female African American 2.82 0.44 18 Caucasian 3.11 0.57 18 Latina/o 2.81 0.64 18 Total 2.91 0.57 54 Total African American 2.41 0.58 36 Caucasian 2.54 0.72 36			Caucasian	1.97	0.24	18
Female African American 2.82 0.44 18 Caucasian 3.11 0.57 18 Latina/o 2.81 0.64 18 Total 2.91 0.57 54 Total African American 2.41 0.58 36 Caucasian 2.54 0.72 36			Latina/o	2.18	0.59	18
Caucasian 3.11 0.57 18 Latina/o 2.81 0.64 18 Total 2.91 0.57 54 Total African American 2.41 0.58 36 Caucasian 2.54 0.72 36			Total	2.06	0.44	54
Latina/o 2.81 0.64 18 Total 2.91 0.57 54 Total African American 2.41 0.58 36 Caucasian 2.54 0.72 36		Female	African American	2.82	0.44	18
Total 2.91 0.57 54 Total African American 2.41 0.58 36 Caucasian 2.54 0.72 36			Caucasian	3.11	0.57	18
Total African American 2.41 0.58 36 Caucasian 2.54 0.72 36			Latina/o	2.81	0.64	18
Caucasian 2.54 0.72 36			Total	2.91	0.57	54
		Total	African American	2.41	0.58	36
Latina/o 2.50 0.69 36			Caucasian	2.54	0.72	36
			Latina/o	2.50	0.69	36



		Total	2.48	0.66	108
Control	Male	African American	2.23	0.35	9
		Caucasian	2.27	0.54	9
		Latina/o	2.40	0.71	9
		Total	2.30	0.54	27
	Female	African American	2.51	0.47	9
		Caucasian	2.77	0.64	9
		Latina/o	2.78	0.53	9
		Total	2.69	0.55	27
	Total	African American	2.37	0.43	18
		Caucasian	2.52	0.63	18
		Latina/o	2.59	0.64	18
		Total	2.49	0.57	54
ABC	Male	African American	2.57	0.43	9
		Caucasian	2.30	0.31	9
		Latina/o	2.39	0.77	9
		Total	2.42	0.53	27
	Female	African American	2.78	0.44	9
		Caucasian	2.84	0.44	9
		Latina/o	2.73	0.49	9
		Total	2.79	0.44	27
	Total	African American	2.67	0.43	18
		Caucasian	2.57	0.47	18
		Latina/o	2.56	0.65	18
		Total	2.60	0.52	54
Total	Male	African American	2.40	0.42	18
		Caucasian	2.28	0.43	18
		Latina/o	2.39	0.72	18
		Total	2.36	0.53	54
	Female	African American	2.64	0.46	18
		Caucasian	2.81	0.54	18
		Latina/o	2.76	0.50	18



		Total	2.74	0.49	54
	Total	African American	2.52	0.45	36
		Caucasian	2.54	0.55	36
		Latina/o	2.58	0.64	36
		Total	2.55	0.55	108
Control	Male	African American	2.22	0.28	9
		Caucasian	2.27	0.60	9
		Latina/o	2.50	0.69	9
		Total	2.33	0.54	27
	Female	African American	2.66	0.48	9
		Caucasian	2.89	0.59	9
		Latina/o	2.64	0.44	9
		Total	2.73	0.50	27
	Total	African American	2.44	0.44	18
		Caucasian	2.58	0.66	18
		Latina/o	2.57	0.57	18
		Total	2.53	0.56	54
ABC	Male	African American	2.69	0.31	9
		Caucasian	2.62	0.32	9
		Latina/o	2.51	0.74	9
		Total	2.61	0.48	27
	Female	African American	2.62	0.33	9
		Caucasian	3.11	0.59	9
		Latina/o	3.19	0.77	9
		Total	2.97	0.63	27
	Total	African American	2.66	0.31	18
		Caucasian	2.87	0.53	18
		Latina/o	2.85	0.81	18
		Total	2.79	0.58	54
Total	Male	African American	2.46	0.38	18
		Caucasian	2.44	0.50	18
		Latina/o	2.51	0.69	18



	Total	2.47	0.53	54
Female	African American	2.64	0.40	18
	Caucasian	3.00	0.59	18
	Latina/o	2.92	0.67	18
	Total	2.85	0.58	54
Total	African American	2.55	0.39	36
	Caucasian	2.72	0.61	36
	Latina/o	2.71	0.70	36
	Total	2.66	0.58	108

Table 25

Test of Within Subject of Self-Esteem

Source				
	df	Square	F	Sig.
Time 1	2	0.86	13.18	.000
Time 1 * Group	2	0.48	7.42	.001
Time 1 * Gender	2	2.06	31.57	.000
Time 1 * Ethnicity	4	0.07	1.00	.410
Time 1 * Group * Gender	2	0.07	1.10	.336
Time 1 * Group * Ethnicity	4	0.11	1.62	.172
Time 1 * Gender * Ethnicity	4	0.13	2.05	.089
Time 1 * Group * Gender * Ethnicity	4	0.23	3.53	.008
Error(Time 1)	192	0.07	(0.07)	

Note: Used Sphericity

Empathy. To examine if significant differences exist on empathy within assessment periods (baseline vs. one-week follow-up vs. one month follow-up) and between gender (male vs. female), ethnicity (African American vs. Caucasian vs.



Latina/o) and group membership (control vs. ABC) a mixed model ANOVA was conducted. Several interactions were statistically significant.

Empathy, gender, group. Gender, group, empathy interaction was statistically significant. For males in the ABC counseling group, empathy scores were significantly greater in the one-week and one-month follow-up compared to baseline.

Empathy, *gender*. For males overall, empathy scores were significantly greater in the one-week and one-month follow-up compared to baseline. Females had significantly greater empathy scores compared to males at baseline, one-week and one-month follow-up empathy scores.

Empathy, *group*. The control group had significantly greater baseline empathy scores compared to one-week follow-up empathy scores.

Empathy overall. One-week follow-up had significantly greater empathy scores compared to baseline and one-month follow-up empathy scores. One-month follow-up had significantly greater empathy scores compared to baseline scores.

No other post-hoc tests were statistically significant.

Table 26

Means and Standard Deviations of Empathy

Group	Gender	Ethnicity	M	SD	n
Control	Male	African	2.59	1.03	9
		Caucasian	2.77	1.04	9
		Latina/o	2.93	0.92	9
		Total	2.76	0.97	27
	Female	African	3.65	0.66	9
		Caucasian	3.82	0.76	9



		Latina/o	3.83	0.60	8
		Total	3.76	0.66	26
	Total	African	3.12	1.00	18
		Caucasian	3.30	1.03	18
		Latina/o	3.35	0.89	17
		Total	3.25	0.96	53
ABC	Male	African	2.79	1.03	9
		Caucasian	2.86	1.03	9
		Latina/o	3.03	1.04	9
		Total	2.89	1.00	27
	Female	African	3.65	0.66	9
		Caucasian	3.82	0.84	9
		Latina/o	3.79	0.68	8
		Total	3.75	0.71	26
	Total	African	3.22	0.94	18
		Caucasian	3.34	1.04	18
		Latina/o	3.39	0.95	17
		Total	3.32	0.96	53
Total	Male	African	2.69	1.00	18
		Caucasian	2.81	1.01	18
		Latina/o	2.98	0.95	18
		Total	2.83	0.98	54
	Female	African	3.65	0.64	18
		Caucasian	3.82	0.78	18
		Latina/o	3.81	0.62	16
		Total	3.76	0.67	52
	Total	African	3.17	0.96	36
		Caucasian	3.32	1.02	36
		Latina/o	3.37	0.91	34
		Total	3.28	0.96	106
Control	Male	African	2.58	1.02	9
		Caucasian	2.77	1.04	9

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		Latina/o	2.88	0.90	9
		Total	2.75	0.96	27
	Female	African	3.59	0.65	9
		Caucasian	3.82	0.76	9
		Latina/o	3.83	0.60	8
		Total	3.74	0.66	26
	Total	African	3.09	0.98	18
		Caucasian	3.30	1.03	18
		Latina/o	3.33	0.89	17
		Total	3.24	0.96	53
ABC	Male	African	3.09	0.82	9
		Caucasian	3.12	0.87	9
		Latina/o	3.39	0.80	9
		Total	3.20	0.81	27
	Female	African	3.68	0.51	9
		Caucasian	3.87	0.66	9
		Latina/o	4.00	0.47	8
		Total	3.84	0.55	26
	Total	African	3.39	0.73	18
		Caucasian	3.49	0.84	18
		Latina/o	3.68	0.72	17
		Total	3.52	0.76	53
Total	Male	African	2.84	0.94	18
		Caucasian	2.94	0.94	18
		Latina/o	3.14	0.86	18
		Total	2.97	0.91	54
	Female	African	3.64	0.57	18
		Caucasian	3.84	0.69	18
		Latina/o	3.91	0.53	16
		Total	3.79	0.60	52
	Total	African	3.24	0.86	36
		Caucasian	3.39	0.93	36

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Control			Latina/o	3.50	0.82	34
Control Male Latina/o (2.89) African (2.74) 1.04 9 Latina/o (2.89) 0.87 9 Total (2.74) 0.96 27 Female African (3.60) 0.66 9 Caucasian (3.85) 0.74 9 Latina/o (3.86) 0.61 8 Total (3.77) 0.66 26 Total (3.77) 0.66 26 African (3.09) 0.99 18 Caucasian (3.30) 1.04 18 Latina/o (3.35) 0.89 17 Total (3.24) 0.97 53 ABC Male African (3.12) 0.75 9 Caucasian (3.08) 0.80 9 Latina/o (3.26) 0.66 9 Total (3.15) 0.72 27 Female African (3.61) 0.44 9 Latina/o (3.92) 0.43 8 Total (3.78) 0.51 26 Total (3.78) 0.51 26 Latina/o (3.36) 0.65 18						
Caucasian 2.76 1.04 9	Control	Male				
Female Total 2.74 0.96 27 Female African 3.60 0.66 9 Caucasian 3.85 0.74 9 Latina/o 3.86 0.61 8 Total 3.77 0.66 26 Total African 3.09 0.99 18 Caucasian 3.30 1.04 18 Latina/o 3.35 0.89 17 Total 3.24 0.97 53 ABC Male African 3.12 0.75 9 Caucasian 3.08 0.80 9 Latina/o 3.26 0.66 9 Total 3.15 0.72 27 Female African 3.61 0.44 9 Caucasian 3.82 0.63 9 Latina/o 3.92 0.43 8 Total 3.78 0.51 26 Total 3.78 0.51 26 Total African 3.36 0.65 18 Caucasian 3.45 0.80 18 Latina/o 3.57 0.64 17 Total 3.46 0.69 53 Total African 2.85 0.92 18 Caucasian 2.92 0.92 18 Caucasian 2.95 0.86 54 Total Total 2.95 0.86 54 Female African 3.60 0.54 18			Caucasian	2.76	1.04	9
Female			Latina/o	2.89	0.87	9
Caucasian 3.85 0.74 9 Latina/o 3.86 0.61 8 Total 3.77 0.66 26 Total African 3.09 0.99 18 Caucasian 3.30 1.04 18 Latina/o 3.35 0.89 17 Total 3.24 0.97 53 Total 3.12 0.75 9 Caucasian 3.08 0.80 9 Latina/o 3.26 0.66 9 Total 3.15 0.72 27 Female African 3.61 0.44 9 Caucasian 3.82 0.63 9 Latina/o 3.92 0.43 8 Total 3.78 0.51 26 Total 3.78 0.51 26 Total 3.78 0.51 26 Total 3.78 0.65 18 Caucasian 3.45 0.80 18 Latina/o 3.57 0.64 17 Total 3.46 0.69 53 Total Male African 2.85 0.92 18 Latina/o 3.08 0.77 18 Total 2.95 0.86 54 Total 2.95 0.86 54 Total 3.60 0.54 18			Total	2.74	0.96	27
Latina/o 3.86 0.61 8 Total 3.77 0.66 26 Total African 3.09 0.99 18 Caucasian 3.30 1.04 18 Latina/o 3.35 0.89 17 Total 3.24 0.97 53 ABC Male African 3.12 0.75 9 Caucasian 3.08 0.80 9 Latina/o 3.26 0.66 9 Total 3.15 0.72 27 Female African 3.61 0.44 9 Caucasian 3.82 0.63 9 Latina/o 3.92 0.43 8 Total 3.78 0.51 26 Total 3.78 0.51 26 Total 3.78 0.51 26 Total 3.78 0.65 18 Caucasian 3.45 0.80 18 Latina/o 3.57 0.64 17 Total 3.46 0.69 53 Total African 2.85 0.92 18 Caucasian 2.92 0.92 18 Latina/o 3.08 0.77 18 Latina/o 3.08 0.77 18 Total 2.95 0.86 54 Female African 3.60 0.54 18		Female	African	3.60	0.66	9
Total African 3.77 0.66 26 Total African 3.09 0.99 18 Caucasian 3.30 1.04 18 Latina/o 3.35 0.89 17 Total 3.24 0.97 53 ABC Male African 3.12 0.75 9 Caucasian 3.08 0.80 9 Latina/o 3.26 0.66 9 Total 3.15 0.72 27 Female African 3.61 0.44 9 Caucasian 3.82 0.63 9 Latina/o 3.92 0.43 8 Total African 3.36 0.65 18 Caucasian 3.45 0.80 18 Latina/o 3.57 0.64 17 Total African 3.46 0.69 53 Total African 2.85 0.92 18 Caucasian 2.92 0.92 18 Latina/o 3.08 0.77 18 Total 2.95 0.86 54 Female African 3.60 0.54 18			Caucasian	3.85	0.74	9
Total African 3.09 0.99 18 Caucasian 3.30 1.04 18 Latina/o 3.35 0.89 17 Total 3.24 0.97 53 ABC Male African 3.12 0.75 9 Caucasian 3.08 0.80 9 Latina/o 3.26 0.66 9 Total 3.15 0.72 27 Female African 3.61 0.44 9 Caucasian 3.82 0.63 9 Latina/o 3.92 0.43 8 Total 3.78 0.51 26 Total 3.78 0.51 26 Total 3.78 0.51 26 Total 3.78 0.51 26 Caucasian 3.45 0.80 18 Latina/o 3.57 0.64 17 Total 3.46 0.69 53 Total Male African 2.85 0.92 18 Caucasian 2.92 0.92 18 Latina/o 3.08 0.77 18 Latina/o 3.08 0.77 18 Latina/o 3.08 0.77 18 Total 2.95 0.86 54			Latina/o	3.86	0.61	8
ABC Male African Total African African African Total African Afr			Total	3.77	0.66	26
ABC Male Latina/o 3.35 0.89 17		Total	African	3.09	0.99	18
ABC Male African 3.12 0.75 9 Caucasian 3.08 0.80 9 Latina/o 3.26 0.66 9 Total 3.15 0.72 27 Female African 3.61 0.44 9 Caucasian 3.82 0.63 9 Latina/o 3.92 0.43 8 Total 3.78 0.51 26 Total 3.78 0.51 26 Total 3.78 0.51 26 Total 3.78 0.65 18 Caucasian 3.45 0.80 18 Latina/o 3.57 0.64 17 Total 3.46 0.69 53 Total Male African 2.85 0.92 18 Caucasian 2.92 0.92 18 Latina/o 3.08 0.77 18 Latina/o 3.08 0.77 18 Total 2.95 0.86 54 Female African 3.60 0.54 18			Caucasian	3.30	1.04	18
ABC Male Caucasian African Caucasian 3.12 3.08 3.08 3.08 0.80 9 9 9 9 9 1. Actina/o 2. Caucasian 1. Caucasian 3.82 3.82 3.82 3.82 3.82 3.82 3.82 0.63 0.63 0.63 9 1. Actina/o 3.92 3.36 3.36 3.36 3.36 3.36 3.36 3.36 3.36 3.37 3.36 3.36 3.37 3.36 3.37 3.36 3.37 3.37 3.38 3.37 3.38 3.37 3.38 3.37 3.38 3.38 3.38 3.38 3.38 3.38 3.38 3.38 3.38 3.38 3.38 3.38 3.38 3.37 3.38 3.39 3.38 3.36 3.38 3.38 3.38 3.36 3.36 3.38 3.38 3.36 3.36 3.38 3.38 3.36 3.36 3.3			Latina/o	3.35	0.89	17
Caucasian 3.08 0.80 9 Latina/o 3.26 0.66 9 Total 3.15 0.72 27 Female African 3.61 0.44 9 Caucasian 3.82 0.63 9 Latina/o 3.92 0.43 8 Total 3.78 0.51 26 Total African 3.36 0.65 18 Caucasian 3.45 0.80 18 Latina/o 3.57 0.64 17 Total 3.46 0.69 53 Total African 2.85 0.92 18 Latina/o 3.08 0.77 18 Latina/o 3.08 0.77 18 Total 2.95 0.86 54 Female African 3.60 0.54 18			Total	3.24	0.97	53
Total 3.26 0.66 9 Total 3.15 0.72 27 Female African 3.61 0.44 9 Caucasian 3.82 0.63 9 Latina/o 3.92 0.43 8 Total 3.78 0.51 26 Total African 3.36 0.65 18 Caucasian 3.45 0.80 18 Latina/o 3.57 0.64 17 Total African 2.85 0.92 18 Total Male African 2.85 0.92 18 Latina/o 3.08 0.77 18 Total 2.95 0.86 54 Female African 3.60 0.54 18	ABC	Male	African	3.12	0.75	9
Total 3.15 0.72 27 Female African 3.61 0.44 9 Caucasian 3.82 0.63 9 Latina/o 3.92 0.43 8 Total 3.78 0.51 26 Total African 3.36 0.65 18 Caucasian 3.45 0.80 18 Latina/o 3.57 0.64 17 Total 3.46 0.69 53 Total Male African 2.85 0.92 18 Caucasian 2.92 0.92 18 Latina/o 3.08 0.77 18 Latina/o 3.08 0.77 18 Total 2.95 0.86 54 Female African 3.60 0.54 18			Caucasian	3.08	0.80	9
Female Pemale African 3.61 0.44 9 Caucasian 3.82 0.63 9 Latina/o 3.92 0.43 8 Total 3.78 0.51 26 Total 3.36 0.65 18 Caucasian 3.45 0.80 18 Latina/o 3.57 0.64 17 Total 3.46 0.69 53 Total 2.85 0.92 18 Caucasian 2.92 0.92 18 Latina/o 3.08 0.77 18 Total 2.95 0.86 54 Total 3.60 0.54 18			Latina/o	3.26	0.66	9
Caucasian 3.82 0.63 9 Latina/o 3.92 0.43 8 Total 3.78 0.51 26 Total African 3.36 0.65 18 Caucasian 3.45 0.80 18 Latina/o 3.57 0.64 17 Total 3.46 0.69 53 Total African 2.85 0.92 18 Caucasian 2.92 0.92 18 Latina/o 3.08 0.77 18 Total 2.95 0.86 54 Female African 3.60 0.54 18			Total	3.15	0.72	27
Total		Female	African	3.61	0.44	9
Total Total 3.78 0.51 26 Total African 3.36 0.65 18 Caucasian 3.45 0.80 18 Latina/o 3.57 0.64 17 Total 3.46 0.69 53 Total Male African 2.85 0.92 18 Caucasian 2.92 0.92 18 Latina/o 3.08 0.77 18 Total 2.95 0.86 54 Female African 3.60 0.54 18			Caucasian	3.82	0.63	9
Total African 3.36 0.65 18 Caucasian 3.45 0.80 18 Latina/o 3.57 0.64 17 Total Male African 2.85 0.92 18 Caucasian 2.92 0.92 18 Latina/o 3.08 0.77 18 Total Total 2.95 0.86 54 Female African 3.60 0.54 18			Latina/o	3.92	0.43	8
Caucasian 3.45 0.80 18 Latina/o 3.57 0.64 17 Total 3.46 0.69 53 Male African 2.85 0.92 18 Caucasian 2.92 0.92 18 Latina/o 3.08 0.77 18 Total 2.95 0.86 54 Female African 3.60 0.54 18			Total	3.78	0.51	26
Latina/o 3.57 0.64 17 Total 3.46 0.69 53 Male African 2.85 0.92 18 Caucasian 2.92 0.92 18 Latina/o 3.08 0.77 18 Total 2.95 0.86 54 Female African 3.60 0.54 18		Total	African	3.36	0.65	18
Total Male African 2.85 0.92 18 Caucasian 2.92 0.92 18 Latina/o 3.08 0.77 18 Total 70tal 2.95 0.86 54 Female African 3.60 0.54 18			Caucasian	3.45	0.80	18
Male African 2.85 0.92 18 Caucasian 2.92 0.92 18 Latina/o 3.08 0.77 18 Total 2.95 0.86 54 Female African 3.60 0.54 18			Latina/o	3.57	0.64	17
Caucasian 2.92 0.92 18 Latina/o 3.08 0.77 18 Total 2.95 0.86 54 Female African 3.60 0.54 18			Total	3.46	0.69	53
Latina/o 3.08 0.77 18 Total 2.95 0.86 54 Female African 3.60 0.54 18	Total	Male	African	2.85	0.92	18
Total 2.95 0.86 54 Female African 3.60 0.54 18			Caucasian	2.92	0.92	18
Female African 3.60 0.54 18			Latina/o	3.08	0.77	18
			Total	2.95	0.86	54
Caucasian 3.84 0.67 18		Female	African	3.60	0.54	18
			Caucasian	3.84	0.67	18

	Latina/o	3.89	0.51	16
	Total	3.77	0.58	52
Total	African	3.23	0.84	36
	Caucasian	3.38	0.92	36
	Latina/o	3.46	0.77	34
	Total	3.35	0.84	106

Table 27

Test of Within-Subjects on Empathy

Source	df	Mean Square	F	Sig.
Time 1	1.11	0.43	14.10	0.00
Time 1 * Group	1.11	0.60	19.62	0.00
Time 1 * Gender	1.11	0.18	5.95	0.01
Time 1 * Ethnicity	2.22	0.02	0.64	0.55
Time 1 * Group * Gender	1.11	0.23	7.37	0.01
Time 1 * Group * Ethnicity	2.22	0.03	0.95	0.40
Time 1 * Gender * Ethnicity	2.22	0.03	1.12	0.34
Time 1 * Group * Gender *	2.22	0.01	0.26	0.80
Ethnicity				
Error(Time 1)	104.27	.031	(.031)	

Note: Used Greenhouse-Geisser

Perceived racial discrimination. To examine if significant differences exist on perceived racial discrimination within assessment periods (baseline vs. one-week follow-up vs. one-month follow-up) and between gender (male vs. female), ethnicity (African American vs. Caucasian vs. Latina/o) and group membership (control vs. ABC), a mixed model ANOVA was conducted. Several interactions were statistically significant.

Perceived racial discrimination, gender and group. Perceived racial discrimination, gender and group interaction was statistically significant. Post-hoc tests



revealed for males in the ABC counseling group, baseline perceived racial discrimination scores were significantly greater than one-week follow-up and one-month follow-up scores, and one-week scores were significantly greater than one-month follow-up perceived racial discrimination scores.

For females in the ABC counseling group, baseline perceived racial discrimination scores were significantly greater than both their one-week and one-month follow-up perceived racial discrimination scores.

For females in the control group, one-week perceived racial discrimination scores were significantly greater than one-month follow-up perceived racial discrimination scores.

Perceived racial discrimination and ethnicity. Perceived racial discrimination and ethnicity interaction was statistically significant. For African Americans, baseline perceived racial discrimination scores were significantly greater than both one-week follow-up and one-month follow-up perceived racial discrimination scores.

For Caucasians, baseline perceived racial discrimination scores were significantly greater than both one-week follow-up and one-month follow-up perceived racial discrimination scores.

For Latinos, one-week follow-up perceived racial discrimination scores were significantly greater than one-month follow-up perceived racial discrimination scores.

At baseline, one-week, and one-month follow-up perceived racial discrimination scores, African Americans had significantly greater perceived racial discrimination scores than both Caucasians and Latina/os, and Caucasians had significantly greater perceived racial discrimination scores than Latina/os.



Perceived racial discrimination and group. Perceived racial discrimination by group interaction was statistically significant. Post hoc tests for the control group revealed that perceived racial discrimination baseline scores were significantly greater than one-month follow-up perceived racial discrimination scores. For the ABC counseling group, baseline perceived racial discrimination scores were significantly greater than both one-week and one-month follow-up perceived racial discrimination scores.

Perceived racial discrimination overall. Results showed that baseline perceived racial discrimination scores were significantly greater than both one-week and one-month follow-up perceived racial discrimination scores.

No other post-hoc tests were statistically significant.

Table 28

Means and Standard Deviations of Perceived Racial Discrimination

Group	Gender	Ethnicity	M	SD	n
Control	Male	African American	4.22	1.03	9
		Caucasian	4.06	1.04	9
		Latina/o	2.09	0.77	9
		Total	3.46	1.35	27
	Female	African American	4.11	0.99	9
		Caucasian	2.70	0.71	9
		Latina/o	1.86	0.68	9
		Total	2.89	1.22	27
	Total	African American	4.17	0.99	18
		Caucasian	3.38	1.11	18
		Latina/o	1.98	0.71	18
		Total	3.17	1.31	54

ABC	Male	African American	3.98	1.07	9
		Caucasian	3.84	0.99	9
		Latina/o	2.16	0.82	9
		Total	3.33	1.25	27
	Female	African American	3.96	1.06	9
		Caucasian	2.75	0.68	9
		Latina/o	1.90	0.75	9
		Total	2.87	1.19	27
	Total	African American	3.97	1.03	18
		Caucasian	3.29	1.00	18
		Latina/o	2.03	0.77	18
		Total	3.10	1.23	54
Total	Male	African American	4.10	1.03	18
		Caucasian	3.95	0.99	18
		Latina/o	2.12	0.77	18
		Total	3.39	1.29	54
	Female	African American	4.04	1.00	18
		Caucasian	2.72	0.67	18
		Latina/o	1.88	0.69	18
		Total	2.88	1.19	54
	Total	African American	4.07	1.00	36
		Caucasian	3.34	1.04	36
		Latina/o	2.00	0.73	36
		Total	3.14	1.26	108
Control	Male	African American	4.14	1.02	9
		Caucasian	4.04	1.01	9
		Latina/o	2.14	0.77	9
		Total	3.44	1.30	27
	Female	African American	4.06	0.99	9
		Caucasian	2.68	0.68	9
		Latina/o	1.93	0.66	9
		Total	2.89	1.18	27



	Total	African American	4.10	0.98	18
		Caucasian	3.36	1.09	18
		Latina/o	2.03	0.70	18
		Total	3.16	1.26	54
ABC	Male	African American	3.87	1.03	9
		Caucasian	3.68	1.01	9
		Latina/o	2.11	0.77	9
		Total	3.22	1.21	27
	Female	African American	3.74	0.92	9
		Caucasian	2.65	0.65	9
		Latina/o	1.83	0.65	9
		Total	2.74	1.08	27
	Total	African American	3.81	0.95	18
		Caucasian	3.16	0.98	18
		Latina/o	1.97	0.70	18
		Total	2.98	1.16	54
Total	Male	African American	4.01	1.01	18
		Caucasian	3.86	1.00	18
		Latina/o	2.12	0.74	18
		Total	3.33	1.25	54
	Female	African American	3.90	0.94	18
		Caucasian	2.66	0.64	18
		Latina/o	1.88	0.64	18
		Total	2.81	1.12	54
	Total	African American	3.95	0.96	36
		Caucasian	3.26	1.03	36
		Latina/o	2.00	0.69	36
		Total	3.07	1.21	108
Control	Male	African American	4.15	1.08	9
		Caucasian	4.06	1.03	9
		Latina/o	2.12	0.76	9
		Total	3.44	1.33	27
-		·			



	- I	A.C.: A. :	4.06	1.01	
	Female	African American	4.06	1.01	9
		Caucasian	2.64	0.66	9
		Latina/o	1.85	0.64	9
		Total	2.85	1.20	27
	Total	African American	4.10	1.01	18
		Caucasian	3.35	1.11	18
		Latina/o	1.99	0.70	18
		Total	3.15	1.29	54
ABC	Male	African American	3.81	0.97	9
		Caucasian	3.60	0.92	9
		Latina/o	2.04	0.70	9
		Total	3.15	1.16	27
	Female	African American	3.84	0.94	9
		Caucasian	2.67	0.61	9
		Latina/o	1.83	0.61	9
		Total	2.78	1.10	27
	Total	African American	3.82	0.93	18
		Caucasian	3.14	0.90	18
		Latina/o	1.94	0.65	18
		Total	2.97	1.13	54
Total	Male	African American	3.98	1.01	18
		Caucasian	3.83	0.97	18
		Latina/o	2.08	0.71	18
		Total	3.30	1.25	54
	Female	African American	3.95	0.95	18
		Caucasian	2.65	0.62	18
		Latina/o	1.84	0.61	18
		Total	2.82	1.14	54
	Total	African American	3.96	0.97	36
		Caucasian	3.24	1.00	36
		Latina/o	1.96	0.66	36
		Total	3.06	1.21	108



Table 29

Test of Within-Subjects on Perceived Racial Discrimination

Source	df	Mean	F	Sig.
Time 1	1.78	0.22	32.86	.000
Time 1 * Group	1.78	0.12	17.86	.000
Time 1 * Gender	1.78	0.01	1.63	.201
Time 1 * Ethnicity	3.56	0.04	5.31	.001
Time 1 * Group * Gender	1.78	0.05	7.46	.001
Time 1 * Group * Ethnicity	3.56	0.00	0.23	.902
Time 1 * Gender * Ethnicity	3.56	0.01	0.84	.488
Time 1 * Group * Gender * Ethnicity	3.56	0.01	1.19	.315
Error(Time1)	170.75	0.01	(0.01)	

Note: Used Greenhouse-Geisser

Racist attitudes. To examine if significant differences exist on racist attitudes within assessment periods (baseline vs. one-week follow-up vs. one-month follow-up) and between gender (male vs. female), ethnicity (African American vs. Caucasian vs. Latina/o) and group membership (control vs. ABC), a mixed model ANOVA was conducted. Several interactions were statistically significant.

Racist attitudes, group and ethnicity. For racist attitudes, group and ethnicity interaction was statistically significant. For the ABC counseling group, Latina/os' baseline racist attitude scores were significantly greater than both the one-month follow-up and one-month follow-up racist attitude scores. One-week follow-up racist attitude scores were significantly greater than one-month follow-up racist attitude scores.

For the control group at baseline, one-month follow-up and one-month follow-up,

Latina/os had significantly greater racist attitude scores than both African American and

Caucasians.

Racist attitudes and ethnicity. Racist attitudes and ethnicity interaction was statistically significant. At baseline, Latina/os had significantly greater racist attitude scores than both African American and Caucasians. For Latina/os, baseline racist attitude scores were significantly greater than both one-week and one-month follow-up racist attitude scores, and one-week racist attitude scores were significantly greater than one-month follow-up racist attitude scores.

Racist attitudes and group. Racist attitudes and group interaction was statistically significant. Post-hoc tests revealed that for the ABC counseling group baseline had significantly greater racist attitude scores than both those in the one-week follow-up and one-month follow-up, and the ABC counseling group had significantly greater one-week racist attitude scores than one-month follow-up scores.

Racist attitudes. Racist attitudes main effect was statistically significant.

Overall, participants had significantly greater baseline racist attitude scores compared to both one-week scores and one-month follow-up scores, and had significantly greater one-week follow-up racist attitude scores compared to one-month follow-up scores.

No other post-hoc tests were statistically significant.

Table 30

Means and Standard Deviations of Racist Attitudes

Group	Gender	Ethnicity	M	SD	n
Control	Male	African American	1.92	0.26	9



Caucasian						
Female African American 2.16 0.52 9 Caucasian 2.13 0.50 9 Latina/o 3.08 1.03 9 Total 2.46 0.83 27 Total African American 2.04 0.42 18 Caucasian 1.96 0.45 18 Latina/o 3.38 0.89 18 Total 2.46 0.90 54 ABC Male African American 1.84 0.13 9 Caucasian 1.78 0.28 9 Latina/o 3.46 0.61 9 Total 2.36 0.88 27 Female African American 2.05 0.49 9 Caucasian 2.05 0.52 9 Latina/o 3.08 1.03 9 Total 2.39 0.85 27 Total 2.39 0.85 27 Total 4.6 0.30 1.8 Caucasian 1.94 0.36 18 Caucasian 1.94 0.36 18 Caucasian 1.91 0.43 18 Latina/o 3.27 0.84 18 Caucasian 1.91 0.43 18 Latina/o 3.27 0.84 18 Total 2.38 0.86 54 Total Male African American 1.88 0.20 18 Caucasian 1.79 0.31 18 Latina/o 3.57 0.62 18 Total 2.41 0.92 54 Female African American 2.10 0.49 18 Caucasian 2.09 0.50 18 Caucasian 2.09 0.50 18 Caucasian 2.09 0.50 18 Caucasian 2.09 0.50 18 Latina/o 3.08 1.00 18 Caucasian 2.09 0.50 18 Caucasian 2.09 0.50 18 Latina/o 3.08 1.00 18			Caucasian	1.79	0.35	9
Female African American 2.16 0.52 9 Caucasian 2.13 0.50 9 Latina/o 3.08 1.03 9 Total 2.46 0.83 27 Total African American 2.04 0.42 18 Caucasian 1.96 0.45 18 Latina/o 3.38 0.89 18 Total 2.46 0.90 54 ABC Male African American 1.84 0.13 9 Caucasian 1.78 0.28 9 Latina/o 3.46 0.61 9 Total 2.36 0.88 27 Female African American 2.05 0.49 9 Caucasian 2.05 0.52 9 Latina/o 3.08 1.03 9 Total 2.39 0.85 27 Total 2.39 0.85 27 Total 2.39 0.85 27 Total African American 1.94 0.36 18 Caucasian 1.91 0.43 18 Latina/o 3.27 0.84 18 Caucasian 1.91 0.43 18 Latina/o 3.27 0.84 18 Total 2.38 0.86 54 Total Male African American 1.88 0.20 18 Caucasian 1.79 0.31 18 Latina/o 3.57 0.62 18 Total 2.41 0.92 54 Female African American 2.00 0.49 18 Caucasian 2.09 0.50 18 Latina/o 3.08 1.00 18 Latina/o 3.08 1.00 18 Caucasian 2.09 0.50 18 Latina/o 3.08 1.00 18 Caucasian 2.09 0.50 18 Latina/o 3.08 1.00 18			Latina/o	3.68	0.65	9
Caucasian 2.13 0.50 9 Latina/o 3.08 1.03 9 Total 2.46 0.83 27 Total African American 2.04 0.42 18 Caucasian 1.96 0.45 18 Latina/o 3.38 0.89 18 Total 2.46 0.90 54 ABC Male African American 1.84 0.13 9 Caucasian 1.78 0.28 9 Latina/o 3.46 0.61 9 Total 2.36 0.88 27 Female African American 2.05 0.49 9 Caucasian 2.05 0.52 9 Latina/o 3.08 1.03 9 Total 2.39 0.85 27 Total 2.39 0.85 27 Total African American 1.94 0.36 18 Caucasian 1.91 0.43 18 Latina/o 3.27 0.84 18 Total 2.38 0.86 54 Total Male African American 1.88 0.20 18 Caucasian 1.79 0.31 18 Latina/o 3.57 0.62 18 Total 2.41 0.92 54 Female African American 2.10 0.49 18 Caucasian 2.09 0.50 18 Latina/o 3.08 1.00 18 Total 2.42 0.83 54			Total	2.47	0.98	27
Total		Female	African American	2.16	0.52	9
Total			Caucasian	2.13	0.50	9
Total African American 2.04 0.42 18 Caucasian 1.96 0.45 18 Latina/o 3.38 0.89 18 Total 2.46 0.90 54 ABC Male African American 1.84 0.13 9 Caucasian 1.78 0.28 9 Latina/o 3.46 0.61 9 Total 2.36 0.88 27 Female African American 2.05 0.49 9 Caucasian 2.05 0.52 9 Latina/o 3.08 1.03 9 Total 2.39 0.85 27 Total African American 1.94 0.36 18 Caucasian 1.91 0.43 18 Latina/o 3.27 0.84 18 Total 2.38 0.86 54 Total Male African American 1.88 0.20 18 Caucasian 1.79 0.31 18 Latina/o 3.57 0.62 18 Total 2.41 0.92 54 Female African American 2.09 0.50 18 Caucasian 2.09 0.50 18 Caucasian 2.09 0.50 18 Caucasian 2.09 0.50 18 Latina/o 3.08 1.00 18 Caucasian 2.09 0.50 18 Latina/o 3.08 1.00 18 Caucasian 2.09 0.50 18 Latina/o 3.08 1.00 18			Latina/o	3.08	1.03	9
Caucasian 1.96 0.45 18 Latina/o 3.38 0.89 18 Total 2.46 0.90 54 ABC Male African American 1.84 0.13 9 Caucasian 1.78 0.28 9 Latina/o 3.46 0.61 9 Total 2.36 0.88 27 Female African American 2.05 0.49 9 Caucasian 2.05 0.52 9 Latina/o 3.08 1.03 9 Total 2.39 0.85 27 Total African American 1.94 0.36 18 Caucasian 1.91 0.43 18 Latina/o 3.27 0.84 18 Total 2.38 0.86 54 Total Male African American 1.88 0.20 18 Caucasian 1.79 0.31 18 Latina/o 3.57 0.62 18 Total 2.41 0.92 54 Female African American 2.10 0.49 18 Caucasian 2.09 0.50 18 Caucasian 2.09 0.50 18 Latina/o 3.08 1.00 18 Caucasian 2.09 0.50 18 Latina/o 3.08 1.00 18 Caucasian 2.09 0.50 18 Latina/o 3.08 1.00 18			Total	2.46	0.83	27
Latina/o 3.38 0.89 18 Total 2.46 0.90 54 ABC Male African American 1.84 0.13 9 Caucasian 1.78 0.28 9 Latina/o 3.46 0.61 9 Total 2.36 0.88 27 Female African American 2.05 0.49 9 Caucasian 2.05 0.52 9 Latina/o 3.08 1.03 9 Total 2.39 0.85 27 Total African American 1.94 0.36 18 Caucasian 1.91 0.43 18 Latina/o 3.27 0.84 18 Total 2.38 0.86 54 Total Male African American 1.88 0.20 18 Caucasian 1.79 0.31 18 Latina/o 3.57 0.62 18 Total 2.41 0.92 54 Female African American 2.10 0.49 18 Caucasian 2.09 0.50 18 Latina/o 3.08 1.00 18 Caucasian 2.42 0.83 54		Total	African American	2.04	0.42	18
ABC Male African American 1.84 0.13 9 Caucasian 1.78 0.28 9 Latina/o 3.46 0.61 9 Total 2.36 0.88 27 Female African American 2.05 0.49 9 Caucasian 2.05 0.52 9 Latina/o 3.08 1.03 9 Total 2.39 0.85 27 Total African American 1.94 0.36 18 Caucasian 1.91 0.43 18 Latina/o 3.27 0.84 18 Total 2.38 0.86 54 Total Male African American 1.88 0.20 18 Caucasian 1.79 0.31 18 Latina/o 3.57 0.62 18 Total 2.41 0.92 54 Female African American 2.10 0.49 18 Caucasian 2.09 0.50 18 Caucasian 2.09 0.50 18 Latina/o 3.08 1.00 18 Caucasian 2.09 0.50 18 Latina/o 3.08 1.00 18 Total 2.42 0.83 54			Caucasian	1.96	0.45	18
ABC Male African American 1.84 0.13 9 Caucasian 1.78 0.28 9 Latina/o 3.46 0.61 9 Total 2.36 0.88 27 Female African American 2.05 0.49 9 Caucasian 2.05 0.52 9 Latina/o 3.08 1.03 9 Total 2.39 0.85 27 Total African American 1.94 0.36 18 Caucasian 1.91 0.43 18 Latina/o 3.27 0.84 18 Total 2.38 0.86 54 Total Male African American 1.88 0.20 18 Caucasian 1.79 0.31 18 Latina/o 3.57 0.62 18 Total 2.41 0.92 54 Female African American 2.10 0.49 18 Caucasian 2.09 0.50 18 Latina/o 3.08 1.00 18 Caucasian 2.09 0.50 18 Latina/o 3.08 1.00 18 Total 3.08 1.00 18 Total 2.42 0.83 54			Latina/o	3.38	0.89	18
Caucasian 1.78 0.28 9 Latina/o 3.46 0.61 9 Total 2.36 0.88 27 Female African American 2.05 0.49 9 Caucasian 2.05 0.52 9 Latina/o 3.08 1.03 9 Total 2.39 0.85 27 Total African American 1.94 0.36 18 Caucasian 1.91 0.43 18 Latina/o 3.27 0.84 18 Total 2.38 0.86 54 Total African American 1.88 0.20 18 Caucasian 1.79 0.31 18 Latina/o 3.57 0.62 18 Total 2.41 0.92 54 Female African American 2.10 0.49 18 Caucasian 2.09 0.50 18 Latina/o 3.08 1.00 18 Latina/o 3.08 1.00 18 Total 2.42 0.83 54			Total	2.46	0.90	54
Latina/o 3.46 0.61 9 Total 2.36 0.88 27 Female African American 2.05 0.49 9 Caucasian 2.05 0.52 9 Latina/o 3.08 1.03 9 Total 2.39 0.85 27 Total African American 1.94 0.36 18 Caucasian 1.91 0.43 18 Latina/o 3.27 0.84 18 Total 2.38 0.86 54 Total Male African American 1.88 0.20 18 Caucasian 1.79 0.31 18 Latina/o 3.57 0.62 18 Total 2.41 0.92 54 Female African American 2.10 0.49 18 Caucasian 2.09 0.50 18 Latina/o 3.08 1.00 18 Latina/o 3.08 1.00 18 Total 2.42 0.83 54 Total 2.42 0.83 54 Total 2.42 0.83 54	ABC	Male	African American	1.84	0.13	9
Female African American 2.05 0.49 9 Caucasian 2.05 0.52 9 Latina/o 3.08 1.03 9 Total 2.39 0.85 27 Total African American 1.94 0.36 18 Caucasian 1.91 0.43 18 Latina/o 3.27 0.84 18 Total 2.38 0.86 54 Total Male African American 1.88 0.20 18 Caucasian 1.79 0.31 18 Latina/o 3.57 0.62 18 Total 2.41 0.92 54 Female African American 2.10 0.49 18 Caucasian 2.09 0.50 18 Latina/o 3.08 1.00 18 Latina/o 3.08 1.00 18 Latina/o 3.08 1.00 18 Latina/o 3.08 1.00 18			Caucasian	1.78	0.28	9
Female African American 2.05 0.49 9 Caucasian 2.05 0.52 9 Latina/o 3.08 1.03 9 Total 2.39 0.85 27 Total African American 1.94 0.36 18 Caucasian 1.91 0.43 18 Latina/o 3.27 0.84 18 Total 2.38 0.86 54 Total 2.38 0.20 18 Caucasian 1.79 0.31 18 Latina/o 3.57 0.62 18 Total 2.41 0.92 54 Female African American 2.10 0.49 18 Caucasian 2.09 0.50 18 Latina/o 3.08 1.00 18 Latina/o 3.08 1.00 18 Total 2.42 0.83 54			Latina/o	3.46	0.61	9
Caucasian 2.05 0.52 9 Latina/o 3.08 1.03 9 Total 2.39 0.85 27 Total African American 1.94 0.36 18 Caucasian 1.91 0.43 18 Latina/o 3.27 0.84 18 Total 2.38 0.86 54 Total 2.38 0.86 54 Total 1.88 0.20 18 Caucasian 1.79 0.31 18 Latina/o 3.57 0.62 18 Total 2.41 0.92 54 Female African American 2.10 0.49 18 Caucasian 2.09 0.50 18 Latina/o 3.08 1.00 18 Latina/o 3.08 1.00 18 Total 2.42 0.83 54			Total	2.36	0.88	27
Latina/o 3.08 1.03 9 Total 2.39 0.85 27 Total African American 1.94 0.36 18 Caucasian 1.91 0.43 18 Latina/o 3.27 0.84 18 Total 2.38 0.86 54 Total 2.38 0.20 18 Caucasian 1.79 0.31 18 Latina/o 3.57 0.62 18 Total 2.41 0.92 54 Female African American 2.10 0.49 18 Caucasian 2.09 0.50 18 Latina/o 3.08 1.00 18 Total 2.42 0.83 54		Female	African American	2.05	0.49	9
Total 2.39 0.85 27 Total African American 1.94 0.36 18 Caucasian 1.91 0.43 18 Latina/o 3.27 0.84 18 Total 2.38 0.86 54 Total Male African American 1.88 0.20 18 Caucasian 1.79 0.31 18 Latina/o 3.57 0.62 18 Total 2.41 0.92 54 Female African American 2.10 0.49 18 Caucasian 2.09 0.50 18 Latina/o 3.08 1.00 18 Total 2.42 0.83 54			Caucasian	2.05	0.52	9
Total African American 1.94 0.36 18 Caucasian 1.91 0.43 18 Latina/o 3.27 0.84 18 Total 2.38 0.86 54 Total Male African American 1.88 0.20 18 Caucasian 1.79 0.31 18 Latina/o 3.57 0.62 18 Total 2.41 0.92 54 Female African American 2.10 0.49 18 Caucasian 2.09 0.50 18 Latina/o 3.08 1.00 18 Total 2.42 0.83 54			Latina/o	3.08	1.03	9
Caucasian 1.91 0.43 18 Latina/o 3.27 0.84 18 Total 2.38 0.86 54 Total Male African American 1.88 0.20 18 Caucasian 1.79 0.31 18 Latina/o 3.57 0.62 18 Total 2.41 0.92 54 Female African American 2.10 0.49 18 Caucasian 2.09 0.50 18 Latina/o 3.08 1.00 18 Total 2.42 0.83 54			Total	2.39	0.85	27
Latina/o 3.27 0.84 18 Total 2.38 0.86 54 Total African American 1.88 0.20 18 Caucasian 1.79 0.31 18 Latina/o 3.57 0.62 18 Total 2.41 0.92 54 Female African American 2.10 0.49 18 Caucasian 2.09 0.50 18 Latina/o 3.08 1.00 18 Total 2.42 0.83 54		Total	African American	1.94	0.36	18
Total			Caucasian	1.91	0.43	18
Total Male African American 1.88 0.20 18 Caucasian 1.79 0.31 18 Latina/o 3.57 0.62 18 Total 2.41 0.92 54 Female African American 2.10 0.49 18 Caucasian 2.09 0.50 18 Latina/o 3.08 1.00 18 Total 2.42 0.83 54			Latina/o	3.27	0.84	18
Caucasian 1.79 0.31 18 Latina/o 3.57 0.62 18 Total 2.41 0.92 54 Female African American 2.10 0.49 18 Caucasian 2.09 0.50 18 Latina/o 3.08 1.00 18 Total 2.42 0.83 54			Total	2.38	0.86	54
Latina/o 3.57 0.62 18 Total 2.41 0.92 54 Female African American 2.10 0.49 18 Caucasian 2.09 0.50 18 Latina/o 3.08 1.00 18 Total 2.42 0.83 54	Total	Male	African American	1.88	0.20	18
Total 2.41 0.92 54 Female African American 2.10 0.49 18 Caucasian 2.09 0.50 18 Latina/o 3.08 1.00 18 Total 2.42 0.83 54			Caucasian	1.79	0.31	18
Female African American 2.10 0.49 18 Caucasian 2.09 0.50 18 Latina/o 3.08 1.00 18 Total 2.42 0.83 54			Latina/o	3.57	0.62	18
Caucasian 2.09 0.50 18 Latina/o 3.08 1.00 18 Total 2.42 0.83 54			Total	2.41	0.92	54
Latina/o 3.08 1.00 18 Total 2.42 0.83 54		Female	African American	2.10	0.49	18
Total 2.42 0.83 54			Caucasian	2.09	0.50	18
			Latina/o	3.08	1.00	18
Total African American 1.99 0.39 36			Total	2.42	0.83	54
		Total	African American	1.99	0.39	36



		Caucasian	1.94	0.44	36
		Latina/o	3.33	0.86	36
		Total	2.42	0.88	108
Control	Male	African American	1.97	0.23	9
		Caucasian	1.81	0.32	9
		Latina/o	3.71	0.63	9
		Total	2.50	0.97	27
	Female	African American	2.13	0.56	9
		Caucasian	2.11	0.45	9
		Latina/o	3.02	1.07	9
		Total	2.42	0.83	27
	Total	African American	2.05	0.42	18
		Caucasian	1.96	0.41	18
		Latina/o	3.37	0.92	18
		Total	2.46	0.90	54
ABC	Male	African American	1.87	0.17	9
		Caucasian	1.76	0.19	9
		Latina/o	3.27	0.45	9
		Total	2.30	0.76	27
	Female	African American	2.06	0.42	9
		Caucasian	1.89	0.34	9
		Latina/o	2.92	0.92	9
		Total	2.29	0.75	27
	Total	African American	1.97	0.33	18
		Caucasian	1.83	0.28	18
		Latina/o	3.10	0.73	18
		Total	2.30	0.75	54
Total	Male	African American	1.92	0.20	18
		Caucasian	1.79	0.26	18
		Latina/o	3.49	0.58	18
		Total	2.40	0.87	54
	Female	African American	2.10	0.48	18
		-			



		Caucasian	2.00	0.40	18
		Latina/o	2.97	0.97	18
		Total	2.35	0.79	54
	Total	African American	2.01	0.37	36
		Caucasian	1.89	0.35	36
		Latina/o	3.23	0.83	36
		Total	2.38	0.83	108
Control	Male	African American	2.00	0.28	9
		Caucasian	1.90	0.34	9
		Latina/o	3.70	0.65	9
		Total	2.53	0.94	27
	Female	African American	2.08	0.51	9
		Caucasian	2.14	0.42	9
		Latina/o	3.00	1.04	9
		Total	2.41	0.81	27
	Total	African American	2.04	0.40	18
	10111	Caucasian	2.02	0.39	18
		Latina/o	3.35	0.92	18
		Total	2.47	0.87	54
ABC	Male	African American	1.84	0.15	9
TIDC	where	Caucasian	1.78	0.16	9
		Latina/o	2.97	0.36	9
		Total	2.20	0.60	27
	Female	African American	2.05	0.38	9
	Terrare	Caucasian	1.84	0.31	9
		Latina/o	2.81	0.85	9
		Total	2.23	0.69	27
	Total	African American	1.94	0.30	18
	101111	Caucasian	1.81	0.24	18
		Latina/o	2.89	0.64	18
		Total	2.21	0.64	54
Total	Male	African American	1.92	0.23	18
10141	1,1416	Caucasian	1.84	0.26	18
		Latina/o	3.33	0.63	18
		Total	2.37	0.80	54
	Female	African American	2.06	0.44	18
	Temate	Caucasian	1.99	0.39	18
		Latina/o	2.90	0.93	18
		Total	2.32	0.75	54
	Total	African American	1.99	0.75	36
	10.01	Caucasian	1.92	0.34	36
		Latina/o	3.12	0.81	36
		Total	2.34	0.31	108
-		10111	4.3⊤	0.77	100



Table 31

Test of Within Subject of Racist Attitudes

Source				
	df	Square	F	Sig.
Time 1	1.44	0.21	8.72	.001
Time 1 * Group	1.44	0.28	11.35	.000
Time 1 * Gender	1.44	0.04	1.57	.215
Time 1 * Ethnicity	2.89	0.17	7.09	.000
Time 1 * Group * Gender	1.44	0.04	1.57	.216
Time 1 * Group * Ethnicity	2.89	0.10	3.91	.011
Time 1 * Gender * Ethnicity	2.89	0.04	1.68	.176
Time 1 * Group * Gender * Ethnicity	2.89	0.04	1.51	.215
Error(Time 1)	138.2	0.03	(0.025)	

Note: Used Greenhouse-Geisser

Behavioral Outcome Variables

In order to investigate the impact of ABC counseling on the behavioral outcome variables (total discipline referrals, racism-related discipline referrals, GPA and attendance), an ancillary analysis of four repeated measures ANOVAs with between-subjects factors was conducted. These behavioral outcome variables were included to provide measurements of school-based objective data relating that could potentially be impacted by ABC counseling. The results of the four ANOVAs are presented in Tables 32-39.

Total discipline referrals. To assess whether or not there were differences by group (control vs. ABC) on total discipline referrals by time (baseline vs. one-month follow-up) a repeated measures ANOVA with between-subjects factors was conducted.



In preliminary analysis, Box's Test of Equality of Covariance Matrices was examined, and the assumption of equality of covariance was met. The Levene's test for the equality of error variances was examined and the assumption of equal variances was met. The Wilks' Λ statistic was used. Results indicate there was no significant main effect for total discipline referrals, F(1, 50) = .063, p = .802, $\eta^2 = .001$, suggesting there was not a significant difference on total discipline referrals by group and time. For the between-subjects effects, results were not significant, F(1, 50) = .031, p = .860, $\eta^2 = .001$, suggesting there was not a significant difference on total discipline referrals by group. For the within-subjects effects, results were significant, F(1, 50) = 9.19, p = .004, $\eta^2 = .155$, suggesting there was a significant difference on total discipline referrals by time. The interaction term between total discipline referrals and group was not significant, F(1, 50) = .06, p = .802, $\eta^2 = .001$. While there was a difference on total discipline referrals by time, there was no difference on discipline referrals by group and time. Results of the ANOVA are presented in Table 32 and means and standard deviations are presented in Table 33.

Table 32

Repeated Measures ANOVA with Between-Subjects' Factors on Total Discipline

Referrals by Group (Control vs. ABC)

	Source		df	SS	MS	F	p	η^2
		Betwee	en-subj	ects				
Group			1	.03	0.03	0.03	.860	.001
Error			50	54.12	1.08			
Within-subjects								

Total Discipline	1	3.10	3.10	9.19	.004	.155	
Total Discipline x Time	1	.021	.02	0.06	.802	.001	
Error	50	16.86	.34				

Table 33

Means and Standard Deviations for Total Discipline Referrals by Group (Control vs. ABC)

	Control		Al	BC .	Total		
Outcome variable	M	SD	M	SD	М	SD	
Baseline Total Discipline	1.84	0.97	1.90	0.83	1.87	0.91	
Follow-up Total	1.52	0.63	1.52	0.93	1.52	0.75	
Discipline							

Racism-related discipline referrals. To assess whether or not there were differences by group (control vs. ABC) on racism-related discipline referrals by time (baseline vs. one-month follow-up) a repeated measures ANOVA with between-subjects factors was conducted. In preliminary analysis, Box's Test of Equality of Covariance Matrices was examined, and the assumption of equality of covariance was met. The Levene's test for the equality of error variances was examined and the assumption of equal variances was met. The Wilks' Λ statistic was used. Results indicate no significant main effect for racism-related discipline referrals, F(1, 27) = 3.73, p = .064, η^2



= .121, suggesting there was not a significant difference on racism-related discipline referrals by group and time. For the between-subjects effects, results were not significant, F(1, 27) = .258, p = .616, $\eta^2 = .009$, suggesting there was not a significant difference on racism-related discipline referrals by group. For the within-subjects effects, results were significant, F(1, 27) = 13.121, p = .001, $\eta^2 = .327$: there was a significant difference on racism-related discipline referrals by time, suggesting that the number of discipline referrals for both the control and ABC groups significantly decreased from baseline to posttest. The mean number of racism-related discipline referrals was lower at follow-up (M = 1.24, SD = 0.62) in comparison to baseline (M = 1.62, SD = 0.44). The interaction term between racism-related discipline referrals and group was not significant, F(1, 27) = 3.73, P = .064, $\eta^2 = .121$. There was a difference on racism related referrals by time, but not by group or by group and time. Results of the ANOVA are presented in Table 34 and means and standard deviations are presented in Table 35.

Table 34

Repeated Measures ANOVA with Between-Subjects Factors on Racism-Related

Discipline Referrals by Group (Control vs. ABC)

Df	SS	MS	F	P	η^2
ı-sub	jects				
1	0.10	0.10	0.26	.616	.01
27	10.62	0.39			
-subje	ects				
1	2.31	2.31	13.12	.001	.33
1	0.66	0.66	3.73	.064	.12
	1 27 -subject	n-subjects 1 0.10 27 10.62 -subjects 1 2.31	1 0.10 0.10 27 10.62 0.39 -subjects 1 2.31 2.31	n-subjects 1 0.10 0.10 0.26 27 10.62 0.39 -subjects 1 2.31 2.31 13.12	n-subjects 1 0.10 0.10 0.26 .616 27 10.62 0.39 -subjects 1 2.31 2.31 13.12 .001

Error	27	4.76	.18

Table 35

Means and Standard Deviations for Racism-Related Discipline by Group (Control vs. ABC)

	Cor	Control		ABC		Total	
Outcome variable	М	SD	М	SD	М	SD	
Baseline Racism-related discipline referrals	1.56	0.63	1.69	0.63	1.62	0.62	
Follow-up Racism- related discipline referrals	1.38	0.50	1.08	0.28	1.24	0.44	

Grade point average. To assess whether or not there were differences by group (control vs. ABC) on GPA by time (baseline vs. one-month follow-up) a repeated measures ANOVA with between-subjects factors was conducted. In preliminary analysis, Box's Test of Equality of Covariance Matrices was examined, and the assumption of equality of covariance was met. The Levene's test for the equality of error variances was examined and the assumption of equal variances was met. The Wilks' Λ statistic was used. Results indicate no significant main effect for GPA, F (1, 106) = .763, p = .384, η^2 = .007, suggesting there was not a significant difference on GPA by group and time. For the between-subjects effects, results were not significant, F (1, 106) = .002, p = .966, η^2 = .000, suggesting there was not a significant difference GPA by group. For the within-subjects effects, results were not significant, F (1, 106) = 3.42, p = .067, η^2 =

.031, suggesting there was no significant difference on GPA by time. The interaction term between GPA and group was not significant, F(1, 106) = 0.76, p = .384, $\eta^2 = .007$. There were no differences on GPA by time or by group and time. Results of the ANOVA are presented in Table 36 and means and standard deviations are presented in Table 37.

Table 36

Repeated Measures ANOVA with Between-Subjects Factors on GPA by Group (Control vs. ABC)

Source	df	SS	MS	F	p	η^2
Betwee	en-subje	cts				
Group	1	0.03	0.03	0.02	.966	.00
Error	106	54.12	1.08			
Withi	n-subjec	ts				
GPA	1	0.14	0.14	3.42	.067	.031
GPA x Time	1	0.03	0.03	0.76	.384	.007
Error	106	4.35	0.04			

Table 37

Means and Standard Deviations for GPA by Group (Control vs. ABC)

	Control		ABC		Total	
Outcome variable	M	SD	M	SD	M	SD
Baseline GPA	2.23	0.94	2.22	0.92	2.22	0.93

Attendance. To assess whether or not there were differences by group (control vs. ABC) on attendance by time (baseline vs. one-month follow-up) a repeated measures ANOVA with between-subjects factors was conducted. In preliminary analysis, Box's Test of Equality of Covariance Matrices was examined, and the assumption of equality of covariance was violated and equality of covariance could not be assumed. The Levene's test for the equality of error variances was examined and the assumption of equal variances was met. The Pillai's Trace statistic was used.

Results indicate no significant main effect for attendance, F(1, 58) = .000, p = 1.00, $\eta^2 = .000$, suggesting there was not a significant difference on attendance by group and time. For the between-subjects effects, results were not significant, F(1, 58) = .193, p = .662, $\eta^2 = .003$, suggesting there was not a significant difference attendance by group. For the within-subjects effects, results were not significant, F(1, 58) = 1.94, p = .169, $\eta^2 = .032$, suggesting there was no significant difference on attendance by time. The interaction term between attendance and group was not significant, F(1, 58) = .000, p = 1.00, $\eta^2 = .000$. There was no difference on attendance by time or by group and time. Results of the ANOVA are presented in Table 38 and means and standard deviations are presented in Table 39.



Table 38

Repeated Measures ANOVA with Between-Subjects Factors on Attendance by Group

(Control vs. ABC)

Source	df	SS	MS	F	p	η^2		
Between-subjects								
Group	1	1.20	1.20	0.19	.662	.00		
Error	58	360.60	6.22					
Within-subjects								
Attendance	1	1.20	1.20	1.94	.169	.03		
Attendance x Time	1	0.00	0.00	0.00	1.000	.00		
Error	58	35.80	0.62					
Error	58	35.80	0.62					

Table 39

Means and Standard Deviations for Attendance by Group (Control vs. ABC)

	Con	Control		ABC		Total	
Outcome variable	M	SD	M	SD	M	SD	
Baseline attendance	2.90	1.77	3.10	1.90	3.00	1.82	
Follow-up attendance	2.70	1.99	2.90	1.73	2.80	1.85	
GPA							

Summary and Conclusion

The results of this study indicate that regarding hypothesis 1 ABC counseling significantly increased participant self-esteem from baseline to one-week posttest (see Table 9). For hypothesis 2 ABC counseling was also effective in significantly increasing participant empathy from baseline to one-week posttest, and from one-week posttest to one-month follow-up (See Table 11 and 12). Results partially supported hypothesis 3 validating that ABC counseling significantly decreased perceived racial discrimination from one-week posttest to one-month follow-up (see Table 14). Hypothesis 4 was fully supported: racist attitudes significantly decreased from baseline to one-week posttest and one-week posttest to one-month follow-up (see Table 15 and 16). In addition, the prediction articulated in hypothesis 6 was validated: an increase in self-esteem and empathy is correlated to a decrease in racism (see Tables 19-23).

The analysis of hypothesis 7 confirmed males experienced a significantly greater increase in self-esteem and empathy as compared to females (see Table 25 and 17), Latina/os had the most significant decrease in racist attitudes and highest overall scores on the same measure (see Table 31), and African Americans possessed significantly higher perceived racial discrimination scores than Caucasians or Latina/os (see Table 29). The ancillary analysis established a significant reduction occurred for total discipline referrals and racism-related discipline referrals for both the control and ABC counseling groups from baseline to one-month follow-up (see Table 32 and 34): This change occurred independently of group membership. Survey results provided greater insight and understanding of the participants as well as reporting their perceptions on ABC



counseling, the school climate, and their past exposure and sensitivity to other races (see Tables 6-8).

Overall, study results showed all hypotheses, with the exception of hypothesis 5, were supported. Although the results for behavioral outcome variables showed little significance, the analysis that did find significance, total and racism-related discipline referrals, functions to corroborate the prediction of hypothesis 5: there would be a significant reduction on racism-related discipline referrals.



Chapter Five: Summary, Discussion, and Conclusions

This study investigated the potential effect of ABC counseling on high school adolescent self-esteem, empathy, perceived racism, and racist attitudes. Additionally, it explored the behavioral outcome variables—total discipline referrals, racism-related discipline referrals, attendance, and GPA, as well as the variables gender and ethnicity—as related to the effects of ABC counseling. In this chapter, I present a summary of the study results, discuss its findings in relation to the hypotheses and related literature, and explore its limitations. Finally, suggestions for future research are presented followed by the conclusions of the study.

Summary of the Results

Overall, analysis of this study's results indicates that ABC counseling was effective in significantly increasing participant self-esteem from baseline to one-week follow-up (Hypothesis 1). ABC counseling also bolstered participant empathy for both baseline to one-week follow-up, and one-week follow-up to one-month follow-up (Hypothesis 2). Results further indicate that ABC counseling significantly decreased perceived racial discrimination from one-week follow-up to one-month follow-up (Hypothesis 3) and significantly decreased racist attitudes from baseline to one-week follow-up, and one-week follow-up to one-month follow-up (Hypothesis 4). In addition, the prediction articulated in hypothesis 6 was validated: an increase in self-esteem and empathy is correlated to a decrease in racism. Also, significant reduction in the number



of total discipline referrals and racism-related discipline referrals was observed within groups. An ancillary analysis showed significance for the variables gender and ethnicity; males experienced a significantly greater increase in self-esteem and empathy as compared to females; Latina/os had the most significant decrease in racist attitudes and highest overall scores on the same measure; African Americans possessed significantly higher perceived racial discrimination scores than Caucasians or Latina/os.

Results from of the overall pretest survey data demonstrated that the control and ABC groups were similar; their baseline survey scores varied slightly, indicating that students viewed themselves as not sensitive to other races, as having limited exposure to people of races different from their own, and as having marginal travel experience that could have exposed them to other cultures or races.

Discussion

The discussion will be presented sequentially following the same format as the results: (a) survey questionnaires; (b) hypotheses; and (c) behavioral outcome variables.

Pretest: Prior exposure and sensitivity to other races. Data from this survey suggests that prior to the ABC counseling intervention, most students viewed themselves as not sensitive to other races, as having limited communication with and exposure to people of other races and as having marginal travel experience where they were exposed to other cultures or races different from their own.

A possible cause of this phenomenon is the overall limited number of ethnicities, other than Caucasians, that are represented in both the school and the community featured in the study. I hypothesized that because the community is affluent, there would have



been a larger number of students reporting that they had traveled and been exposed to unfamiliar cultures and races.

A limitation regarding this survey and other subsequent surveys is that they were all created by the researcher and they have not been fully validated. Despite the stated limitation, the survey had face value and its descriptive presentation suggests that students have not travelled much to destinations where they could interact with different cultures and races, see themselves as not sensitive to diverse persons, and perceive racism as being present at their school. However, because of the limitation stated above, caution should be exercised when evaluating these results and only tentative implications can be presented.

A second limitation hinges on the survey's design. Number three response on the five-point Likert scale (neither agree nor disagree) was unnecessary for some of the survey questions. For example, question number one reads, "I have traveled around the United States and / or foreign countries and have experienced cultures and races different than my own." A response option of neither agree nor disagree appears to be inappropriate for the survey, and added to the difficulty in interpreting and presenting the results. Future research should consider using a different Likert scale where no potentially neutral response is offered (1= strongly disagree; 2 = disagree; 3 = agree; 4 = strongly agree).

As previously discussed, the use of a stratified sampling scheme allowed for both the control and experimental groups to be mixed and balanced by gender and ethnicity, containing equal representations of African American, Latina/o, and Caucasian students.

A body of literature exists discussing how mere exposure to the out-group and cross-



racial contact can reduce bias and prejudice (Ebert, 2004; Pettigrew, 2008; Pettigrew & Tropp, 2006; Zajonc, 1968, 2001). When considering both existing literature and the results of the survey suggesting the participants' limited exposure and sensitivity to cultures and races other than their own, it could be argued that the participants' mere exposure to other races and cultures contributed to the significant reduction in both perceived racial discrimination and racist attitudes. In contrary, because all students in the study attend that same high school, it could be postulated that this constitutes previous exposure. Students see each other in the school and interact with one another in different classes, assignments, and group projects. Thus, mere exposure is part of the students daily experiences, despite of which racial and ethnic tension still exists. It is possible that exposure per se acted as a facilitator or that different levels of exposure influenced the degree of change observed in each participant. Because this was not measured empirically in this study, the potential influence of mere exposure cannot be ruled out completely.

Future research is needed to establish if exposure to the out-group, in relation to the specific parameters of this study, is responsible for variance in the study outcomes.

Pretest: perception of racism existing in the school. Data from this survey suggests that a majority of students agreed on that students at their high school often act in a racist manner toward other students. The students' perceived racism corroborates what have been observed by the researcher and other school personnel and supports the choice to study an intervention to help students improve in this area.

The survey data also reveal that school teachers do not share that perception with the students. This is an important outcome, despite the small number of teachers



involved, because it demonstrates a measurable disparity in the perception of racism at the school between staff and students. Lack of recognition of students' experience may prevent teachers from responding to perceived racism and prevent its negative consequences for the students and their high school.

Additional results indicate that the majority of teachers and students do not perceive teachers often acting in a racist manner toward other students at their high school.

The limitations of this survey are similar to those listed in the previous survey.

The results from this survey support the literature on school-based racism, which describes the school setting as possessing elements that support racism, including social exclusion, presence and awareness of racial group stereotypes, and heightened racial salience (Rosenbloom & Way, 2004; Seidman et al., 1994). Despite lack of reliability and validation studies, the results of this survey suggest that the study was needed at the school site to address and investigate student-related racism. In addition, the results suggest that a study and intervention focused on racism and school administration are needed.

Posttest: experience in adventure based counseling. The results of this survey suggest that most of the teachers and students viewed ABC counseling as beneficial, having positively changed how students view others, and having the potential to reduce racism. A majority of teachers and students stated that ABC counseling changed how students feel about themselves in a positive way. In addition, on the survey question asking about their experience with the physical nature of ABC counseling participants reported that physical contact with other students was uncomfortable.



A possible cause of physical contact being uncomfortable for the students is the limited number of experiences provided at high schools for physical contact. This type of contact is frequently discouraged between boys and girls, and often enforced in discipline policy. Given this marked infrequency, the survey results reporting that the physical contact was uncomfortable for the students appear reasonable. Another possible explanation could be the specific ABC counseling activities that took place in this study: there are literally hundreds of low and high ropes course activities that can be used in ABC counseling. For this study, activities were selected by the ABC counseling leaders based on input from the researcher, focusing on themes of tolerance and diversity. Course leaders stated that the activities they selected were not out of the ordinary and are used with multiple populations and organizations.

The limitations for this survey mirror those previously discussed. In addition, this particular survey asked the teacher-observers how they viewed the students' experience regarding the ABC event. Because the teachers did not participate in the ABC event and only functioned as observers themselves, the interpretation of their responses may be subjective and difficult to accurately assess given study constraints.

Despite these limitations, it appears that the results of this survey support the prediction presented in hypothesis 6: students and teachers reported that they viewed ABC counseling as efficacious, having changed how students view others in a positive way, and possessing the potential to reduce racism. The survey results are in alignment with existing research on the efficacy of ABC counseling increasing empathy, interpersonal skills, and understanding others (Autry, 2001; Combs, 2001; Cook, 2008; Russell, 2001).



Hypothesis 1. Participants who received the ABC treatment showed a significant increase in self-esteem scores as compared to the control group (see Table 9). The results from this study support previous research, confirming Adventure Based Counseling as efficacious in enhancing adolescent self-esteem (Faulkner, 2001; Garst et al., 2001; Neill & Richards, 1998; Wick & Wick, 1997).

These results also establish that ABC counseling participants experienced the largest gain in self-esteem scores from the time of the event to one-week after the event. Although statistical significance was not found for the one-month outcome, data implies that an increase in self-esteem scores was maintained from one-week to one-month follow-up.

An important limitation regarding the results of this hypothesis for baseline to one-week follow-up is that the assumption of multicollinearity was violated, due to correlation between the centered pretest self-esteem score and the interaction term. The pretest self-esteem score was highly correlated with the interaction term. As a result of this assumptions violation, generalizations of the results are made cautiously (Stevens, 2002).

A difference was observed by gender. Males appear to have experienced an increase in self-esteem scores both from T1 to T2, and from T2 to T3; females showed a decrease in mean scores from T1 to T2, and an increase from T2 to T3; notably, female scores dropped from baseline to one-week follow-up. In addition, the mean baseline self-esteem score for females was higher than the mean baseline score for males (see Table 4). It could be that the increases in male scores are related to the lower baseline scores,



where the males started with a lower overall level of self-esteem and experienced a larger impact from the event.

Another possible explanation of this phenomenon may relate to the physical nature of the ABC intervention. The males' increase in self-esteem scores may be a result of their relatedness to the physical nature of the ropes course activities, especially the high-element climbing events. The opposite could hold true for females, whose decrease in scores might result from their exposure to the physical activities of the program. This explanation is not congruent with the research of Neill and Richards (1998), who believe the increase in participant self-esteem to be the result of participating in the ABC risk-taking elements and physical challenges. Interestingly, Self-determination theory (SDT) suggests these elements could positively impact self-esteem by providing competence feedback, or more generally, by satisfying the psychological needs for competence, relatedness, and autonomy.

Another possible explanation for the differences in male and female scores could relate to the participants' past exposure to ABC counseling or group counseling. Perhaps a difference exists between the two genders' prior exposure to these activities which was not measured as part of this study.

An examination of the significant interaction (see Figure 1) indicates that students with lower baseline self-esteem scores had higher self-esteem scores after ABC counseling, as compared to students with higher baseline self-esteem scores who showed no statistical increase. Chen and Faruggia (2002) assert that self-esteem plays a large role during the developmental stage of adolescence, when the adolescent is swiftly nearing adulthood, and is beginning to take on adult roles and responsibilities. Mandara



et al. (2009) propose that a substantial developmental task of adolescence is the formation of a complete and positive sense of self. The findings of this study suggest that some students may have previously achieved a higher developmental level of self-esteem, and these students benefitted the least from ABC counseling. As such, the results of this study imply that this intervention is most appropriate for students that are pre-identified as possessing low self-esteem.

Based on the results of this study, it could be suggested that Adventure Based Counseling is appropriate for increasing male adolescent self-esteem. This recommendation should be cautiously adopted and it is recommended that future research is completed to more comprehensively explore the effects of ABC counseling on different genders. It could be suggested that Self-Determination theoretically explains the efficacy of ABC counseling increasing self-esteem as a result of the activities providing competence feedback. This explanation does, however, require further investigation to empirically establish if ABC counseling satisfies participants' psychological needs for competence, relatedness, and autonomy.

Hypothesis 2. This hypothesis was fully accepted. Empathy significantly increased for the ABC counseling group for both time periods (see Tables 11 and 12). Results support previous research on ABC counseling, which attributes increases in empathy and relatedness to others to the treatment's focus on experiencing, expressing and exploring emotions in a group setting (Autry, 2001; Combs, 2001; Cook, 2008; Russell, 2001).

Furthermore, results indicate that ABC counseling has the potential to increase adolescent empathy longitudinally. This was supported as the intervention shifted the



participants' empathic relatedness to others, quantified by a significant increase in empathy scores for both time periods. It may also be suggested that the personal awareness and insight gained through the intervention has a lasting impact, and that adolescents gained an enhanced insight into themselves which allowed for a continued developmental process to occur. Future research should investigate the impact of ABC counseling on adolescent empathy over a longer period of time, with follow-up testing at six months, one year and two years.

One limitation exists concerning the implications and generalizations of the results concerning the Basic Empathy Scale. The scale was developed in England and previous research using the instrument was primarily conducted with adolescents in European countries such as Italy (Gini et al., 2007), France (D'Ambrosio, et al., 2008), and England (Jolliffe & Farrington, 2006). Although reliability and validity have been established and the instrument was developed originally in English, cultural differences may exist that impact the participants' responses to questions, thereby influencing results.

Aligned with previous empathy research (Davis, 1983; Jolliffe & Farrington, 2006; Lennon & Eisenberg, 1987), females in this study have higher mean scores than males on all three administrations of the BES (see Table 4). Jolliffe & Farrington (2006) posit that because females are socialized to be more attuned than males to the feelings of other people, or because females are socially expected to respond more comprehensively to the feelings of others, females may respond to questionnaires in concordance with these sex-role stereotypes. Similar to the self-esteem scores, males showed an increase in empathy scores, while female scores remained relatively constant. It could be that males, operating from traditional gender roles toward communication and understanding of the



feelings of others, were more impacted by the group counseling element of the ABC event. Future research that specifically measures what elements of ABC counseling increased empathy would be helpful to more thoroughly understand these phenomena.

The Latino group stood out as having the highest mean scores for empathy (see Table 5). This could be the result of an increased focus placed on the Latina/o population at the study site by both the site administration and personnel from the district ESOL office. Two years ago, a mentoring program was established at the site and a focus was placed on recruiting Latina/o mentors and placing them with ethnically similar students. A future study examining the dimensions of the mentoring program would be valuable in measuring its true impact.

Previous research on adolescent empathy has established a negative correlation between high empathy and an increase pro-social behavior (Jolliffe & Farrington, 2006). It could be cautiously generalized that ABC counseling has the potential to increase adolescent pro-social behavior, especially with males. Because bullying is such an important topic in schools, future research could help determine if ABC counseling reduces these psychologically and physically dominating behaviors. What can be generalized from the results of this study is that ABC counseling significantly increases high school adolescents' empathic abilities.

Hypothesis 3. Results indicate a significant difference exists between groups (ABC and control) for the outcome perceived racism assessed at one-month follow-up posttest (see Table 14), however no significance was established for the outcome at one-week posttest (see Table 13).



A limitation that exists regarding perceived discrimination is that it is difficult to distinguish between actual discrimination occurring or the perception that discrimination is occurring. There is, however, an abundance of literature indicating that the perception of being discriminated against is sufficient to decrease the health and mental health status of ethnic minorities (Landrine et al., 2006; Smedley & Smedley, 2005). For this study the measurement of perceived racial discrimination appraises the victim's perception; and as such, the presence of perceived discrimination indicates the existence of racism.

A review of descriptive data by ethnicity shows that males had higher mean scores for perceived racial discrimination as compared to females (see Table 4). This indicates that males in the sample possessed an increased perception of racism occurring in their lives as compared to females in the sample, notably at the baseline score.

Research by Rodriguez (2008) examined different forms of perceived discrimination related to gender and found that some forms of discrimination may be gendered, specifically issues related to violence and harassment. Some researchers contend that masculinity is often associated with being or acting violent (Johnson 2005; Kimmel 2004; Messner 1992). Most notably, Kimmel (2004) suggests that males are socialized to be prepared for violence in their lives, and that defending oneself is a sign of masculinity. The male participants would therefore be more likely than the females to encounter and perceive discrimination. This could suggest that the racially-related violence previously discussed as occurring at the study site impacts the male participants' perception of racism. Therefore, the presence of the racial-violence functions to sustain its own existence.



Regarding gender, not all research supports the findings of this study. Some studies investigating the effect of gender on perceptions of discrimination generally find that women are more likely than men to perceive discrimination (Gutek, Cohen, & Tsui, 1996; Inman & Baron, 1996; Levin, Sinclair, Veniegas, & Taylor, 2002). The reasons behind this occurrence are described as related to historical discrimination against women in the United States.

The African American group had the highest mean scores for perceived racial discrimination when compared to the Latina/os and Caucasians (see Table 5). This suggests that African Americans adolescents at the study site have a notably higher perception of racism at the study site than both other groups. Literature supports these findings where Caucasians likewise reported significantly less discrimination than did African Americans (Brondolo, Kelly, Coakley, Gordon, Thompson, & Levy, 2005). The findings of this study also supports research by Landrine et al. (2006), whereby African Americans reported more discrimination than Asian Americans, Latina/os, and Caucasians. It could be that the study findings reflect real differences among ethnic minority groups in being discriminated, e.g. African Americans are discriminated against more frequently than other minority groups. Alternatively, these findings may reflect ethnic differences in perceiving discrimination as such, e.g. Latina/os experience an equal amount of discrimination, however they perceive less occurring. Rodriguez (2008) asserts that minority group status does not always predict perceived discrimination; however, the social barriers hypothesis provides a potential explanation for the heightened African American scores in this study. This hypothesis contends that African



Americans could perceive more personal discrimination due to actual institutionalized practices and prejudice.

Based on the analysis above, a possible generalization from the study results is that African American adolescents may benefit the most with this intervention in regards to reducing perceptions of racial discrimination.

Hypothesis 4. A significant reduction in racist attitudes occurred for the ABC group as compared to the control group for both time-periods (see Tables 18 and 19). Limitations exist regarding self-reported participant scores on the *Modern Racism Scale*. McConahay (1986) acknowledged that the MRS can sometimes be unstable, particularly if respondents perceive the racial implications of the items. The questions on this scale and other extrinsic racism instruments are worded such that the participant could infer the implications of the items. Consequently, a limitation exists concerning the potential reactivity of the adolescent participants to the racism items, and a potential for conscious deception by the participants is possible. This phenomenon was not controlled for in the study and the researcher must acknowledge that the results could potentially be impacted.

Studies have validated the MRS for use with both males and females and all three ethnicities represented in this study. In addition, various age groups have been examined, including college students and young adults ages 17 to 23 (Son Hing, Chung-Yan, Hamilton, & Zanna, 2008). As such, a second limitation is that no research was found testing the MRS specifically with adolescents, which again bears some impact on the conclusiveness of the results.

The Latina/o group stood out as having the highest mean scores for racist attitudes when compared to the other two groups (see Table 5). This is quite a large discrepancy



as compared at baseline to Caucasians and African Americans. Data suggests that the Latina/os at the study site possess an elevated level of racist attitudes as compared to the other two groups. As previously mentioned, the administration placed focus on the Latina/o population at the high school over the last few years, based on the groups' dropout, discipline and academic data. It could be that the high mean scores on the MRS for the Latina/os reflect the overall climate of Latina/o students at the study site. Studies indicate that Latina/o adolescents report discrimination as pervasive, and characterize it based on English fluency, immigration concerns, negative stereotypes, poverty, and skin color. (Fisher, Wallace, & Fenton, 2000; Romero & Roberts, 2003a, 2003b). It could be suggested that Latina/o adolescents deal with unique issues related to discrimination that trigger heightened defensive response manifesting as racist attitudes toward out-groups.

A review of the significant interaction for both baseline to one-week and one-week to one-month indicates that the reduction occurred for ABC participants with high levels of baseline racial attitudes scores compared to the control group. It can be suggested from the results that ABC counseling is most effective for adolescents who previously possess a high level of racist attitudes, and also with adolescents with previous low levels of racist attitudes. The sample for this study was selected initially through recruitment, then through a stratified sampling process to balance groups. Students may have self-selected or omitted themselves from the study, presenting a limitation regarding the results.

Results suggest that ABC counseling is appropriate for specifically identified populations that traditionally struggle with racist attitudes, such as juvenile offenders or adolescents with identified school-based discipline issues. At the high school level,



selecting specific students to participate in ABC counseling (those with identified high levels of racist attitudes) could see a larger decrease in racist attitudes with the sample.

On the contrary, the communication and interaction between students with both high and low levels of racist attitudes may have contributed to the effectiveness of the program.

Hypothesis 5. No significant difference was found to exist between groups (ABC and control) for the outcome racism-related discipline referrals (see Table 17).

Several factors could have impacted these results. It is plausible that the 5-week period of time was not enough to measure a significant change in the number of discipline referrals. At the study site, data-reports often show increases and decreases in the number of discipline referrals at different times during a given school year. The data collection for this hypothesis took place in the spring, one-month after high-stakes State testing; perhaps stress associated with this event influenced student behavior, wherein students shifted their attention to the high-stakes exams and away from other social or school-based issues.

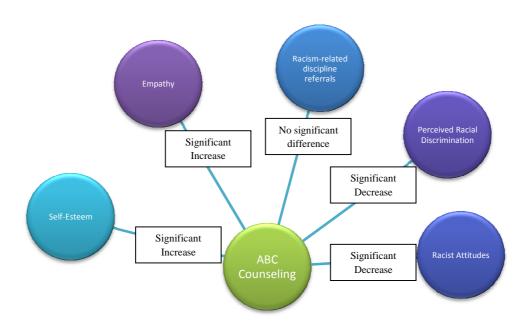
It may also be possible that State testing shifted the climate of the school and classroom practices by adding a school-wide focus on the event. Other external factors influencing the results could be varying teacher attitudes on discipline and school culture, and changing family and social issues related to the economy. Figure 7 represents overall significant differences found in hypotheses 1-5.



Figure 7

Overall Significant Differences for Self-Esteem, Empathy, Perceived Racial

Discrimination, Racist Attitudes, and Racist-Related Discipline Referrals



Hypothesis 6. Significant positive relationships were found between self-esteem and empathy, and perceived racism and racist attitudes for each time period (see Tables 18-23); significant negative relationships were found between perceived racial discrimination and empathy, and between perceived racial discrimination and self-esteem. The results suggest that as perceived racial discrimination scores decrease, the scores on self-esteem and empathy increase. This directional effect was established by the significant increases in self-esteem and empathy, and decreases in perceived racial discrimination in hypotheses 1-4.

The results for this hypothesis confirm the prediction that was made: a significant relationship exists between high self-esteem and empathy, and lower scores on racism.

Again, in this study two types of racism were measured, perceived racism (experienced)



and racist attitudes (expressed). For this hypothesis, the perception that racism is occurring was found to significantly decrease as self-esteem and empathy increase. As expected, these relationships existed for both the control and ABC group, and are supported by existing research. The results of this study are consistent with Social Identity Theory predictions. This theory describes the occurrence of racial discrimination as the result of an attempt to enhance self-esteem and collective efficacy (Tajfel, 1978, 1981, 1982; Tajfel & Turner, 1979), and suggests that by increasing self-esteem and empathy by means other than the occurrence of discrimination (ABC counseling), a subsequent decrease in racial discrimination would occur. Student participants that increased self-esteem demonstrated reductions in both measures of racism.

Dovidio, Gaertner, and Loux (2000) suggest that enhanced empathy and social awareness can lead to a stronger inclusive group identity resulting in a reduction in perceived racism. McFarland (1998) found a correlation between a lack of empathy and a predisposition toward experiencing and expressing racism. Butler (1995) discusses how low self-esteem may influence certain behaviors including racial discrimination.

The strongest relationship consistently existed between empathy and self-esteem. Being that empathy and self-esteem are both described in literature as crucial developmental elements for a high-functioning adolescent (Chen & Faruggia, 2002; Newman and Newman, 2009), it is expected that this relationship would exist. It could be suggested from the study that adolescents with high self-esteem will also possess high empathic abilities; on the contrary, those with low self-esteem would likely possess poorly developed empathic skills.



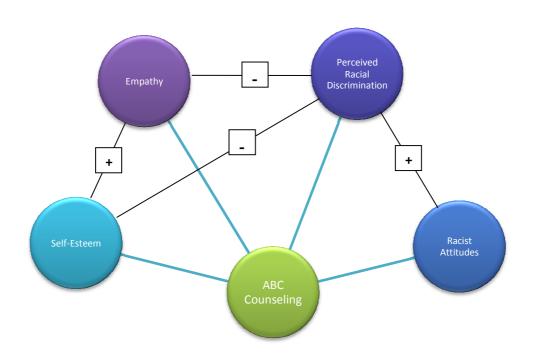
The strongest negative relationships consistently found were between empathy and perceived racial discrimination, and between self-esteem and perceived racial discrimination. Results suggest that the study finding support both the Social Identity theory (Tajfel & Turner, 1979) and Terror Management Theory (Greenberg et al., 1986). Both theories discuss the relationship between self-esteem and discrimination.

This study sought to establish that ABC counseling produced significant increases in self-esteem and empathy, and significant decreases in both perceived racism and racist attitudes; these conjectures were all supported in the regression analyses. What this means is that participating in ABC counseling produced even greater decreases in racist attitudes and perceived racism, and greater increases in self-esteem and empathy than the control group. Results suggest that the prediction was met: as compared to the control, ABC counseling participants experienced a significant increase in self-esteem and empathy and a subsequent significant decrease in perceived racism and racist attitudes. Figure 8 displays the significant positive and negative relationships found in hypothesis 6.



Figure 8

Significant Positive and Negative Relatives Established for Outcomes as Related to the Effect of ABC Counseling



Hypothesis 7. Many of the implications of these finding were discussed earlier in this chapter related to descriptive data; however, some additional conclusions can be drawn from this analysis that established significant differential effects of gender and ethnicity related to ABC counseling.

For this ancillary analysis, males in the ABC counseling group experienced a statistically significant increase in self-esteem and empathy scores as compared to females; females had statistically greater self-esteem and empathy scores overall as compared to males. This dichotomy in the self-esteem and empathy scores by gender supports prior research (Davis, 1983; Jolliffe & Farrington, 2006; Lennon & Eisenberg, 1987) and provides more clarity into the social-emotional developmental level of adolescents by gender. In addition, the results of the current analysis suggest that ABC

counseling may be more appropriate for use with males. Additional studies should be made to determine the appropriateness of using ABC counseling with both genders. A single-sex study is recommended to further investigate this phenomenon.

Latina females experienced a statistically greater increase in self-esteem scores compared to African American or Caucasian females. For racist attitudes, Latina/os experienced a significant reduction on their scores as compared to African Americans and Caucasians. In addition, Latina/os had significantly greater racist attitude scores overall as compared to African Americans and Caucasians (see Tables 24 – 31). Overall, African Americans had significantly greater perceived racial discrimination scores than both Caucasians and Latina/os. Caucasians had overall significantly greater perceived racial discrimination scores than Latina/os. These results support prior research (Brondolo, 2005; Landrine et al., 2006) and imply that African Americans at the school site struggle the most with the perception of racism occurring.

In regards to increasing self-esteem, it can be generalized that ABC counseling is more effective for males than females. Regarding empathy, the results suggest that the ABC counseling treatment is more effective for increasing male empathy. Again, future research as well as studies examining a single-sex sample would be useful in confirming these conclusions.

In addition, the results of this study suggest that ABC counseling may be more effective for use with African American males, Caucasian males, and Latina females for increasing self-esteem. A final generalization is that ABC counseling may be most appropriate for Latina/os for reducing racist attitudes.



Behavioral outcome variables. Results for both total discipline referrals and racism-related discipline referrals indicate significant differences exist within groups from baseline to one-month follow-up (see Tables 32 – 35). The fact that both total and racism-related discipline referrals decreased for both the control and ABC groups could have several possible causes. First, the overall effect of the ABC counseling could have influenced the school climate and caused the overall reduction in referrals to occur. The students who participated in the intervention may have either been responsible for many of the school discipline issues or influential at the school site in implementing change, resulting in this overall reduction. It could also be that the reduction merely reflects the time of year, economy, school social trends or other external factors. What is clear is that the number of discipline incidents were reduced significantly after ABC counseling took place. The results suggest that ABC counseling may have been the catalyst behind this reduction; however, this cannot be firmly substantiated through this analysis.

Results for attendance and GPA indicated that no significant change occurred (see Tables 36 – 39). The most apparent cause is the short time period that was used to measure this data. Examining a change in GPA or attendance between two consecutive months is likely not adequate time to reveal a measurable change. Perhaps looking at grades and attendance over the period of a one to two-year period would substantiate the impact of ABC counseling. Research on racism and ethnic minorities shows a positive correlation exists between the academic achievement of adolescent ethnic minorities and racism (Fisher et al., 2000; Small et al., 2007; Steele, 1997; Wong et al., 2003). Leibkind et al. (2004) examined racism with adolescents and asserted that academics, discipline, and attendance are negatively impacted. This research suggests that as a result of the



significant decrease in racism as established in the regressions, it can be reasonably assumed that a subsequent increase in attendance or grades would have occurred.

Limitations

In addition to the limitations discussed earlier in this chapter, additional limitations regarding this study are included here. Regarding sampling, the generalizability of this study is limited, as the study investigated one sample in one state. Therefore, results are generalized with caution to other populations.

The IRB Committee required that no deception were used in this study and that full description of the study were provided to potential participants. As a result of the IRB process, the participants were aware that the study was examining the variables self-esteem, empathy and racism. All participants completed the instruments three times and it is foreseeable that some may have realized that the researcher was seeking to determine if ABC counseling would subsequently increase or decrease these scores. It is therefore possible that biased responding occurred on the part of participants as a result of the three test administrations and their basic knowledge of the study intent.

The county that this study took place in is also affluent. Consequently, the sample reflects this demographic and again is generalized with caution to other populations. Regarding the instruments, limitations exist regarding their established reliability and validity concerning the specific population that is represented in this study. In particular, the surveys used in this study were created by the researcher and currently possess no tested reliability and validity. Results from these surveys should therefore be considered with prudence.



Suggestions for Future Research

Although the findings of this study produced significant data, several suggestions for future research subsequently emerged. It is recommended that future research with ABC counseling examine other ethnicities beyond African American, Latina/os and Caucasians. Because ABC counseling was found to be effective in reducing elements of racism, expanding this research to include other ethnicities will give a broader picture of the potential effect of the intervention. African Americans, possessing a significantly higher perception of racism, substantiate the need for a continued emphasis of research to address this broad, societal issue.

Future research with ethnicities should seek to establish if exposure to the outgroup, in relation to the specific parameters of this study, is responsible for variance in the study outcomes. In addition, it would also be recommended that future studies examine ABC counseling with all male and all female groups to determine if there are any differential effects when the intervention is completed homogeneously by gender.

As previously stated, an ancillary analysis was conducted after hypotheses 1-6 to determine the differential effects of gender and ethnicity relating to ABC counseling. This study did not, however, control for variance from gender and ethnicity which cut into the outcomes of self-esteem, empathy, perceived racial discrimination and racist attitudes in the regressions. It is recommended that future research include this process into the analysis.

This study is neither a systemic study nor a truly longitudinal study; it was a specific intervention study. As such, some recommendations for future research are studying the school as a system, performing longer or repeated trainings, and conducting



longitudinal studies. It would be recommended that the intervention is measured every six months for a year or two after the study; follow-up ABC counseling should also take place once every six months to a year for the longitudinal study. Additionally, this study should be duplicated using a longer ABC counseling intervention. A two, three, or four day event is recommended and could produce an enhanced effect on the outcomes.

Moreover, it is recommended that future research on ABC counseling controls for participants' prior exposure to ABC counseling or group counseling.

Although this study did address school-based data such as discipline referrals, attendance and grade point average, these were not the focus of the ABC counseling training. Academic achievement and behavioral variables like discipline and attendance represent data that educators and administrators often use to evaluate their effectiveness with students. It is the recommendation of the researcher that future studies investigate ABC counseling related specifically to academic achievement of adolescents as well as variables such as attendance, truancy, and discipline.

Future research on empathy should attempt to determine what underlies the significantly higher empathy of females. This is especially relevant as some researchers have suggested that these empathy differences may underpin the disparity between males and females with school discipline issues and criminal involvement (Jolliffe & Farrington, 2006). Furthermore, future research would be helpful in determining if ABC counseling reduces bullying behaviors.

Another recommendation is implementing and measuring ABC counseling for specific populations which possess pre-existing high levels of racist attitudes or perceived discrimination. Selecting students to participate who have documented issues with racial



intolerance would likely produce positive results in the school climate. Alternatively, implementing ABC counseling as a school-wide intervention has the potential to positively impact the entire school culture by enhancing self-esteem, empathy, and ultimately increase communication, sense of self, and relatedness to others. In addition, utilizing this intervention in jails, prisons or juvenile detention centers might change inmate interactions in the facility and potentially reduce inmate violence.

The nature of ABC counseling lends itself to being described as an alternative learning environment, where students are exposed to a non-traditional format of learning and personal growth. The benefits of this approach are clear as related to the outcomes examined in this study. The positive results lead the researcher to recommend that ABC counseling continue to be investigated as an alternative to traditional education, examining more closely the impact of ABC counseling on student academic achievement and standardized testing.

A final recommendation for future research is to study ABC counseling to determine what specific activities or processes cause the changes in self-esteem, empathy and racism. It is clear from the result of this study that ABC counseling produced significant increases in self-esteem and empathy, and significant decreases in perceived racism and racist attitudes. Future research should seek to explain why these changes occurred related to specific ABC counseling techniques and procedures. ABC counseling remains an intervention that requires additional investigation to further its credibility in the educational and scientific community as a viable treatment for adolescent social and emotional issues.



Conclusion

This study was originally conceptualized by the researcher as a way to determine if ABC counseling could be used to respond to the racial violence occurring at the high school where he is an assistant principal. The research was driven by the lack of available intervention programs and the need to investigate potentially useful programs, such as ABC counseling.

Aligned with previous research, the ABC group experienced a significant increase in self-esteem and empathy. The program also produced significant decreases in both perceived racism and racist attitudes. The latter was a result predicted by the theoretical models used in this research, but it is believed that this is the first time such an effect has received empirical support. In addition, the significant negative relationships found between self-esteem and perceived racism and empathy and perceived racism verified the prediction that increases in self-esteem and empathy would correlate with decreases in racism.

Although this study examined the social-emotional issues of self-esteem and empathy, the driving force behind the study was pinpointing the effect of ABC counseling on adolescent racism and race-related violence. Therefore, the application for this study's findings upon future research should not be underestimated. The quantifiable impact of racial discrimination in the United States is evidenced by the disproportionate number of ethnic minorities arrested, committed to prison, put to death, and the national poverty rate. Minorities are overrepresented in the high school drop-out rate, in their poor performance on standardized academic assessments, and in Special Education programs. This research not only contributes to the body of literature on ABC



counseling, self-esteem and empathy; it also provides empirical research and broader insight into the issue of racism in the United States.



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Appendices



Appendix A: Script

"Students, a research project is taking place this Spring to examine if Adventure Based Counseling has any impact on self-esteem, empathy and racism. If you choose to participate in this study, you will have the opportunity of participating in a 1-day Adventure Based Counseling "Ropes Course" at the YMCA Alpine Towers in Sarasota. The Ropes Corse will include multiple group activities, small and large group discussion and climbing the YMCA Alpine Tower and climbing wall. This will occur during a school day and you were required to make up any work that you miss. As part of the study, you were asked to complete a questionnaire once before the Rope Course event, and twice after. If you are interested, please ask your teacher for a permission form. If you are under 18, both you and your parent will need to read and sign the form. Whether or not you participate in this study will have no impact on your grade in this class. If you have any questions, please ask your teacher and they will get back to you within a day with the answer. Please turn in your completed permission slip to your teacher. You have one week from today to return your completed permission packet. You were notified by your teacher if you are selected to participate in the study. Thank you"





Parental Permission to Participate in Research Information for parents to consider before allowing their child to take part in this research study

IRB Study # 00000573

The following information is being presented to help you/your child decide whether or not your child wants to be a part of a research study. Please read carefully. Anything you do not understand, ask the investigator.

We are asking you to allow your child to take part in a research study that is called: A Case Study Examining the Impact of Adventure Based Counseling on High School Adolescent Self-Esteem, Empathy, and Racism

The person in charge of this study is Chris Cale of the University Of South Florida. He is being guided in this research by Dr Carlos Zalaquett.

The research was done at YMCA Ropes Course facility, 8301 Potter Park Drive, 34243. Transportation and lunch were provided. There is no cost to your child.

Should your child take part in this study?

This form tells you about this research study. You can decide if you want your child to take part in it. This form explains:

- Why this study is being done.
- What will happen during this study and what your child will need to do.
- Whether there is any chance your child might experience potential benefits from being in the study.
- The risks of having problems because your child is in this study.

Before you decide:

Read this form.

Have a friend or family member read it.

Talk about this study with the person in charge of the study or the person explaining the study. You can have someone with you when you talk about the study.

Talk it over with someone you trust.

Find out what the study is about.

You may have questions this form does not answer. You do not have to guess at things you don't understand. If you have questions, ask the person in charge of



Appendix B (Continued)

the study or study staff as you go along. Ask them to explain things in a way you can understand.

Take your time to think about it.

It is up to you. If you choose to let your child be in the study, then you should sign this form. If you do not want your child to take part in this study, you should not sign the form.

Why is this research being done?

By doing this study, we hope to learn is participating in an adventure based counseling program helps students self-esteem and empathy and well as racists beliefs.

Why is your child being asked to take part?

Your child is being asked to take part in a research study about how an adventure based counseling course will impact students self-esteem, empathy and beliefs about race and racism. Your child is being asked to take part in this research study because he/she is a student at this school.

• If your child takes part in this study, he/she will be one of about 100 people in this study. There will be two different groups of students established. If your child participates in this study, he/she will be randomly assigned to a group. Group One will complete the ABC Ropes Course first, and Group Two will complete it approximately a month later. Once before and twice after the ABC Ropes Course event, your child will complete a questionnaire about their self-esteem, empathy and feelings about race and racism.

What will happen during this study?

- Your child w asked to participate in teambuilding activities, and have discussions with other students and adults.
- The information collected will be input into a computer system and analyzed to get results.
- Your child will complete a questionnaire that has questions about their self-esteem, empathy and feeling about race and racism.
- Your child will complete the questionnaire one time before the ABC course, once after and once again 1 month after.

How many other people will take part?

About 100 students will take part in this study.

What other choices do you have if you decide not to let your child to take part? If you decide not to let your child take part in this study, that is okay.

Instead of being in this research study your child can choose not to participate.

XX/11 ----- 1.11 1 ---- 1.6-- 4-1.2-- ---- 4-- 41.2-- 4-- 1.0

Will your child be paid for taking part in this study?

We will not pay your child for the time he/she volunteers while being in this study.

What will it cost you to let your child take part in this study?

It will not cost you any amount let your child take part in the study.

The study will pay the costs of: food, transportation. The absence for the day will be excused by the school.



Appendix B (Continued)

What are the potential benefits to your child if you let him / her take part in this study?

We do not know if your child will get any benefits by taking part in this study.

What are the risks if your child takes part in this study?

Your child will participate in a Ropes Course. This will include climbing an 'Alpine Tower'. Your child may choose to climb or assist with belaying other climbers. There is the possibility of a physical injury. The greatest level of safety is taken to insure your child's safety in this event.

*Please note, you are also required to complete the YMCA Parental Permission Form in addition to this form.

If your child is harmed while taking part in the study:

If you believe your child has been harmed because of something that is done during the study, you should call Chris Cale immediately at 941-955-0181. It is important for you to understand that the University of South Florida will not pay for the cost of any care or treatment that might be necessary because your child gets hurt or sick while taking part in this study. That cost will be your responsibility. Also, the University of South Florida will not pay for any wages you may lose if your child is harmed by this study. The University of South Florida is considered a state agency and therefore cannot usually be sued.

What will we do to keep your child's study records private?

There are federal laws that say we must keep your child's study records private. We will keep the records of this study private by storing the data in a locked area that no other persons have access to.

We will keep the records of this study confidential by taking your child's name off of the questionnaire and assigning a number to represent your child's data.

However, certain people may need to see your child's study records. By law, anyone who looks at your child's records must keep them completely confidential. The only people who will be allowed to see these records are:

Certain government and university people who need to know more about the study. For example, individuals who provide oversight on this study may need to look at your child's records. These include the University of South Florida Institutional Review Board (IRB) and the staff that work for the IRB. Individuals who work for USF that provide other kinds of oversight to research studies may also need to look at your child's records.

Other individuals who may look at your child's records include: agencies of the federal, state, or local government that regulates this research. This includes the Department of Health and Human Services (DHHS) and the Office for Human Research Protections. They also need to make sure that we are protecting your child's rights and safety.

We may publish what we learn from this study. If we do, we will not let anyone know your child's name. We will not publish anything else that would let people know who your child is.



Appendix B (Continued)

What happens if you decide not to let your child take part in this study?

You should only let your child take part in this study if both of you want to. You or child should not feel that there is any pressure to take part in the study to please the study investigator or the research staff.

If you decide not to let your child take part:

Your child will not be in trouble or lose any rights he/she would normally have.

You child will still get the same services he/she would normally have.

Your child can still get their regular education

You can decide after signing this informed consent document that you no longer want your child to take part in this study. We will keep you informed of any new developments which might affect your willingness to allow your child to continue to participate in the study. However, you can decide you want your child to stop taking part in the study for any reason at any time. If you decide you want your child to stop taking part in the study, tell the study staff as soon as you can.

We will tell you how to stop safely. We will tell you if there are any dangers if your child stops suddenly.

If you decide to stop, your child can go on getting his/her regular education Even if you want your child to stay in the study, there may be reasons we will need to take him/her out of it. Your child may be taken out of this study if:

Your child experiences emotional distress on the ropes course (ie. fear of heights) **You can get the answers to your questions, concerns, or complaints.** If you have any questions, concerns or complaints about this study, call Chris Cale at 941-955-0181.

If you have questions about your child's rights, general questions, complaints, or issues as a person taking part in this study, call the Division of Research Integrity and Compliance of the University of South Florida at (813) 974-9343.

If your child experiences an adverse event or unanticipated problem call Chris Cale at 941-955-0181

Consent for Child to Participate in this Research Study

It is up to you to decide whether you want your child to take part in this study. If you want your child to take part, please read the statements below and sign the form if the statements are true.

I freely give my consent to let my child take part in this study. I understand that by signing this form I am agreeing to let my child take part in research. I have received a copy of this form to take with me.

Signature of Parent of Child Taking Part in Study	Date



Appendix B (Continued) Printed Name of Parent of Child Taking Part in Study	
Signature of Parent of Child Taking Part in Study	Date
Printed Name of Parent of Child Taking Part in Study	
Signatures of both parents are required unless one parent available, deceased, unknown, legally incompetent, or on responsibility for the care and custody of the child. Whe participant, if only one signature is obtained, the person check on of the reasons listed below:	ly one parent has sole legal en enrolling a child
The signature of only one parent was obtained because: ☐ The other parent is not reasonable available. Explain:	
☐ The other parent is unknown. ☐ The other parent is legally incompetent. ☐ The parent who signed has sole legal responsibility for the child.	e care and custody of the
Statement of Person Obtaining Informed I have carefully explained to the person taking part in the streexpect.	
Signature of Person Obtaining Informed Consent	Date
Printed Name of Person Obtaining Informed Consent	





Assent to Participate in Research

Information for Persons under the Age of 18 Who Are Being Asked To Take Part in Research

IRB Study # 00000573

Title of study: A Case Study Examining the Impact of Adventure Based Counseling on High School Adolescent Self-Esteem, Empathy, and Racism

Why am I being asked to take part in this research?

You are being asked to take part in a research study about how an adventure based counseling course will impact students self-esteem, empathy and beliefs about race and racism. You are being asked to take part in this research study because you are a student at this school.

If you take part in this study, you will be one of about 100 people in this study.

Who is doing this study?

The person in charge of this study is Chris Cale of the University Of South Florida. He is being guided in this research by Dr Carlos Zalaquett. Other people who you may see while you are on the study are: Col. F. Thibault, Chaperone.

What is the purpose of this study?

By doing this study, we hope to learn is participating in an adventure based counseling program helps students self-esteem and empathy and well as racists beliefs.

Where is the study going to take place and how long will it last?

There are two different groups who will participate in the study. Group one will complete the ABC Rope Course first, and Group 2 will complete the ABC Ropes Course second. You will be randomly assigned to either group 1 or 2 and notified of the date that you will participate in the ABC Ropes Course. The study will take place at Sarasota YMCA Ropes Course Facility. The total amount of time you will be asked to volunteer for this study is one full day of school. This day will be excused.



Appendix C (Continued)

What will you will be asked to do?

- You will be asked to participate in teambuilding activities, and have discussions with other students and adults.
- The information collected will be input into a computer system and analyzed to get results.
- You will complete a questionnaire that have questions about your self-esteem, empathy and feelings about race and racism.
- You will complete the questionnaire one time before the ABC course, once after and once again 1 month after.

What things might happen that are not pleasant?

To the best of our knowledge, the things you will be doing will not harm you or cause you any additional unpleasant experience.

Although we have made every effort to try and make sure this doesn't happen, you may find some questions we ask you upset you. If so, we will tell you and your parents about some people who may be able to help you with these feelings.

In addition to the things that we have already talked about, listed above, you may experience something uncomfortable that we do not know about at this time.

Will something good happen if I take part in this study?

We cannot promise you that anything good will happen if you decide to take part in this study.

What other choices do I have if I do not participate?

You have the alternative to choose not to participate in this research study.

Do I have to take part in this study?

You should talk with your parents or anyone else that you trust about taking part in this study. If you do not want to take part in the study, that is your decision. You should take part in this study because you really want to volunteer.

If you do not think you want to take part in this study, you should talk this over with your parents and decide together.

If I don't want to take part in this study, what will happen?

If you do not want to take part in the study, there are other choices such as: If you do not want to be in the study, nothing else will happen.

Will I receive any rewards for taking part in this study?

You will not receive any reward for taking part in this study.



Appendix C (Continued)

Who will see the information about me?

Your information will be added to the information from other people taking part in the study so no one will know who you are.

Can I change my mind and quit?

If you decide to take part in the study you still have the right to change your mind later. No one will think badly of you if you decide to quit. Also, the people who are running this study may need for you to stop. If this happens, they will tell you why.

What if I have questions?

You can ask questions about this study at any time. You can talk with your parents or other adults that you trust about this study. You can talk with the person who is asking you to volunteer. If you think of other questions later, you can ask them.

Assent to Participate

I understand what the person running this study is asking me to do. I have thought about this and agree to take part in this study.

Name of person agreeing to take part in the study	Date
Name of person providing information to subject	Date



Appendix D: YMCA Parent Consent Form

SARASOTA FAMILY YMCA, INC. YMCA CHILDREN, YOUTH AND FAMILY SERVICES, INC.

RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT

In consideration for being permitted to utilize the facilities, services and programs of the YMCA for any purpose, including but not limited to observation or use of facilities or equipment or participation in any program affiliated with the YMCA without respect to location, the undersigned, for himself, herself and any personal representatives, heirs and next of kin, hereby acknowledges, agrees and represents that he or she has, or immediately upon entering or participating, will inspect and carefully consider such premises and facilities or the affiliated program. It is further warranted that such entry into the YMCA for observation or use of any facilities or equipment or participation in such affiliated program constitutes an acknowledgment that such premises and all facilities and equipment thereon finds and accepts same as being safe and reasonably suited for the purpose of such observation, use or

IN FURTHER CONSIDERATION OF BEING PERMITTED TO ENTER THE YMCA FOR ANY PURPOSE, INCLUDING BUT NOT LIMITED TO OBSERVATION OR USE OF FACILITIES OR EQUIPMENT, OR PARTICIPATION IN ANY PROGRAM AFFILIATED WITH THE YMCA, WITHOUT RESPECT TO LOCATION, THE UNDERSIGNED HEREBY AGREES TO THE FOLLOWING:

- THE UNDERSIGNED HEREBY RELEASES, WAIVES, DISCHARGES AND COVENANTS NOT TO SUE THE YMCA, its
 directors, officers, employees and agents (hereinafter referred to as "releasees") from all liability to the undersigned, his personal
 representatives, assigns, heirs and next of kin for any loss or damage, and any claim or demands therefore on account of injury to
 the person or property or resulting in death of the undersigned is in, upon, or about the premises or any facilities or equipment
 therein or participating in any program affiliated with the YMCA, without respect to location.
- 2. THE UNDERSIGNED HEREBY AGREES TO INDEMNIFY AND SAVE AND HOLD HARMLESS the releasees and each of them from any loss, liability, damage or cost they may incur due to the presence of the undersigned in, upon, or about the YMCA premises or in any way observing or using any facilities or equipment of the YMCA or participating in any program affiliated with the YMCA whether caused by the negligence of the releasees or otherwise.
- 3. THE UNDERSIGNED HEREBY ASSUMES FULL RESPONSIBILITY FOR AND RISK OF BODILY INJURY, DEATH, OR PROPERTY DAMAGE due to negligence of releasees or otherwise while in, about, or upon the premises of the YMCA and/or while using the premises or any facilities or equipment thereon or participating in any program affiliated with the YMCA.

THE UNDERSIGNED further expressly agrees that the foregoing RELEASE, WAIVER AND INDEMNITY AGREEMENT is intended to be as broad and inclusive as is permitted by the law of the State of Florida and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

THE UNDERSIGNED HAS READ AND VOLUNTARILY SIGNS THE RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT, and further agrees that no oral representations, statements, or inducement apart from the foregoing written agreement have been made.

I HAVE READ THIS RELEASE:	PROGRAM PARTICIPANT:	•
Signed Program Participant/Member Date	Name	· grown active a constr
Signed Parent/Guardian (if under 18)	Address	
Printed Name	City	State
Participant Age:		
	Phone	
Ethnic Background:		



Appendix E: Rosenberg Self-Esteem Scale Sample

BELOW IS A LIST OF STATEMENTS DEALING WITH YOUR GENERAL FEELINGS ABOUT YOURSELF. IF YOU <u>STRONGLY AGREE</u>, CIRCLE <u>SA</u>. IF YOU <u>AGREE</u> WITH THE STATEMENT, CIRCLE <u>A</u>. IF YOU <u>DISAGREE</u>, CIRCLE <u>D</u>. IF YOU <u>STRONGLY DISAGREE</u>, CIRCLE <u>SD</u>.

_			1		,
		1. STRONGLY DISAGREE	2 DISAGREE	3. AGREE	4. STRONGLY AGREE
1.	I feel that I'm a person of worth, at least on an equal plane with others.	SD	D	A	SA
2.	I feel that I have a number of good qualities.	SD	D	A	SA
3.	All in all, I am inclined to feel that I am a failure.	SD	D	A	SA
4.	I am able to do things as well as most other people.	SD	D	A	SA
5.	I feel I do not have much to be proud of.	SD	D	A	SA
6.	I take a positive attitude toward myself.	SD	D	A	SA
7.	On the whole, I am satisfied with myself.	SD	D	A	SA
8.	I wish I could have more respect for myself.	SD	D	A	SA
9.	I certainly feel useless at times.	SD	D	A	SA



Appendix F: General Ethnic Discrimination Scale Sample

We are interested in your experiences with racism. As you answer the questions below, please think about **this school year**. For each question, please circle the best captures the things that have happened to you in **the current school year**.

How often ha	ive you been tre	eated unfairly by	teachers be	cause of your rac	ce/ethnic group?
1	2	3	4	5	6
Never	Once in a	Sometimes	A lot	Most of the	Almost all
	while			time	the time
How often ha	ive you been tre	eated unfairly by	your emplo	yers, bosses and	supervisors
because o	of your race/eth	nic group?			
1	2	3	4	5	6
Never	Once in a	Sometimes	A lot	Most of the	Almost all
	while			time	the time
How often ha	ive you been tre	eated unfairly by	your fellow	students and co	lleagues
because o	of your race/eth	nic group?			
1	2	3	4	5	6
Never	Once in a	Sometimes	A lot	Most of the	Almost all
	while			time	the time
How often ha	ive you been tre	eated unfairly by	people in so	ervice jobs (by s	tore clerks,
waiters, l	bank tellers, et	c) because of you	ır race/ethni	c group?	
1	2	3	4	5	6
Never	Once in a	Sometimes	A lot	Most of the	Almost all
	while			time	the time
How often ha	ive you been tre	eated unfairly by	strangers b	ecause of your ra	ace/ethnic
group?					
1	2	3	4	5	6
Never	Once in a	Sometimes	A lot	Most of the	Almost all
	while			time	the time



Appendix G: Basic Empathy Scale Sample

The following are characteristics that may or may not apply to you. <u>Please pick one answer for each statement</u> to indicate how much you agree or disagree with each statement. Please answer as honestly as you can.

1. My friend's emotions don't affect me much.

1	2	3	4	5
Strongly	Disagree	Neither	Agree	Strongly
Disagree		Agree nor		Agree
		Disagree		

2. After being with a friend who is sad about something, I usually feel sad.

1	2	3	4	5
Strongly	Disagree	Neither	Agree	Strongly
Disagree		Agree nor		Agree
		Disagree		

3. I can understand my friend's happiness when she/he does well at something.

1	2	3	4	5
Strongly	Disagree	Neither	Agree	Strongly
Disagree		Agree nor Disagree		Agree

4. I get frightened when I watch characters in a good scary movie.

1	2	3	4	5
Strongly	Disagree	Neither	Agree	Strongly
Disagree		Agree nor		Agree
		Disagree		



Appendix H: Modern Racism Scale Sample

Please mark the response that most accurately represents your views.

 Over the past few years, minorities have gotten more economically than they deserve.

1 2 3 4 5
Strongly Disagree Neither Agree Strongly
Disagree Agree nor Disagree

2. Over the past few years, the government and news media have shown more respect for minorities than they deserve.

1 2 3 4 5
Strongly Disagree Neither Agree Strongly
Disagree Agree nor Agree
Disagree

3. It is easy to understand the anger of minority people in America.

1 2 3 4 5
Strongly Disagree Neither Agree Strongly
Disagree Agree nor Disagree

4. Discrimination against minorities is no longer a problem in the United States.

1 2 3 4 5
Strongly Disagree Neither Agree Strongly
Disagree Agree nor Agree
Disagree



Racist / Racism: a belief that race is the primary determinant of human traits and capacities and that racial differences produce an inherent superiority of a particular race.

1. I believe that students in this school often act in a racist manner toward other students who are of a different race from themselves.

1	2	3	4	5
Strongly	Disagree	Neither	Agree	Strongly
Disagree		Agree nor		Agree
		Disagree		

2. I believe that teachers in this school often act in a racist manner toward students or other teachers who are of a different race from themselves.

1	2	3	4	5
Strongly	Disagree	Neither	Agree	Strongly
Disagree		Agree nor		Agree
		Disagree		

3. I believe that administrators in this school often act in a racist manner towards students or teachers who are a different race from themselves.

1	2	3	4	5
Strongly	Disagree	Neither	Agree	Strongly
Disagree		Agree nor		Agree
		Disagree		



1. I have traveled around the United States and / or foreign countries and have experienced cultures and races different than my own.

1	2	3	4	5
Strongly	Disagree	Neither	Agree	Strongly
Disagree		Agree nor		Agree
		Disagree		

2. In my life, I have NOT been exposed to a lot of people who are of a different race than I am.

1	2	3	4	5
Strongly	Disagree	Neither	Agree	Strongly
Disagree		Agree nor		Agree
		Disagree		

3. I feel that in my life I have NOT communicated with many other people who are a different race than I am.

1	2	3	4	5
Strongly Disagree	Disagree	Neither	Agree	Strongly
Disagree		Agree nor Disagree		Agree

4. I am *sensitive* to the experiences of people of other cultures and races that are different from my own culture or race.

1	2	3	4	5
Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree



1. I found the Adventure Based Counseling experience beneficial.

1 2 3 4 5
Strongly Disagree Neither Agree Strongly
Disagree Agree nor Agree
Disagree

2. The physical contact with other students made me uncomfortable.

1 2 3 4 5
Strongly Disagree Neither Agree Strongly
Disagree Agree nor Disagree

3. The Adventure Based Counseling experience changed <u>how I view others</u> in a positive way.

1 2 3 4 5
Strongly Disagree Neither Agree Strongly
Disagree Agree nor Agree
Disagree

4. The Adventure Based Counseling experience changed <u>how I feel about myself</u> in a positive way.

1 2 3 4 5
Strongly Disagree Neither Agree Strongly
Disagree Agree nor Agree
Disagree

5. I believe that Adventure Based Counseling has the <u>potential to reduce racism</u> in high schools.

1 2 3 4 5
Strongly Disagree Neither Agree Strongly
Disagree Agree nor Agree
Disagree



1. I found the Adventure Based Counseling experience beneficial for the students.

1	2	3	4	5
Strongly	Disagree	Neither	Agree	Strongly
Disagree		Agree nor		Agree
		Disagree		

2. I believe the physical contact with other students made some students uncomfortable.

1	2	3	4	5
Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree

3. I feel the Adventure Based Counseling experience changed <u>how students view</u> <u>other students</u>, leading them to view others in a more positive way.

1	2	3	4	5
Strongly	Disagree	Neither	Agree	Strongly
Disagree		Agree nor		Agree
		Disagree		

4. I feel that Adventure Based Counseling experience changed <u>how students feel</u> <u>about themselves</u> in a positive way.

1	2	3	4	5
Strongly	Disagree	Neither	Agree	Strongly
Disagree		Agree nor		Agree
		Disagree		

5. I believe that Adventure Based Counseling has the <u>potential to reduce racism</u> in high schools.

1	2	3	4	5
Strongly	Disagree	Neither	Agree	Strongly
Disagree		Agree nor		Agree
		Disagree		



About the Author

Chris Cale completed his Bachelor of Science in Criminology and Master of Science in Marriage, Family, & Child Counseling, and School Counseling at California State University Sacramento. He completed his Master of Education at the University of South Florida, Tampa. Chris grew up in a family with an FBI Agent father and a social worker / counselor mother. Subsequently, he developed a passion for advocating social justice, tolerance, and possibility. Chris is also a professional musician and an avid traveler who has trekked across 47 countries. He is completing his Ph.D. in Curriculum and Instruction with a focus in Counselor Education and Supervision at the University of South Florida in Tampa. Chris is an Assistant Principal at a large suburban high school and loves his job.

