

# Addressing Classism, Ableism, and Heterosexism in Counselor Education

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As the counseling profession charts its future course, issues related to classism, ableism, and heterosexism remain fully incorporated within the multicultural/social justice curriculum. The authors define each of these forms of oppression, explicate their intersections with race, and summarize the resulting implications for counseling education and training.

Since the 1991 publication of the special issue of the *Journal of Counseling & Development* (Volume 70, Number 1) titled “Multiculturalism as a Fourth Force in Counseling,” counselors and counseling psychologists have made multicultural competence a mainstay of education and training within the field. Pioneers in the multicultural counseling movement acknowledged early on that the scope of multicultural competence needed to extend beyond addressing the ways that racism and ethnocentrism adversely affect the mental health of persons from diverse racial/ethnic backgrounds (Pedersen, 1991). Despite this acknowledgment, issues related to classism, ableism, and heterosexism and their intersections with race have been slow to be fully incorporated within the training of new counselors and counseling psychologists. This article profiles educational and training considerations with regard to these three specific forms of oppression by locating them at their intersections with racism.

In addressing issues related to classism, Liu et al. (2004) exposed counseling’s lack of attention to social class in their content analysis of articles published in three major counseling journals between 1981 and 2000. These researchers found that only 18% of the articles reviewed during those years incorporated social class as a variable. As noted by Smart and Smart (2006), attention to ableism within counseling research and training is even more limited, despite the fact that the number of Americans who experience disability is increasing.

With regard to issues related to heterosexism and sexual orientation, Phillips, Ingram, Smith, and Mindes’s (2003) content review of eight major counseling journals revealed that only 2.11% of all the articles published during the 1990s directed attention to lesbian-, gay-, or bisexual-related issues. In the present discussion, the term *queer* is used in preference to the heterosexist dichotomy of *straight* and *gay* (Ristock & Julien, 2003). The term *queer* is understood to be inclusive of all individuals whose sexual orientation might not be heterosexual. The following section begins a more detailed examination of the three forms of cultural oppression listed earlier by profiling the race–class intersection and related training considerations. Subsequent sections direct attention to the complex problems of ableism and heterosexism as they relate to the training of professional counselors and counseling psychologists.

## Classism

In a society where social class tends to be understood primarily in terms of income (Zweig, 2000), classism remains an elusive concept with varied representations. One approach to understanding class-related inequalities derives from the context of power and privilege in which class inequity is seen as a form of sociopolitical dominance by which some groups systematically prosper at the expense of others (Saegert et al., 2006). Such a conceptualization is offered by Collins and Yeskel (2005), who defined classism as the assignment of characteristics of worth and ability based on social class and “the systematic oppression of subordinated groups (people without endowed or acquired economic power, social influence, or privilege) by the dominant groups (those who have access to control of the necessary resources by which other people make their living)” (p. 143).

### Intersections of Class and Race

In the United States, the economic power and privilege that is associated with ownership of the resources by which other people make their living is deeply and historically intertwined with race. In fact, it could be said that class-related interests—that is, interests related to the generation and accumulation of wealth—helped to give birth to the delineation of race as it is known today.

Race itself is a biological myth of relatively recent creation (American Anthropological Association, 1998). Accordingly, the earliest European settlers on this continent would have likely described themselves as English or Christian—not White (Omi & Winant, 2004). By the end of the colonists’ 1st century in America, however, the transatlantic slave trade had become an important economic engine for the developing nation (Zinn, 2005). Whiteness emerged at that time as a new racialized group identity that collectively privileged the burgeoning owning class of the New World over “the Blacks and Tawnys” (as cited in Takaki, 1993, p. 79), as Benjamin Franklin called them.

The establishment and promulgation of this supposed natural racial order allowed Whites to rationalize the kidnapping and enslavement of Africans, the buying and selling of generations of their children, the centuries-long appropriation of all profits from their labor, and the removal of Native Americans to allow

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for White ownership of this indigenous group's land (Marable, 2006). In short, understanding the race–class intersection means understanding that Whiteness itself is an artifact of sociocultural dominance production (Frankenburg, 1993); that is, it exists as a relic of the creation of a social hierarchy by which some people could assume positions of dominance over others. Moreover, the race–class intersection represents the historical vehicle by which people of color have been underdeveloped economically to the advantage of dominant classes (Marable, 2000).

### The Racial Wealth Divide

The devastating effects of poverty on emotional well-being have been repeatedly and conclusively established by numerous researchers (Carr & Sloan, 2003). The findings of these studies bring into sharp focus the immediate consequences of the race–class intersection and the resulting disproportionate harm to people of color. The modern legacy of Whites' historical domination of property ownership and wealth creation results in the gaping racial wealth divide that continues to characterize American class structure. In fact, "for every dollar owned by the average White family in the United States, the average Family of Color has less than one dime" (Lui, Robles, Leondar-Ross, Brewer, & Adamson, 2006, p. 1).

Correspondingly, people of color are overrepresented among those living in poverty. In this regard, the U.S. Census Bureau (DeNavas-Walt, Proctor, & Lee, 2005) reported that the poverty rate for Whites was 8.6% in 2004, whereas it was 24.7% for Blacks, 24.3% for Native Americans and Native Alaskans, 21.9% for Latinos(as), 13.2% for Native Hawaiians and Pacific Islanders, and 9.8% for Asians and Asian Americans. Factoring gender into the equation reveals the staggering poverty rates of just under 40% for households headed by Black women and Latinas in 2004 (Regents of the University of Michigan, 2006).

### Classism: Strategies for Counselor Training and Education

Because class and classism have yet to be substantively incorporated within the spectrum of identities and oppressions encompassed within multiculturalism, the importance of developing strategies for building class-related counseling competence is premised on this essential first step (Smith, in press). Because no texts currently exist for this purpose, counseling curricula could be supplemented with readings such as those cited in this article. Counselors could thereby become educated about the race–class intersection, the racial wealth divide, the circumstances faced by Americans living in poverty, and the adverse impact that classism has on the emotional well-being and psychological development of millions of persons in contemporary society.

More specifically, counseling students could learn to see classism at work through the facilitated analysis of such real-life examples as (a) environmental classism and racism, through which the communities of poor people and people of color have become waste dumping grounds (Bullard, 2000); (b) the unequal allocation of educational resources, which has

resulted in a public school crisis for poor students of color (Fine & Weis, 2003); and (c) the negative stereotyping of the poor that permeates the media, particularly with regard to poor people of color (Clawson & Trice, 2000). As Lott (2002) explained, these negative images of the poor have become widely integrated into the attitudes of the general public.

Counselors, of course, are also subject to the influence of these and other stereotypes, which, if unaddressed, undermine their ability to work competently with poor clients (Smith, 2005). Counselors' own motivations and everyday discourse can reveal previously unexamined symbols of and references to class and privilege (Smith, in press). For example, class references are contained in commonplace American upward mobility dialogues (Baker, 1996) and the disparagement of labor unions (Zweig, 2000). Even counselors who are committed to addressing poverty can benefit from introspectively critiquing their own motivations to "help the needy." At best, such attitudes can result in a helping posture that is patronizing and dehumanizing for poor clients. At worst, they can represent a form of helping that derives primarily from one's own need to feel beneficent even as one participates in perpetuating an unjust status quo (Freire, 1970).

By addressing the intersection of race and class in their work, counselor educators can more fully illuminate the issues and preconceptions that emerge from the interface of these forms of oppression. For example, and as described earlier, people of color are overrepresented among Americans living in poverty relative to their proportions in the general population. The repercussions of this fact are important to a discussion of the racial wealth divide, yet it can also mislead counselors to assume that any new client of color is likely to come from a poor family.

Although racial identity theory and awareness have been explored as important cornerstones of multiculturalism, counselors have been relatively silent regarding Whiteness per se as the living legacy of sociocultural dominance production, as explicated by Frankenburg (1993). This issue will represent new, uncharted territory for some counselor educators, researchers, practitioners, and students who wish to deepen their level of multicultural and social justice awareness further by engaging in discussions about this important issue.

### Ableism

Ableism is a form of discrimination or prejudice against individuals with physical, mental, or developmental disabilities that is characterized by the belief that these individuals need to be fixed or cannot function as full members of society (Castañeda & Peters, 2000). As a result of these assumptions, individuals with disabilities are commonly viewed as being abnormal rather than as members of a distinct minority community (Olkin & Pledger, 2003; Reid & Knight, 2006). Because disability status has been viewed as a defect rather than a dimension of difference, disability has not been widely recognized as a multicultural concern by the general public as well as by counselor educators and practitioners.

Despite the negative impact such prejudices have when counseling persons with disabilities, most counselor education programs (other than rehabilitation and disability counseling programs) have not specifically focused on disability issues (Smart & Smart, 2006). In the past, the rationale behind this neglect was that most counselors did not often encounter individuals with disabilities. Recently, however, a variety of sociopolitical factors have converged to make awareness of ableism an essential aspect of competent counseling practice in all helping settings.

### Increasing Need for Disability-Related Counselor Competence

Approximately 20% of Americans have some type of disability, and this number is increasing (Freedman, Martin, & Schoeni, 2004). The aging baby boom generation increasingly faces age-related disabilities that are associated with cardiovascular disease, arthritis, and dementia. The incidence of diabetes has increased for individuals of all ages. As individuals with diabetes grow older, the incidence of complications such as blindness, peripheral neuropathy, and amputations is also expected to increase (National Diabetes Information Clearinghouse, 2005). Moreover, the wars in Afghanistan and Iraq have resulted in substantial numbers of returning soldiers with serious and permanent injuries, particularly traumatic brain injury. Thus, even counselors who are not working directly with individuals who have disabilities are almost certain to work with clients affected by the disability of a child, parent, or other family member.

Changes in the law over the past few decades have also increased the need for counselors in all specialties to develop competence in working with individuals with disabilities. In this regard, the Individuals With Disabilities Education Improvement Act of 2004 substantially strengthened the Education for All Handicapped Children Act of 1975, which mandated that students with disabilities be educated in the least restrictive environment possible, often in regular classrooms. Furthermore, Section 504 of the Rehabilitation Act of 1973 (1977) and the Americans With Disabilities Act of 1990 (1991) increased access to employment and education opportunities for a wide group of individuals with disabilities. These legal changes require employers and educational institutions to provide reasonable accommodations to those who are otherwise qualified for the tasks required of them in these settings.

Furthermore, because persons with disabilities are entering higher education and employment settings in larger numbers than in the past, college and career counselors are increasingly called upon to provide educational and career development counseling services to individuals with disabilities. As participants in mainstream society, individuals with severe disabilities are also in need of counseling services that address such familiar client concerns as stress, anxiety, depression, and relationship issues. Consequently, it is important for all counselors to understand the challenges that persons with disabilities face and to be prepared to address the ways in which the complex problem of ableism adversely affects these clients' lives.

### Intersections of Disability, Race, Class, and Sexual Orientation

Disability is not an isolated issue because it intersects with class, race, and other dimensions of cultural identity, including sexual orientation. Thus, clients with disabilities face multiple challenges that coincide with other dimensions of their personal identity. As previously discussed, class and race are inextricably intertwined such that people of color are overrepresented among those living in poverty. These persons are also more vulnerable to disability because of such factors as reduced access to prenatal care and environmental racism and classism, which lead to greater exposure to toxic chemicals, to name a few. Combined with practitioner biases, these factors have resulted in a larger proportion of poor students, many of whom are African American, being diagnosed with mental retardation, learning disabilities, and emotional disturbances (Reid & Knight, 2006).

Diabetes and its related complications also disproportionately affect people of color, with African Americans, Asian Americans, Latinos(as), and Native Americans between 1.5 and 2.2 times more likely to be diagnosed with diabetes than are non-Hispanic Whites (National Diabetes Information Clearinghouse, 2005). Disability can also lead to or increase poverty as a result of both early school dropout (Reid & Knight, 2006) and ableism encountered in the job search process (Unger, Rumrill, Roessler, & Stacklin, 2004).

An additional related issue involves the intersection of disability status and sexual orientation. In this regard, the gay male population is adversely affected by a combination of heterosexism and the AIDS epidemic. More specifically, many persons in the general public assume that gay men are HIV infected and believe that gay men who contract HIV are completely responsible for acquiring this disease. Because these beliefs and attitudes are manifested by persons in the general public, counselors without specific training in this area are not immune from these or other manifestations of heterosexism.

Beyond recognizing the ways that queer persons with HIV/AIDS experience multiple forms of oppression that adversely affect their psychological well-being, ableism often has an impact on queer individuals with any type of disability requiring medical care. This form of social injustice includes laws that deny queer partners the opportunity to participate in health care decisions when their partners become incapable of making such decisions due to disability or illness.

### Ableism: Strategies for Counselor Training and Education

To prepare counselors to work effectively with individuals and families affected by disability, counselor education programs need to respond in several ways to the complex problem of ableism as it affects clients' lives. First, it is important that both counselor educators and their students develop an awareness of how physical and cognitive disabilities have an impact on clients' lives. This could be done through targeted readings, speakers, and intentionally including clients with disabilities

in internship training. Second, it is essential that counselor educators and students confront their own ableism. This requires removing counselors' mental barriers regarding individuals with disabilities and the potential of such persons to realize any untapped dimensions of their personal development. For example, if a counselor with minimal training in this area assumes that a client with a disability is likely to have a low quality of life, the counselor's expectations may contribute to that client's lack of progress in realizing her or his full developmental potential. Olkin and Pledger (2003) have suggested that simply including individuals with disabilities in training case examples can contribute substantially to decreasing bias toward these clients. Empathy exercises, such as having students travel around campus in a wheelchair and noting both practical difficulties and reactions from others, can also be helpful in this regard.

It is also important to remember that not all disabilities are visible. For instance, it may not be readily apparent that a client is experiencing a chronic illness, a learning disability, or sustained a traumatic brain injury. For clients with invisible disabilities, slow progress in counseling can be misinterpreted as the client's resistance to the helping process. Counselor educators would do well to foster class discussions about the types of counseling strategies students think might be most effective to use when working with clients experiencing these and other types of invisible disabilities.

Counselor educators would also do well to help counseling students recognize that the client's disability may not always be related to the presenting problem (Fine & Asch, 2000). For example, a college student with a disability who reports having difficulty with her roommate may require coaching in social skills and stress management and not counseling strategies that address her disability per se. It is equally important for counselors to keep in mind that a problem related to a client's disability is likely to reflect systemic barriers (Fine & Asch, 2000). Such a case might be a client with a visual impairment who has been reprimanded by his boss for being late to off-site training sessions, but who may face a lengthy commute to a location that is not easily accessible by public transportation. Such a situation may require the implementation of advocacy interventions rather than client counseling. Direct individual-client advocacy efforts (American Counseling Association, 2003) may be more appropriate to help a client in a similar situation learn ways to assert the need for reasonable accommodations with her or his supervisor.

Larger scale advocacy efforts may also be helpful in addressing problems that are rooted in various forms of structural and institutional ableism. Such efforts include but are not limited to the role counselors can play in (a) fostering positive social-political actions that facilitate the availability of more accessible, affordable public transportation for persons with disabilities and (b) encouraging supervisors to consider the utility of planning work-related workshops in more convenient and accessible locations to allow full participation by all employees.

Among the possible ways of removing systemic barriers in counseling training programs are providing disability accessible Web sites that provide program, university, and related career

development information to applicants and students; increasing the availability of forms in braille or in electronic "machine-readable" versions; and ensuring alternative assessment methods for individuals with disabilities who may have difficulty with timed tests or instruments requiring manual dexterity. University offices of disability services can assist counselor educators in providing educational and evaluation formats that are accessible and respectful of the strengths and needs of all students.

## Heterosexism

Chernin and Johnson (2002) defined *heterosexism* as oppression of queer individuals manifested by prejudicial and discriminatory acts. Heterosexism devalues any affectional identity that is not heterosexual, thereby supporting the privilege and power that are maintained for heterosexuals (Pharr, 1997). A related construct, *homonegativism*, refers to the negative attitudes and behaviors commonly exhibited toward queer people by individuals supporting heterosexist views (Hudson & Ricketts, 1980).

### Intersections of Heterosexism and Race

The literature focusing on the psychosocial repercussions of heterosexism in the lives of queer people of color suggests that they are at **increased risk for psychosocial distress due to the impact of heterosexism and racism**. For example, researchers have noted that, compared with their heterosexual and gay White counterparts, African American gay/bisexual men reported lower self-esteem and life satisfaction (Crawford, Allison, Zamboni, & Soto, 2002). In another study, 80% of gay male Latino participants reported periods of depression and sadness (Díaz, Ayala, Bein, Henne, & Marin, 2001). Morris, Waldo, and Rothblum (2001) also found that lesbian and bisexual women of color scored higher on measures of psychological distress (including suicidality) than did their White counterparts.

Unique to queer people of color, then, is the dual discrimination associated with the combination of a queer identity and racial/ethnic minority identity. Within communities of color themselves, specific cultural/religious traditions may contribute to the problem of heterosexism (Greene, 1994). **This contention was supported by Lewis (2003), who found that African Americans were more likely than their White counterparts to report that AIDS exists as God's punishment for immoral sexual behavior. The impact of such beliefs and traditions forces many queer people of color to isolate themselves from family and friends, which exacerbates the psychosocial distress experienced by these persons.**

Díaz et al. (2001) found that 64% of Latinos reported feeling that they had to pretend to be heterosexual, with 29% reporting that they had to move away from their families to be openly gay. This is consistent with other research findings indicating that African American queer persons and queer persons of Chinese descent are less likely than White queer persons to disclose their sexual orientation (Kennamer, Honnold, Bradford, & Hendricks, 2000; Wong & Tang, 2004). Individuals who do disclose a queer identity despite cultural stigma often experience severe

negative repercussions, including gay- and lesbian-related assaults in their homes and communities (Hunter, 1990). In fact, 94% of queer persons in a 2002 study indicated that they had been a victim of at least one hate crime based on their sexual orientation (Herek, Cogan, & Gillis, 2002).

As a result of the homonegativity that exists in their communities of origin, queer people of color may turn to the White queer community for acceptance and support. However, on attempting to integrate into this community, they often experience various types of racism that are manifested in discrimination, oppression, rejection, and lack of support (Akerlund & Cheung, 2000), as well as various forms of racial microaggressions (Constantine, Smith, Redington, & Owens, 2008; Sue et al., 2008). These and other forms of racism in the predominantly White queer community may help to explain why queer people of color seem less likely to get involved in gay- and lesbian-related events (Rosario, Schrimshaw, & Hunter, 2004).

### Heterosexism: Strategies for Counselor Training and Education

The findings of the aforementioned studies illustrate the need for counseling students and practitioners to be adequately trained to provide culturally sensitive, nonheterosexist/nonracist interventions for queer clients in general and queer clients of color in particular. The following suggestions represent some of the ways counselor educators can address these issues in their training programs.

First, counselor educators can facilitate graduate students' exploration of biases toward queer people by creating a classroom atmosphere where students feel comfortable speaking frankly about such stereotypes, including their own. Critiquing recordings of popular television shows and music is one way to initiate open discussion of queer stereotypes in society and their impact on the thinking of the general citizenry as well as in counseling professionals.

In addition to intentionally initiating discussions about stereotypes, dialogue about mental health stereotypes could also play a part in practitioner training. This might include discussing the stereotypes that gay men and lesbians are more likely to be addicts, to be depressed, and/or to have body image issues than their heterosexual counterparts. Boysen, Vogel, Madon, and Wester (2006) suggested that such mental health stereotypes influence the quality of psychotherapy provided to queer people. Counselor educators are encouraged to infuse in-class activities that help students to analyze these stereotypes along with the connections that exist between them and the general oppression of queer people in society.

Similarly, counselor educators are encouraged to engage students in exercises that facilitate students' understanding of the privileges that are associated with the use of language that can serve as a degrading and oppressive force in contemporary society. Queer theory views terms such as *homosexual* and *bisexual* with skepticism because of their creation by the dominant heterosexual culture. Carroll (2001) asserted that any language that conceptualizes queer people as a separate species is rooted in sociopolitical hierarchies of power that perpetuate injustice against queer persons. It is also added that

the term *homosexual* has clinical connotations and is not used by most queer people to describe themselves.

Furthermore, although some men of color engage in same-gender sexual behavior, they may not self-identify as being gay or bisexual (Stokes, Vanable, & McKirnan, 1996). The dichotomous labels of *gay*, *lesbian*, *straight*, and *bisexual*, therefore, dismiss such individuals. Counselor educators are encouraged to teach counselors-in-training not to make assumptions about clients' identities along with discussing appropriate ways for counselors to ask clients how they identify themselves.

Regarding counseling textbooks, Carroll (2001) suggested that counselor education programs need to include teaching students to read texts "queerly." In other words, counseling students are encouraged to notice domains of power and control when reading counseling texts, especially as it relates to the oppressive power of language that helps to perpetuate various stereotypes of queer persons. Other researchers encourage counselor educators to teach students about related constructs such as discourse, positioning, and deconstruction to facilitate students' understanding of the problem of voicelessness and powerlessness among queer people of color (Winslade, Monk, & Drewery, 1997).

Training interventions can be implemented that concurrently support queer people, including queer people of color, in the voicing of their concerns and needs. For example, educators can invite a panel that includes queer people of color to participate in a classroom-based panel discussion of their life experiences. Such panel discussions have been shown to have a positive effect on the attitudes of students and also contribute to feelings of empowerment among panel participants (Croteau & Kusek, 1992). Assisting students to address the needs of queer persons in ways that foster the empowerment of persons in this cultural group can be further enhanced by encouraging students to learn about the specific competencies they need to acquire to work effectively and respectfully with queer persons. This learning can be accomplished, in part, by infusing issues related to the counseling competencies that have been developed and formally endorsed by the Association for Lesbian, Gay, Bisexual and Transgender Issues in Counseling (n.d.) into all counselor education course work.

With regard to practicum or internship training experiences, it is important that counselor educators create opportunities by which students can observe that the mental health problems manifested by queer persons are not derivative of a queer identity itself. By working empathically with queer clients and gaining new insights from queer supervisors, counseling students will have a better chance to learn that heterosexism and homonegativity underlie many of the stressors and problems that queer clients experience in their lives (Greene, 2005).

In clinical courses, counselors-in-training are typically taught such skills as reflecting, summarizing, and questioning. However, these skills alone may not allow counselors to comprehensively assess the effects of prejudice and social injustice in the lives of persons in oppressed populations. Educators can augment counselors' skills by introducing learning activities that illuminate the exploration of the multiple injustices and oppressions that

queer persons of color experience. Accordingly, Blando (2001) suggested that subculture-specific advocacy interventions should be used when counseling queer clients. Counselor education programs can further enhance students' professional preparation by establishing relationships with agencies and clinics that provide services to queer people of color. Not only would this benefit the community organizations by making counseling services more available to their clientele, but it would also create potential internship sites for students who may want to gain experience working with this population.

## Conclusion

As the counseling profession charts the future course of its multicultural/social justice training initiatives, among counselors' aspirations should be to more fully address the oppression of marginalized groups who are not typically encompassed within existing multicultural analyses. The oppression-related realities described in this article provide crucial information for counselors working with marginalized clients, and the corresponding recommendations can help counselors and their training programs serve those clients ethically and effectively. Moreover, this article emphasizes the need for counselors to understand students and clients from multiple dimensions and identities rather than from socially constructed binaries such as gender, sexual orientation, and ability.

Finally, as hooks (2000) has made clear, class matters:

To challenge racism or sexism or both without linking these systems to economic structures of exploitation and our collective participation in the upholding and maintenance of such structures . . . is ultimately to betray a vision of justice for all. (p. 161)

This vision of justice for all is foundational to counseling's multicultural/social justice curriculum, and efforts to include less studied dimensions of oppression within that curriculum can help future generations of counselors bring this vision more fully to life.

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