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**Intrapersonal and Perceived Interpersonal Attributions:
Determinants of Help-Seeking in Low-Literate Adults**

Tanya S. Martini

B.Sc. University of Toronto, 1991

**A Thesis
Submitted to the Faculty of Graduate Studies
through the Department of Psychology
in partial fulfilment of the
requirements for the degree of
Master of Arts at the
University of Windsor
Windsor, Ontario, Canada
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Abstract

Previous research has indicated that, when making a decision about whether to request assistance, potential help seekers' own attributions (i.e., their intrapersonal attributions) for their problem play an important role. Internal attributions (viewing the problem as being caused by something inherent in the self) seem to impede help-seeking while external attributions (viewing the problem as being caused by external circumstances) do not. The present study sought to examine whether the help-seeking decision might also be influenced by perceived interpersonal attributions; that is, help seekers' perceptions about the attributions that *other people* will make for their difficulties. It was hypothesised that this type of attribution might be of particular importance when considering the help-seeking behaviour of groups which are stigmatized by society, such as adults who have difficulty reading and writing in their first language (low literate adults).

Adult learners (a group of low literate adults), literacy tutors and a control group provided information concerning their attributional style, as well as their attributions for the reading difficulties of low literate adults. Beliefs about the way that low literate adults are viewed within society and the degree to which they believed that low literate adults should keep their reading problems a secret were also examined.

Learners were found to have the most optimistic style of attribution. Further analyses of attributional style indicated that a general tendency to make internal attributions for negative events was not correlated with learners' tendency to make internal attributions for their reading difficulties. With respect to the type of attributions (internal vs. external) made for their reading difficulties, no gender differences were found among the adult learners.

Although each of the three groups indicated that low literate adults are discriminated against, adult learners perceived the least amount of discrimination. For the adult learners, the belief that other people will make internal attributions for literacy difficulties was strongly correlated with a fear of being negatively evaluated as a result of coming forward to request help.

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I would also like to extend my gratitude to a very special group of friends from Toronto -- John, Di, Jo, Dave, Lynn and Hwan. You have seen me through the very best and the very worst of the past ten years, and regardless of the different paths that we have chosen, I will always be grateful for the ability that each of you has to make me feel as though I am never far from your hearts.

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CHAPTER I

Introduction

In Western culture, social scientists are often committed to the belief that social structures can be altered to improve the quality of life for members of society. Indeed, researchers in this area may be called upon to both identify existing social problems, and propose solutions which will ameliorate such conditions. In many instances, the implemented solutions include some form of aid for those individuals considered to be in difficulty. Unfortunately, however, those people who appear to be in need of assistance may receive these well-meant projects somewhat unenthusiastically. It seems that, in some cases, the desire to help is accompanied by an incomplete understanding of the recipient's views about such initiatives (Gergen, 1974).

The Paradox of Help-Seeking

The observation that help is sometimes greeted without enthusiasm may seem somewhat unusual since, traditionally, assistance has been viewed largely in terms of the benefits afforded to the recipient. However, research conducted in the area of help-seeking and -receiving indicates that these processes may be difficult, and that the assistance provided by others is sometimes perceived by the recipient as a mixed blessing (Fisher, Nadler, & Whitcher-Alagna, 1982). This view is substantiated by claims that recipients of assistance have been observed to react in an angry or even hostile manner towards the help offered by others,

rather than with the appreciation that society would deem appropriate under such circumstances. (Gross, Wallston, & Piliavin, 1979). Perhaps even more interesting is the finding that in some instances, people in need will elect not to seek help at all. This apparent unwillingness to ask for help is of theoretical interest because, in deciding not to access available resources, people seem to be working against their own self-interest (Gross & McMullen, 1981, cited in DePaulo, 1982).

Help-Seeking and Attribution Theory

In an effort to explicate this somewhat paradoxical finding, researchers have used the framework of attribution theory to study the factors which mediate help-seeking processes. According to this perspective, recipients of assistance are viewed as active agents who attempt to make sense of the helping interaction (Fisher, Nadler, & Whitcher-Alagna, 1982). One of the key issues confronting these individuals is their perception about why the assistance is required. In trying to answer this question, responsibility for the situation is often attributed either to circumstantial factors (a situational or external attribution), or to something inherent in the self (a dispositional or internal attribution).

Whether the cause of an event is viewed as being the result of internal or external factors is hypothesised to be related to three types of information: the distinctiveness of the event (the degree to which the person in question would behave differently in other situations), consistency (the extent to which the person behaves the same way in this particular situation, across time) and consensus (referring to whether or not other people are seen to behave similarly in this

particular situation) (Kelley, 1967). Internal attributions are characterised by high consistency, low distinctiveness and low consensus. External attributions, on the other hand, are typified by high levels of consistency, distinctiveness and consensus (Myers, 1990).

Research in the area of attribution theory suggests that there may be gender differences in the types of attributions that men and women make for their successes and failures. Findings indicate that men are more likely to make internal attributions for positive events and external attributions for negative events. The reverse seems to be true for women (Deaux & Emswiler, 1974, cited in Ross & Fletcher, 1985).

It has been proposed that people often possess their own style of attribution. According to Seligman (1990), explanatory style is comprised of the following three dimensions:

- (a) *Permanence* describes the degree to which individuals tend to believe that bad events will endure over time.
- (b) *Pervasiveness* indicates the extent to which people tend to make universal versus specific attributions for their difficulties. People who make universal attributions for a problem tend to feel that it will affect all aspects of their life, while those who make specific attributions believe that the impact of the problem will be restricted.
- (c) *Personalization* refers to the tendency of a person to make internal or external attributions for events.

Seligman (1990) has proposed that, by examining these three dimensions of attributional style, it is possible to assess the degree of optimism with which people view events which occur in their lives.

Intrapersonal attributions: maintaining a favourable self-image.

Research has indicated that the type of attributions made by individuals for their own difficulties (intrapersonal attributions) can have important implications for help-seeking behaviour (Tessler & Schwartz, 1972; Shapiro, 1983). It is thought that individuals may be deterred from requesting assistance when the need for assistance is attributed to something internal (e.g., a lack of ability). In contrast, help-seeking behaviour is seen to increase when an external attribution (e.g., task difficulty) is made.

These tendencies are thought to be mediated by the self-perceptions which are brought about by the two types of attributions. Specifically, it has been proposed that dispositional attributions can often pose a threat to self-esteem, since they are sometimes believed to imply that the difficulty is the result of inadequacies inherent in the self (Nadler, 1991). Because it is well-documented that people are motivated to maintain a positive image of themselves, help-seeking may be inhibited if there is some fear that such action will result in a lowered view of oneself (Leary & Kowalski, 1990; Baumeister, 1982). Situational attributions, on the other hand, are not likely to threaten self-esteem because the problem is viewed as being a product of circumstances, and thus does not reflect incompetence on the part of the individual seeking assistance.

Several studies support the finding that external attributions for difficulties lead to increased help-seeking behaviour. Research conducted with alcoholics has indicated that these individuals are more likely to seek help if they believe that people have little control over whether they develop a drinking problem (Wills & DePaulo, 1991). Similarly, Tessler and Schwartz (1972) placed participants in a situation where their performance on a task was evaluated as being inadequate. Participants were then offered an opportunity to privately obtain help. Consensus was manipulated by telling participants that either 10% or 65% of previous participants had had similar difficulties. It was hypothesised that if consensus was high, participants would be prone to make external attributions for their difficulties and would therefore be more likely to seek help. The results strongly confirmed this hypothesis.

Perceived interpersonal attributions: maintaining a favourable public image.

While it is clear that the decision to request assistance can be affected by the desire to maintain a favourable private self-image, other influences may also play a role in this process. In particular, the self-presentational concerns of the potential help-seeker may be of some importance. It is widely accepted that individuals are concerned not only with the way that they themselves perceive their actions, but also with the way in which others will judge them (Leary & Kowalski, 1990). As a consequence, people are often observed to engage in impression management strategies, behaving in a manner which will result in

favourable evaluations from others. When in difficulty, then, the decision to seek help may be influenced by an individual's perceptions of the social consequences for taking such action.

The body of literature advocating the importance of impression management has two important sources of support. First, this area has a sound theoretical basis. Over the past century, many theorists have developed the idea that both self-concept and behaviour can be influenced by people's perceptions about the attributions that others will make about them (perceived interpersonal attributions). Secondly, there exists considerable empirical evidence which indicates the importance of self-presentational concerns in making help-seeking decisions. Each of these two areas will be considered in turn.

At the turn of the century, Cooley (1902, cited in Collier, Minton, & Reynolds, 1991) outlined his belief that our self-concept emerges as a product of our interactions with others. This view provides the basis of the sociological theory referred to as symbolic interactionism. In his concept of the "looking-glass self", Cooley emphasises that our sense of self-awareness develops as we learn to see ourselves as others see us. He proposed that the social self has three aspects: a sense of how we appear to those around us, an inference about how others are evaluating us, and a subsequent sense of pride (if we believe a positive impression has been formed by the other) or shame (if we believe that another has formed a negative evaluation). It is important to emphasise, however, that this process is not passive. People not only view themselves as they imagine others do, they are

also able to respond to their perceptions; controlling their appearance in order to be seen by others in a particular way. According to Cooley, then, perceptions about the impressions of others play a critical role in defining our public actions (Schlenker, 1980).

George Herbert Mead also affirmed the idea that the self-concept resulted from our interactions with those around us (Collier, Minton, & Reynolds, 1991). Unlike Cooley, however, Mead placed a greater emphasis on the cognitive nature of the self-concept, and its intimate connection to society at large. He stressed the fact that the existence of society precedes that of the individual, and that the self concept was the product of socialization. Based on this idea Mead conceptualised the "generalised other", which represented the viewpoint of society as it was perceived by the individual. Through the generalised other, people evaluate their behaviour and anticipate how others will react to them which, in turn, affects subsequent actions (Schlenker, 1980).

Goffman (1955, cited in Shapiro, 1983) has also developed a model of social interaction which is founded upon the importance of self-presentational considerations. Similar to Cooley and Mead, he asserts that all people are conscious and concerned with the way in which they are evaluated by those around them. Goffman goes on to say that concern with being evaluated negatively can have considerable impact on social interactions, and that people are often willing to give up a great deal in order to ensure that they are not seen in a negative way by those around them (Goffman, 1956, 1963). By way of an

example, he cites the case of a warm and friendly woman, who, before her face was disfigured, enjoyed travelling, shopping and visiting her many relatives. The disfigurement of her face caused a significant change in her way of living. For the first three years, she rarely left her daughter's home, preferring to remain in her room or to sit in the backyard, where no one but her family would be able to see her (Goffman, 1963).

In addition to a well-developed theoretical background, there is also considerable empirical evidence which emphasises that a concern with being negatively evaluated by others may be influential in determining our public actions. With respect to help-seeking, two examples from the literature are noteworthy.

To begin, it has been found that willingness to seek help increases as the act of seeking help becomes less visible and more private (Wills & DePaulo, 1991). For instance, people will often choose impersonal sources of help such as self-help tapes over more personal types of support which involve confiding in another person. Additional evidence to support this view is provided by Stein (1989), who documented his own experience as a volunteer at a food pantry and soup kitchen. He discovered that it was not uncommon for clients to become angry towards volunteers, or to voice their displeasure with the food or the service. Taken within the socio-cultural framework, however, Stein concluded that such reactions may have been the result of the difficulty that the clients had in

maintaining a sense of dignity, self-worth and independence in such a situation which, he states, "fairly shouts [to others] their status as poor and 'needy'" (p. 246).

In addition, research has indicated that, when circumstances dictate the involvement of another person, requests for assistance are often facilitated when the helper is someone considered to be an intimate other (e.g., family and friends), rather than strangers, acquaintances or professionals (Clark, 1983). This tendency has been demonstrated for a variety of problems including career-related difficulties, mental health problems, physical illness and personal troubles.

It is thought that this inclination may be due to the fact that intimate others are more likely than casual acquaintances to be aware of the difficulty for which help is needed. Moreover, in many cases, intimate others demonstrate a commitment to the relationship in spite of the limitations posed by the help-seeker's problem. This finding demonstrates that, in their efforts to be viewed positively by others, people are often very selective in choosing the source of aid. It is the unconditional acceptance on the part of the intimate other which provides a supportive environment in which to seek help, and lessens the concern with being negatively evaluated as a consequence of one's difficulties.

Based upon the preceding theoretical and experimental evidence, it would seem that a study of the factors affecting the decision to seek help should address the self-perceived implications of that choice for the help-seeker's public image, as well as the private self image. It follows from this reasoning that an individual's perceived interpersonal attributions may be an important aspect of the decision to

request help. It may be that individuals who believe that others will attribute their need for help to something internal (e.g., incompetence) will be more likely to perceive a threat to their public self-image, and will consequently elect not to seek help. For example, potential help-seekers may be concerned that others will perceive them as being inferior because of their difficulties, and lacking the independence which is so highly valued by Western society (DePaulo, 1982; Sampson, 1977). To date, however, the impact of perceived interpersonal attributions on help-seeking behaviour has received relatively little attention in the research literature.

Seeking Help with a Stigmatizing Condition

The concern with one's public self-image may be particularly important when seeking help with something to which society has attached a stigma. Understandably, there is often a considerable amount of shame in admitting that one is a member of a negatively stereotyped group, since reactions to the socially stigmatized are generally unfavourable (Goffman, 1963). Those individuals who bear such a mark may be derogated in many ways: they are often negatively evaluated, their opinions may be disregarded and, in some cases, they are simply avoided (Pettigrew, 1983).

One of the consequences of society's treatment of stigmatized is that these individuals may develop negative a self-concept and low self-esteem. This may lead to depressed affect which, in turn, has been linked with a less optimistic style of attribution (Peterson, Semmel, von Baeyer, Abramson, Metalsky, & Seligman).

Another consequence of society's negative views of this group is that there is often a considerable amount of embarrassment in associating oneself with such a group. Shapiro (1983) has defined embarrassment as "a noxious psychological state that arises from the belief that others, who know of one's behaviour, evaluate one unfavourably because one's behaviour has violated situational expectations" (p. 145). He goes further to propose that many people will, in fact, try to avoid such embarrassment by failing to seek the assistance that they may require.

Former psychiatric patients.

A considerable amount of work has been conducted to examine the effects of being stigmatized. In particular, the work of Link and his associates (1987, 1989) with former psychiatric patients has indicated that, while growing up, individuals internalise negative societal conceptions about what it means to be described as mentally ill. As a consequence, they form beliefs about how others will view and treat someone labelled in such a way. These conceptions about societal views later take on personal relevance when one enters treatment, and may have detrimental effects on an individual's interactions with others. Specifically, research in this area indicates that people undergoing psychiatric treatment experience a fear of being devalued and discriminated against by others. As a consequence, they often endorse strategies such as keeping their treatment a secret, or withdrawing from society. Evidence from several research projects has substantiated the fears of these former patients, indicating that the

attitudes of the general public toward this group may indeed be prejudiced (Goffman, 1963; Page, 1977, 1983; Page & Day, 1990).

Low-literate adults.

Another group which is often labelled negatively are those adults who have difficulties with reading and writing in their first language. These adults are classified as being functionally illiterate, or low literate (LL). According to a national study conducted in 1987, more than five million Canadians are estimated to be functionally illiterate. One half of these people had been to high school, and one-third of them reported that they had graduated (Southam Inc., 1987).

In order to ameliorate this situation, a number of government programs have emerged to support literacy education, as have initiatives put forth by non-governmental organisations, unions and businesses. Many of these efforts involve one-to-one tutoring or instruction small groups, although some school boards and community colleges do offer training in a classroom setting (Kozol, 1985). In spite of these attempts, however, it is estimated that less than 5% of the targeted low-literate population actively seek help from such classes (Quigley, 1990).

Recently, educational researchers have sought to improve our understanding of the factors which mediate the decision to seek help with literacy skills. Studies conducted by Beder (1990) and Hayes (1990) revealed several barriers to participation which included situational barriers (e.g., lack of transportation or child care), a low perception of need, a dislike of school, the high degree of effort perceived as being necessary to improve literacy skills, low

self-confidence and social disapproval (i.e., members of the social environment perceive that education is not important).

These results have indeed been useful in elucidating some of the issues surrounding the act of seeking assistance with reading difficulties. However, these studies have failed to acknowledge that the embarrassment associated with being labelled by others as illiterate might also be construed as a barrier to participation in adult literacy programs. It is plausible that such low rates of participation might be related to a fear of being negatively evaluated if others were to find out about their reading difficulties as a result of their seeking help.

Such a fear may be particularly relevant because, in a print-oriented society such as ours, there is an enormous stigma attached to the confession that one is unable to read (Kozol, 1985). It is possible that LL adults may feel that others will make a dispositional attribution for their reading difficulties (e.g., that they are slow, or stupid) if they were to request help, and thus judge them in a negative way. Evidence for this view comes from a field study conducted by Fingeret (1982), in which one LL man was quoted as saying "The people you're close to, you can explain it to them, and they understand. A total stranger -- the first thing they figure is, well, the guy's a dummy" (p. 138).

The impact of both intrapersonal and perceived interpersonal attributions on the help-seeking process provides the focus of the present study. These attributions were studied with respect to LL adults, and the factors which

influence their decision to seek assistance with reading skills from community-based literacy programs. Specifically, this research addresses the question of whether concern with the potential negative evaluations of others (i.e., perceived interpersonal attributions) plays a role in the decision of LL adults to seek help with reading problems.

The participants in this study included LL adults (who had sought the help of a literacy council), their reading tutors, and a control group comprised of adults with limited knowledge of literacy issues. All groups were asked to answer quantitative questions in order to examine their attributional style, their opinions about the way in which LL adults are viewed by others and the extent to which they believed that LL adults should keep their problems a secret. Tutors and learners were also asked to provide some qualitative data. Using a series of open-ended questions, learners were asked to identify the problems which contributed to their reading difficulties (i.e., intrapersonal attributions for their reading problems), as well as any concerns which may have influenced their decision to approach the literacy council for help. Similar but slightly modified questions were posed to the tutors.

Predictions

The hypotheses of this study can be summarised as follows:

1. It is hypothesised that there will be no differences between men and women in terms of their attributional style. However, it is predicted that learners (a stigmatized group) will demonstrate an attributional style which is less optimistic than either the tutors or the control group.
2. It is hypothesised that female learners will be more likely than males to make internal attributions for their literacy difficulties.
3. Attributions made by learners about reading difficulties will be correlated with general attributional style. Specifically, participants whose attributional style reflects a tendency to make external attributions for bad events will be more likely to make an external attribution for their reading problems (e. g., they missed a great deal of schooling due to illness) rather than an internal one (e. g., they are lazy).
4. It is hypothesised that while all three groups of participants will feel that LL adults are viewed negatively within society, learners will indicate more negative social perceptions of LL adults than will the tutors or the control group.
5. Learners will be more likely than the tutors or control group to endorse statements indicating a need for LL adults to keep reading difficulties a secret.

6. The fear negative evaluation will be positively correlated with the extent to which LL adults feel that others are making internal or dispositional attributions for their reading difficulties. It is hypothesised that this correlation will be positive both for both tutors and learners.
7. Learners will indicate that both interpersonal and intrapersonal attributions will be of some importance when making the decision to seek help. If LL adults feel that their need for assistance is either threatening to their self-image, or that it will be construed by others as a sign of incompetence or inferiority (internal attributions), then both of these types of attributions may be construed as barriers to participation.

CHAPTER II

Method

This project was carried out with the assistance of community-based literacy councils in Windsor, Leamington, Cambridge and Hamilton. Each of these literacy groups uses the Laubach Method for teaching adult learners the fundamental skills necessary to read and write independently. At each of these councils, the Laubach Method of teaching consists of having an adult learner work through each of four skill books with the assistance of a tutor who is trained in the Laubach method.

Between the councils, the cooperation of 26 adult learners (18 males and 8 females) was obtained. All of the adult learners spoke English as a first language. The ages of the learners ranged from 18 to 62 years (approximate mean age = 39.2 years). In addition, 26 literacy tutors (10 males and 16 females) agreed to take part in the study. Their ages ranged from 27 to 80 years (approximate mean age = 47.4 years).

Adult learners and tutors were recruited by coordinators at each of the four councils. Those individuals who indicated an interest in taking part were then telephoned by the researcher to set up a convenient time to meet.

At the beginning of the meeting, participants were informed as to what would occur during the interview and about issues of confidentiality (see Appendix A). Because many of the learners had reading and writing difficulties,

standard consent forms were not used for this group. Instead, participation in the study was taken as the indicator that consent had been granted. Standard consent forms were used with the tutors and members of the control group who agreed to participate (see Appendix B).

Learners and tutors were asked to complete two questionnaires (Parts One and Two) and a short interview (Part Three). Tutors filled out the two questionnaires on their own. For the learners, the questionnaires were read aloud and their answers were recorded on an answer sheet.

The first questionnaire consisted of a short measure of attributional style (see Appendix C). This attributional style index (Seligman, 1990) has three subscales designed to examine the degree of permanence (stability), pervasiveness (globality) and personalization (internal or external) of the attributions that an individual tends to make. Each of the three subscales consists of ten questions (total number of items = 30). Five of the ten questions assess attributions made for good events, while the other five assess attributions made for bad events.

The second questionnaire was a modified version of the Perceived Discrimination and Devaluation Scale (Link, 1987) (see Appendix D). This instrument consisted of two subsections:

- (a) Perceived Discrimination/Devaluation: This section was designed to examine participants' perceptions concerning the way that society views LL adults. It consists of 9 items. Four items (items 2, 3, 4 and 5) from this scale were used to create the Perceived Interpersonal Attribution scale,

which was intended to examine the extent to which participants believed that others make internal attributions about the reading difficulties of LL adults.

- (b) Items of Secrecy: This section was designed to measure the degree to which LL adults feel that they must keep their reading difficulties a secret. It consists of 4 items.

In Part Three (see Appendix E), tutors and learners were asked a series of open-ended questions. Parallel questions were asked of both groups, and (after permission had been granted) these interviews were tape-recorded for all participants. These questions were meant to address several issues; specifically:

- (a) Why do participants feel that so few LL adults take part in literacy initiatives? What are some of the concerns that these adults have when making the decision to seek help?
- (b) What type of attributions do participants make for the reading difficulties of LL adults? What type of attributions do participants believe that others would make if they knew about the reading difficulties of LL adults?

In order to assess the opinions of people who were not as familiar with literacy issues, data were also collected from a control group. This information was gathered at the Ontario Science Centre from 35 individuals (25 females and 10 males) who indicated a willingness to participate in the study, and who did not have any connection to a literacy program. The age range within the control

group was 18 to 82 years (approximate mean age = 39.3 years). Members of the control group completed the two questionnaires only, and did so in small groups.

CHAPTER III

Results

Seven dependent variables (DVs) were of interest in this study. Three were derived from the subscales of the attributional style index (Personalization, Permanence and Pervasiveness). Scores on each of these subscales ranged from -5 to +5.

The Perceived Discrimination and Devaluation Scale produced two scores based on its subscales (Perceived Discrimination/Devaluation (PDD), and Secrecy). Possible values ranged from 9 to 54 on the PDD scale and from 4 to 24 on the Secrecy scale. An additional score was derived from the PDD to measure perceived interpersonal attributions (PIA), or the extent to which participants felt that others would make internal attributions for the reading difficulties of LL adults. Possible scores ranged from 4 to 24.

Information concerning the seventh DV (Fear of Negative Evaluation -- FNE) was collected from tutors and learners only. These two groups were asked to rate on a visual Likert scale the extent to which LL adults would be fearful of being negatively evaluated by others as a result of seeking help with literacy problems (or, in the case the learners, the degree to which they *actually were* concerned about being negatively evaluated while making the decision to seek help).

Pearson product moment correlations indicated that there were significant correlations between some of the dependent variables (see Table 1) and, as a consequence, both multivariate and univariate tests were carried out in the analysis of the data.

Attributional Style Index Dependent Variables

A 2 x 3 multivariate analysis of variance was carried out on the total scores for the three dimensions of the attributional style index. The independent variables considered were group membership (learners, tutors and control) and gender (hypothesis 1).

Because of the small number of subjects and unequal cell sizes, Pillai's criterion (which is known to be more robust than other multivariate statistics) was used as the multivariate test of significance (Tabachnick & Fidell, 1989). In support of hypothesis 1, no differences were found between men and women on the combined DVs. The combined DVs were, however, found to be significantly affected by group membership only $F(6,124) = 3.36, p < .005$ (see Table 2). To assess the impact of this main effect on each of the individual DVs, the univariate tests were examined first. They indicated that group membership had a significant effect on the personalization dimension only. On this variable, learners were found to have the lowest scores, followed by the control group and the tutors.

While an examination of univariate tests following a significant multivariate test is an appropriate step, it has been noted that they must be interpreted with care, as they can be misleading for two reasons (Tabachnick & Fidell, 1989).

Table 1

Correlations Among Dependent Variables

Subscale	2	3	4	5	6	7
1. Perceived Devaluation/ Discrimination (PDD)	0.13 (n=85)	0.92 (n=85)	0.03 (n=73)	0.02 (n=75)	0.01 (n=73)	0.38* (n=36)
2. Secrecy	---	0.02 (n=86)	0.04 (n=74)	-0.10 (n=76)	0.02 (n=74)	0.16 (n=37)
3. Perceived Interpersonal Attributions (PIA)	---	---	0.05 (n=74)	-0.06 (n=76)	0.01 (n=74)	0.32* (n=37)
4. Personalization (PSN)	---	---	---	0.08 (n=72)	0.20* (n=73)	-0.15 (n=35)
5. Permanence (PMN)	---	---	---	---	-0.68** (n=73)	-0.17 (n=35)
6. Pervasiveness (PVN)	---	---	---	---	---	-0.07 (n=34)
7. Fear of Negative Evaluation (FNE)	---	---	---	---	---	---

* $p < .05$. ** $p < .001$

Table 2

Group Means for Variables of the attributional style index

Variable	<u>n</u>	<u>M</u>	<u>SD</u>
Personalization			
Learners	18	-0.39	1.65
Tutors	24	-2.13	1.60
Control	28	-2.00	1.61
Permanence			
Learners	18	0.44	1.69
Tutors	24	1.54	1.44
Control	28	0.89	1.55
Pervasiveness			
Learners	18	0.78	1.52
Tutors	24	0.38	1.69
Control	28	0.57	1.79

First, when DVs are correlated with one another, there will be some overlap in the behaviours which they measure. Thus, in saying that two DVs have "significant" univariate F values would indicate (incorrectly) that the IV is affecting two different behaviours. A second problem with examining only univariate tests is related to the inflation of Type I error which occurs when multiple tests are performed on correlated DVs.

A procedure which is therefore often advocated as a follow-up to significant multivariate tests is discriminant function analysis (DFA) (Borgen & Seling, 1978). DFA, in contrast to univariate tests of significance, facilitates an understanding of how the DVs can be combined with one another to create dimensions (discriminant functions) which will reliably separate groups. In many cases, data will have a structure which is best represented by multiple underlying dimensions. For each of these dimensions, it is possible to determine the importance of individual DVs in explaining group differences by examining the correlations between each DV and the scores on significant discriminant functions. These correlations form the discriminant structure matrix, and they show the relationship of each variable to the underlying discriminant dimensions.

A discriminant function analysis was therefore carried out in order to further examine the contributions of each DV to the group main effect. Only one discriminant function was found to be significant. Examination of the canonical correlations between the DVs and the discriminant function (discriminant structure) indicated that the personalization dimension of the scale was making

the most significant contribution towards explaining the differences between groups ($r = 0.75$), thus confirming the results of the univariate tests.

In order to further examine the main effect of group on the combined DVs, pairwise multiple comparisons were carried out to contrast each of the three groups. Hotelling's T^2 was the significance test used. In order to correct for the process of conducting multiple tests, a modified Bonferoni correction for the error rate was used (Huberty & Morris, 1989). The corrected level of significance was determined to be 0.017 using the following formula: For m tests, the alpha level for each test (α_1) is given by the overall alpha level (α_m) divided by m . In this case:

$$\begin{aligned}\alpha_1 &= 0.05 / 3 \\ &= 0.017\end{aligned}$$

It was found that learners' scores on the combined DVs were significantly higher than those of both the control ($T^2(3,42) = 13.32, p < .001$) group and the tutors ($T^2(3,38) = 19.02, p < .001$). Scores of the control group and the tutors did not differ significantly from one another ($T^2(3,48) = 1.21, ns$). The higher mean score of the learners indicates that, contrary to hypothesis 1, on the combined DV's of the attributional style index, learners have the most optimistic style of attribution (i. e., they tend to make internal attributions for good events and external attributions for bad events).

Interview data

Tutors' and learners' transcripts from the interviews were coded to examine two issues. First, learners' transcripts from the interviews were examined to assess the attributions made for their own reading difficulties. Reasons for literacy difficulties were coded by the researcher into broad categories based on thematic content (see Appendix F). All reasons which were given by the learners were coded, regardless of whether they came up in response to the question, or at some other time during the interview.

Secondly, transcripts were coded to examine tutors' and learners' beliefs about the barriers faced by LL adults when considering participation in literacy programs. Once again, answers were coded by the researcher into broad categories based on thematic content (see Appendix G). All concerns which were suggested were coded, regardless of whether they came up in response to the question, or at some other time during the interview.

One third of the transcripts were subsequently given to an independent second coder who was blind to the hypotheses of the study. Inter-rater reliability between the two judges was found to be 81%.

Personalization dimension of the attributional style index

Because of its relevance to some of the hypotheses of this study, the personalization dimension of the attributional style index was further analysed. In order to assess whether women were more likely than men to make internal attributions for their reading difficulties (hypothesis 2), learners' attributions (as

given during the interviews) were examined . The reasons given by the learners for their literacy difficulties were subsequently classified as being internal, external or both. As stated previously, it is internal attributions (whether they be intrapersonal or perceived interpersonal attributions) which are assumed to inhibit help-seeking. Because the present study was concerned with barriers to participation, it was of interest to know whether the adult learners viewed themselves as being responsible for their reading difficulties *in any way*. Thus, those learners who made both internal and external attributions for their reading difficulties were classified as having made internal attributions.

A 2 (gender) x 2 (internal vs. external attribution) classification table was produced in order to investigate the relationship between gender and attribution for reading difficulties among learners. As a result of the small N in this group and the fact that two of the four cells yielded expected values less than 5, Fisher's exact T statistic was used (Siegal & Castellan, 1988). Its nonsignificant value indicated that, contrary to hypothesis 2, there was no difference between male and female learners in the tendency to make internal attributions for their reading difficulties.

The personalization dimension of the attributional style index was also used to determine whether a general tendency by the learners to make external attributions for bad events was related to a tendency to make external attributions for their reading difficulties (hypothesis 3). Scores on the personalization dimension (for bad events only) were correlated with the attributions given for

their reading difficulties (internal vs. external). Because one of the variables of interest was continuous (personalization) and one dichotomous (attributions), a point biserial correlation was calculated. Its nonsignificant value indicated that a tendency toward making external attributions for bad events in general did not predict whether learners made an external attribution for something specific, such as their reading difficulties. Thus, hypothesis 3 was not supported by these findings.

Perceived Discrimination and Devaluation Dependent Variables

Principal axis factors extraction with varimax rotation was performed through SPSS/PC+ on the items comprising the Perceived Discrimination and Devaluation Scale in order to verify the existence of its two subscales (Perceived Discrimination/Devaluation (PDD) and Secrecy). The resulting analysis adequately demonstrated the existence of these two dimensions.

Because scores on these two scales were found to be uncorrelated with one another (see Table 1), separate 2 (gender) x 3 (group) analyses of variance were carried out on each of the two DVs.

Perceived Discrimination/Devaluation (PDD).

For the PDD subscale, a significant main effect for group was found $F(2,83) = 3.00, p = .05$. On this variable, group means demonstrated that learners had the lowest scores, followed by tutors and the control group (see Table 3). These findings indicate that, contrary to hypothesis 4, learners reported *lower*

Table 3

Group Means for Variables of the Perceived Discrimination and DevaluationScale

Variable	<u>n</u>	<u>M</u>	<u>SD</u>
Perceived Discrimination/ Devaluation (PDD)			
Learners	25	30.32	7.88
Tutors	25	33.52	7.48
Control	35	36.00	7.31
Secrecy			
Learners	26	12.16	4.37
Tutors	26	11.58	3.95
Control	35	12.86	3.81

levels of discrimination towards LL adults than both tutors and the control group. When multiple pairwise comparisons were carried out between the three groups (with a Bonferoni correction for the error rate), the only significant difference which emerged was between the learners and the control group $t(1,58) = -2.87, p < .007$.

Secrecy.

For the Secrecy subscale, no interactions or main effects were found to be significant. Although this finding does not support hypothesis 5, it is notable that the scores on this subscale were quite low for all three groups (see Table 2), indicating some disagreement with the idea that LL adults should try to hide their reading problems.

Perceived Interpersonal Attribution Scale (PIA).

Pearson product moment correlations were carried out to examine the relationship between tutors' and learners' scores on the PIA scale and their Fear of Negative Evaluation (FNE) Likert-scale responses (hypothesis 6). The correlations for the group of tutors alone was not significant ($r = 0.08, ns$). However, for the group of learners, there was a large correlation between their PIA and FNE scores ($r = 0.33, p < .03$). Thus, for the learners, the belief that society makes negative internal attributions about LL adults appears to be strongly linked with a fear of being negatively evaluated by others as a result of seeking help with reading problems. These findings, then, are in partial support of hypothesis 6.

In order to test hypothesis 7, it was necessary to examine the types of potential barriers to participation outlined by learners during the interviews. It was found that 71% of learners indicated that perceived interpersonal attributions played a role in inhibiting help-seeking behaviour among LL adults (i. e., a concern that others would evaluate them negatively). Forty-three percent of learners gave reasons linked to intrapersonal attributions as cause for concern when deciding whether to seek help with literacy difficulties (i. e., the belief that seeking help would be damaging to their self-image). These results seem to indicate that both types of attributions do in fact play a role in determining whether help will be sought, thus confirming hypothesis 7.

CHAPTER IV

Discussion

The groups which took part in this study represented three differing perspectives on the literacy issue. Analysis of the attributional style index indicated that one dimension upon which these groups may be differentiated relates to their attributional style. This dimension is characterised in particular by differences in personalization; that is, the tendency to view events as being caused either by environmental factors or by stable, internal factors. According to Seligman (1990), a high score on the personalization dimension of the ASI indicates an attributional style characterised by a tendency to make internal attributions for good events and to view bad events as the product of external circumstances. Seligman also indicates that people who possess such a style of attribution are more optimistic, and are likely to have a higher and more stable level of self-esteem.

It is interesting to note that the group of learners scored significantly higher on the ASI than either of the other two groups. This result is somewhat surprising given that, traditionally, members of stigmatized groups are believed to have low levels of self-esteem (Crocker & Major, 1989).

There are two plausible factors which may account for this finding. One explanation can be found in some of the emerging research on stigma (Crocker & Major, 1989). It has been proposed that members of stigmatized groups may use

a number of strategies to protect their self-concept, one of which is the tendency to devalue those dimensions on which their group fares poorly, while emphasising the dimensions on which they excel. While many of the learners interviewed indicated that education was important, several of them went on to say that even people who were highly educated possessed undesirable traits. For example, one man indicated that "...a lot of educated people I see are usually lazy, or they're into, like, alcoholic. They're washing themselves away, where I'm the opposite. I've got lots of endurance, like I can go".

In addition, a number of learners indicated that although their reading was poor, they had managed to learn other, highly-valued skills. One learner related such a story: "This guy comes up to me and he's a foreman and I went over to him and said, how do you run this? And there is exactly 50 buttons on this pole. And then there's 50 switches on a line, running from one end to the other. And the thing stops. And you gotta think, why did this thing...? Do you gotta pull this switch or this switch? It took me a half an hour and I was running it. And I had the carts running around in two minutes. You might miss that one skill, but I pick it up in other places".

A second reason which might explain the high levels of optimism and self-esteem among learners is related to the types of attributions that they themselves make for their reading difficulties. Low self-esteem is usually brought about when the intrapersonal attribution for the stigmatizing condition is an internal one. That is, if it is believed that the stigmatizing condition is the result of something

inherently bad about oneself, then self-esteem is seen to decrease (Crocker, Cornwell & Major, 1993).

However, if the stigmatizing condition is seen to be the result of situational factors outside of one's control, then self-esteem does not seem to be affected. The results of the present study offer some support for this theory. When the adult learners were asked about the reasons behind their reading difficulties, the majority of them (52%) made attributions which were solely external (e. g., they couldn't go to school regularly because they had to work to help support the family). A further 38% offered attributions which were comprised of both internal and external elements (e. g., they felt that they were slower than the average child and that things had been made even more difficult for them because the school system was unresponsive to their problems). Thus, because these LL adults seem to be making external attributions for their reading difficulties, lowered self-esteem would not be expected within this group.

It is noteworthy that, among the adult learners, there were no gender differences in the type of attributions made for reading difficulties. Traditionally, when gender differences have been apparent in achievement-related attributions, men are more often observed to make internal attributions for successes and external attributions for failures. The reverse has typically been true for women.

It has been postulated in self-perception studies (where male and female participants report their attributions for their own performance) that gender differences could be explained as a function of differential expectations for men

and women in achievement-oriented situations (Ross & Fletcher, 1985). Men have typically been found to have higher expectations of success, and expected outcomes are more often linked to stable, internal factors.

In the recent past, however, it has become clear that the traditional roles ascribed to men and women are indeed converging. Boundaries which once delineated acceptable roles for men and women have become increasingly blurred. The number of women in the work force has increased dramatically, while men have been taking on increased responsibilities in the home (Myers, 1990). As it is becoming increasingly acceptable for a woman to pursue traditionally male-dominated professions (e.g., medicine, politics), expectations of men and women in achievement-oriented situations are no longer as disparate as they once were.

Although gender differences in achievement-related attributions may have been apparent in the past, the results of the present study are perhaps the product of our slowly evolving views about gender roles. Alterations in societal norms may thus offer a plausible explanation for the absence of gender effects in the learners' attributions for reading difficulties.

An alternative explanation for this finding rests on the idea that, if there are differential expectations for men and women in achievement settings, there may be a lower boundary on those expectations. That is, it may be that the expectations for men and women differ for complex tasks, but not for skills such as reading which are considered by society to be very basic.

The results of the present study also indicated that the personalization subscale for bad events only (i. e., 5 of the 10 personalization items) was not correlated with actual attributions made for reading difficulties. The low predictive power of this scale could be due to the fact that adult learners do not view their reading difficulties as stigmatizing. This explanation, however, does not seem plausible given that, during the interviews, many of these individuals expressed some dissatisfaction with the fact that they could not read very well.

A more likely explanation for this finding relates to the nature of the items themselves. For the five items which comprise this scale, an undesirable event was described and participants were asked to choose from two potential causes. One choice represented an internal attribution while the other represented an external attribution. Unlike reading difficulties, however, the events described were not achievement-related. Moreover, none of the events were particularly grave in nature (e. g., You get lost driving to a friend's house; You and your partner have been fighting a great deal). Consequently, a decision that any of these events had occurred as a result of internal factors would have no serious impact on one's self-concept.

Making an attribution about reading difficulties, however, is quite different. Because of the value placed upon reading in our society, an admission that one cannot read as a result of something inherent in the self may have a negative effect on self-esteem. Thus it may be that if the severity of the events described in the scale mirrored more closely the seriousness with which society views an

inability to read, a stronger relationship between the two variables might have been found.

Results of the analyses carried out on the Secrecy scale indicated that, in general, all participants felt that LL adults should not keep their reading difficulties a secret. This finding, however, is interesting in light of the qualitative data collected in this study. During the interviews, many adult learners indicated that, while keeping reading difficulties a secret was not desirable in theory, many of them acknowledged that in practice they guarded the secret of their reading problems very carefully. As one learner phrased it, "I always tried to hide. I know...I think myself still it's the wrong thing to do. Though I do it. And sometimes in my own mind I say, I shouldn't hide. I'm honest in practically every other way but that one thing".

The reason for this discrepancy between beliefs and behaviour seems to be closely related to an incongruity between the attributions that the learners themselves make for their reading problems (i.e., their intrapersonal attributions) and the attributions that they feel other people might make if the secret concerning their reading were to become known (i.e., their perceived interpersonal attributions).

As previously discussed, the majority of learners made external attributions for their literacy difficulties. Tutors similarly tended to make external attributions for the reading problems of LL adults. However, scores on the PIA scale (which measures the belief that *others* will make internal attributions for reading

problems) were quite high ($x = 14.07$ for entire sample). Thus, although tutors and learners tend to acknowledge that there are many external factors which can contribute to a literacy problem, they also tend to endorse statements which indicated that most people would make an internal attribution for such troubles. This finding was articulated by one tutor who stated, "I think most people don't have all that good an attitude toward them. They think, oh, they're lazy or something, where in most cases it's not true. There's been something or other in their school life and either a physical or mental problem".

Given these findings, it is not surprising that, for the group of learners, the belief that other members of society make internal attributions about reading difficulties (as measured by the PLA scale) was strongly correlated with a fear of being negatively evaluated as a result of requesting help with literacy problems ($r = 0.44$, $p < 0.05$). This group clearly feels that society views them negatively as a result of their reading problems and is consequently concerned with the ramifications of coming forward and admitting that they need assistance. In fact, when asked what things concerned them the most about seeking help, 71% of learners indicated that they were concerned that they would be negatively evaluated by other people (see Appendix G). Once again, a similar pattern was seen with the tutors. When asked what sorts of concerns faced LL adults who were considering asking for assistance, 68% of them mentioned that these adults would likely be concerned with the potentially negative evaluations of others.

This general feeling was summed up by a learner, who, when asked if he had told many people about his reading problems replied, "No. I tend to hide it or lie sometimes even, because it's so embarrassing. You want...you feel...you already know the fact that how people look at you when you don't have an education. Like you're less of a person. So you want to hide it because you want to maintain a self esteem. It's like a coping mechanism you use to deal with the public out there".

Closely linked to these findings is the observation that the mean scores on the Perceived Devaluation/Discrimination subscale (PDD) were quite high for all three groups, indicating a strong endorsement of the idea that LL adults are devalued by the rest of society. In contrast to the hypotheses, however, it was the learners who perceived the lowest degree of discrimination toward LL adults, followed by the tutors and the control group.

It is possible that this finding may be the result of sampling considerations. It should be noted that the LL adults taking part in this study had already made the decision to seek help with their reading. Most of them had been involved with their tutors for a considerable length of time and held very positive feelings about the program. These adults had had the opportunity to reveal their reading problems in an environment where they were not devalued and this positive experience may have somewhat altered their views about how LL adults are treated within society generally.

Summary

Several interesting findings emerged from the present study and are deserving of further consideration. With respect to literacy issues, it may be valuable to pursue the somewhat surprising finding that the learners perceive a lesser amount of discrimination toward LL adults than do tutors or a control group. To this end, it may be informative to gather information from a larger number of adult learners who are in the early stages of the program, as well as adults who have not sought any help for their reading problems at all. It is possible that these LL adults (who have not had the same positive experience of working in an environment where there is negligible devaluation of LL adults), may perceive a greater degree of discrimination and devaluation than did the learners who took part in the present study.

With reference to the issue of help-seeking more generally, it would appear that at least two types of attributions may play an important role in determining whether assistance will be requested. The link which exists between intrapersonal attributions and help-seeking is well documented in the literature. The preceding discussion, however, underscores the importance of considering another type of attribution -- perceived interpersonal attributions -- in an effort to better understand and predict help-seeking behaviour.

It seems clear that, at least for LL adults making a decision about seeking assistance for reading difficulties, both types of attributions are of considerable importance. Making an internal attribution for one's own reading difficulty (an

intrapersonal attribution) may have a negative effect on one's self concept. For many people, seeking help is seen as equivalent to an admission of failure and may therefore be difficult to accept. However, the results of this study demonstrate that the attributions that help-seekers feel other people will make for their difficulty (perceived interpersonal attributions) can be equally powerful in determining whether they will request assistance. It would be interesting to discover whether or not these findings hold true for other stigmatized groups. For example, would perceived interpersonal attributions play a role in determining whether an alcoholic would seek treatment? Would they be important to someone who was trying to decide about going on welfare?

It seems clear that, if we wish to create programs which offer some form of aid to the disadvantaged, it is important to acknowledge that there are barriers which may interfere with help-seekers' desire to take advantage of the assistance which is available. The present study indicates that one potential impediment to the use of such services may be a concern with being negatively evaluated by others as a result of seeking help. Further research is needed, however, in order to establish the generalizability of this finding to other stigmatized groups, and to elucidate how such concerns may be dealt with effectively by program administrators and staff.

APPENDIX A

Interview Information for Participants

Hi. I just wanted to thank you for helping me out with this project. Basically, what I'm interested in finding out is how people feel about getting help with their reading from councils like this one in _____.

Now, there are two parts to this. In the first part, I'm just going to read you some sentences, and I'd like you to tell me how much you agree with them.

In the second part, I'm just going to ask you some questions and I'll ask you to just answer them as honestly as you can. Feel free to give examples of what you're saying as you're answering.

The whole thing generally takes about 15 to 20 minutes, depending on how much people have to say. I want to make it really clear that your name isn't going to go on anything, and nobody aside from me and the person who's helping me will ever see any of your answers. Basically, I'm not really interested in who says what; I'm interested in what the group has to say generally. When I'm finished, I'm just going to put all the answers together and look at the overall feelings that people have expressed. So, everything that you have to say will be totally confidential, and I'm not planning to identify you in any way.

I also wanted to point out that everything that I'm going to ask has to do with your opinion. Everyone has different feelings about things, so it's important to remember that there are no right or wrong answers. I just want you to answer as honestly as you can.

Do you have any questions about anything before we get started? Ok, keep in mind that you can stop me at any time if things don't seem clear, or if you have a question.

First of all, can you tell me what skill book you're working in right now/how long you've been tutoring for?

APPENDIX B

Consent Form

S# _____

CONSENT FORM

Research conducted by: Tanya Martini and
 Dr. S. Page
 Department of Psychology
 University of Windsor

This research is being conducted in order to better understand the issues which prevent adults from participating in community-based literacy programs. You will be asked to complete a short questionnaire which focuses on how society views adults who have difficulties with reading. Following this, you will be asked to answer some questions regarding illiteracy, and the problems faced by adults who have difficulties reading. All of your answers will be kept completely confidential. You will be asked if the interview can be tape recorded, but you are free to refuse this request. You may still participate even if you do not wish to be recorded. In total, your participation will involve approximately 30 minutes on one occasion only.

To confirm you consent to participate, please sign this form. This study has been cleared by the Department of Psychology Ethics Committee. Should you have any concerns about the study prior to or after signing this form, please feel free to contact any of the following persons:

Researcher:	Tanya Martini	253-2420
Supervisor:	Dr. Stewart Page	253-4232 ext. 2215
Ethics Committee:	Dr. Ron Frisch	253-2420 ext. 7012

I understand that I may ask any questions concerning the study prior to and after signing this form.

I understand that the information I provide will remain confidential, even though the results of the study may be published.

I understand that my participation is completely voluntary and that I have the right to withdraw from the study at any time.

I understand that I have the right to decline answering any question, if I wish.

Having read the above information carefully, I agree to participate in this study.

SIGNATURE

DATE

APPENDIX C
Attributional Style Index

Instructions:

Please read the description of each situation and vividly imagine it happening to you. Then select the choice (A or B) that you think would have been most likely to cause this situation to happen to you. Record your response on your score sheet under "Part I". You may find that you have not experienced some of these situations, but that doesn't matter. You may also find that neither response seems to fit; go ahead anyway and circle either A or B, choosing the cause which is most likely to apply to you. Please feel free to ask any questions as you go along.

1. The project you are in charge of is a great success.
 - A. I kept a close watch over everyone's work.
 - B. Everyone devoted a lot of time and energy to it.
2. You and your spouse (boyfriend/girlfriend) make up after a fight.
 - A. I forgave him/her.
 - B. I'm usually forgiving.
3. You get lost driving to a friend's house.
 - A. I missed a turn.
 - B. My friend gave me bad directions.
4. Your spouse (boyfriend/girlfriend) surprises you with a gift.
 - A. He/she just got a raise at work.
 - B. I took him/her out to a special dinner the night before.
5. You forget you spouse's (boyfriend's/girlfriend's) birthday.
 - A. I'm not good at remembering birthdays.
 - B. I was preoccupied with other things.
6. You get a flower from a secret admirer.
 - A. I am attractive to him/her.
 - B. I am a popular person.
7. You miss an important engagement.
 - A. Sometimes my memory fails me.
 - B. I sometimes forget to check my appointment book.
8. You host a successful dinner.
 - A. I was particularly charming that night.
 - B. I am a good host.
9. You stop a crime by calling the police.
 - A. A strange noise caught my attention.
 - B. I was alert that day.

10. You were extremely healthy all year.
 - A. Few people around me were sick, so I wasn't exposed.
 - B. I made sure I ate well and got enough rest.
11. Your stocks make you a lot of money.
 - A. My broker decided to take on something new
 - B. My broker is a top-notch investor.
12. You prepared a special meal for a friend and he/she barely touched the food.
 - A. I wasn't a good cook.
 - B. I made the meal in a rush.
13. Your car runs out of gas on a dark street late at night.
 - A. I didn't check to see how much gas was in the tank.
 - B. The gas gauge was broken.
14. You lose your temper with a friend.
 - A. He/she is always nagging me.
 - B. He/she was in a hostile mood.
15. You are penalized for not returning you income-tax forms on time.
 - A. I always put off doing my taxes.
 - B. I was lazy about getting my taxes done this year.
16. You ask a person out on a date and he/she says no.
 - A. I was a wreck that day.
 - B. I got tongue-tied when I asked him/her on the date.
17. You do exceptionally well in a job interview.
 - A. I felt extremely confident during the interview.
 - B. I interview well.
18. Your boss gives you too little time in which to finish a project, but you get it finished anyway.
 - A. I am good at my job.
 - B. I am an efficient person.
19. You've been feeling run-down lately.
 - A. I never get a chance to relax.
 - B. I was exceptionally busy this week.
20. You save a person from choking to death.
 - A. I know a technique to stop someone from choking.
 - B. I know what to do in crisis situations.

21. Your romantic partner wants to cool things off for a while.
A. I'm too self-centred.
B. I don't spend enough time with him/her.
22. A friend says something that hurts your feelings.
A. He/she always blurts things out without thinking of others.
B. My friend was in a bad mood and took it out on me.
23. A friend thanks you for helping him/her through a bad time.
A. I enjoy helping him/her through tough times.
B. I care about people.
24. Your doctor tells you that you are in good physical shape.
A. I make sure I exercise frequently.
B. I am very health-conscious.
25. Your spouse (boyfriend/girlfriend) takes you away for a romantic weekend.
A. He/she needed to get away for a few days.
B. He/she likes to explore new areas.
26. Your doctor tells you that you eat too much sugar.
A. I don't pay much attention to my diet.
B. You can't avoid sugar, it's in everything.
27. You and your spouse (boyfriend/girlfriend) have been fighting a great deal.
A. I have been feeling cranky and pressured lately.
B. He/she has been hostile lately.
28. You win the lottery.
A. It was pure chance.
B. I picked the right numbers.
29. You are in the hospital and few people come to visit.
A. I'm irritable when I am sick.
B. My friends are negligent about things like that.
30. They won't honour your credit card at a store.
A. I sometimes overestimate how much money I have.
B. I sometimes forget to pay my credit card bill.

APPENDIX D

Perceived Discrimination and Devaluation Scale

Instructions:

In this section, you will be asked about the way that adults with reading difficulties are viewed by others. It is important to remember that the adults we are referring to are Canadian-born adults whose first language is English, and who have generally spent some time in the Canadian school system. We are NOT referring to immigrants and refugees.

Please read each of the sentences in this section carefully. After reading them, decide how you feel about the sentence using the following descriptions:

- 1 -- The sentence is **VERY TRUE**
- 2 -- The sentence is **MODERATELY TRUE**
- 3 -- The sentence is **A LITTLE BIT TRUE**
- 4 -- The sentence is **A LITTLE BIT FALSE**
- 5 -- The sentence is **MODERATELY FALSE**
- 6 -- The sentence is **VERY FALSE**

Basically, the more you agree with the sentence, the smaller the number you would choose. Please record your choice (a number between 1 and 6) on the score sheet under "PART II". Again, please feel free to ask any questions as you go along.

Perceived Discrimination/ Devaluation subscale (PDD):

1. Most people would accept an adult who has difficulty reading as a close friend.
2. Most people would believe that an adult who has difficulty reading is just as intelligent as the average person.
3. Most people would believe that an adult who has difficulty reading is just as trustworthy as the average person.
4. Most people would feel that an adult's reading difficulties are a sign of personal failure.
5. Most people think less of an adult who has trouble reading.
6. Most employers will pass over the application of an adult who has difficulty reading in favour of another applicant.
7. Most people in my community would treat an adult who has difficulty reading just as they would treat anyone.
8. Most young women would be reluctant to date a man who had trouble reading.
9. If an adult has difficulty reading, most people will take their opinion less seriously.

Secrecy subscale:

10. In order to get a job, an adult who has difficulty reading would have to hide that fact from an employer.
11. There is no reason for an adult to hide the fact that they have trouble reading.
12. For an adult who has difficulty reading, the best thing to do is to keep their reading difficulty a secret.
13. If a close relative of mine had difficulty reading, I would advise him/her not to tell anyone about it.

****NOTE:** The Perceived Interpersonal Attribution subscale was composed of items 2, 3, 4 & 5.

APPENDIX E
Open-ended Questions

ASK IF IT'S OK TO TAPE RECORD

Open-ended questions -- LEARNERS

1. People have begun to notice recently that there are quite a few people who have troubles with reading and writing. Why do you think that is?
2. Can you tell me why it is that you had trouble learning to read?
(Intrapersonal attribution for problem)
3. What concerns did you have when you were making the decision about whether to come and get some help with your reading skills?
4. How do you think other people would feel about you if they found out that you had problems reading? How much of a concern was this for you when you were deciding about coming for help? (Fear of Negative Evaluation Likert-scale measure)
5. People have also noticed that very few people actually come in to get help from councils like the one in _____. Why do you think it is that so few people try to get help with their reading if they're having difficulties?

Open-ended questions -- TUTORS

1. People have begun to notice recently that there are quite a few people who have troubles with reading and writing. Why do you think that is?
2. Can you tell me why it is that your learner had trouble learning to read?
3. What sorts of concerns do you think people have when they are making the decision about whether to come and get some help with their reading skills?
4. Do you think that, for adults who have troubles reading, there is reason to be concerned about what other people would think if they found out about that adult's reading difficulties? How much of a concern do you think this is for adults who are deciding whether to seek help? (Fear of Negative Evaluation Likert-scale measure)
5. People have also noticed that very few people actually come in to get help from councils like the one in _____. Why do you think it is that so few people try to get help with their reading?

APPENDIX F

Coding Scheme -- Why Low Literate Adults Have Problems Reading

10 SCHOOL SYSTEM

- 11 TEACH ONE WAY; TEACH TO THE MIDDLE;
- 12 GO TOO FAST
- 13 TOO MANY KIDS IN ONE CLASS
- 14 TEACHERS DON'T CARE; CANT TEACH PROPERLY
- 15 PASS KIDS REGARDLESS OF ABILITY
- 16 DON'T EMPHASISE THE BASICS; NO PHONICS; NO 3 R'S; TOO MUCH FREEDOM; TOO MUCH EMPHASIS ON CREATIVITY; TOO MANY SCHOOL TRIPS

20 PERSONAL CIRCUMSTANCES KEPT THEM FROM SCHOOL; IMPEDED PROGRESS

- 21 ILLNESS/HEALTH PROBLEMS (PHYSICAL OR MENTAL)
- 22 EYESIGHT/HEARING
- 23 READING DISABILITY

30 FAMILY DIFFICULTIES/BACKGROUND KEPT THEM FROM SCHOOL; IMPEDED PROGRESS

- 31 RESPONSIBILITIES: ECONOMIC PROBLEMS; HAD TO GO OUT TO WORK OR CHILD CARE AND HOME RESPONSIBILITIES
- 32 NO SUPPORT FROM PARENTS; TWO PARENTS WORKING AND HAVE NO TIME; PARENTS DON'T CARE ABOUT CHILD'S SCHOOLING; PARENTS NEVER READ TO CHILD
- 33 FAMILY KEPT MOVING DURING SCHOOL YEARS

40 PERSONAL TRAITS

- 41 INTELLIGENCE; CHILD WAS SLOWER THAN MOST; DIDN'T PICK THINGS UP QUICKLY
- 43 UNMOTIVATED; UNINTERESTED; WOULD RATHER SPEND TIME WITH FRIENDS OR WORKING FOR MONEY; LAZY; DON'T BOTHER; "DIFFICULT" LEARNER; TEACHER COULDN'T HANDLE CHILD; CHILD DEALING WITH PEER PRESSURE

60 SOCIAL ISSUES

PEOPLE LAUGHED AT THEM; MADE THEM FEEL STUPID SO THEY GAVE UP; FELT LIKE THEY DIDN'T FIT IN

77 OTHER/MISCELLANEOUS

APPENDIX G

Coding Scheme -- Why Low Literate Adults Don't Seek Help

- 51 ASHAMED; EMBARRASSED; DON'T WANT ANYONE TO KNOW; DON'T WANT TO ADMIT IT; NEED TO HIDE IT
- 52 UNMOTIVATED; DON'T CARE; DON'T NEED TO; CAN GET BY WITHOUT IT; NOT WORTH IT; NO TANGIBLE BENEFIT
- 53 UNAWARE; NOT ENOUGH PUBLICITY
- 54 WORRIED ABOUT SUCCEEDING; FEAR OF FAILURE; LINK TO NEGATIVE EXPERIENCE AT SCHOOL; DISCOURAGED ATTITUDE "NO HOPE", "I CANT DO IT"
- 55 LOW ESTEEM; THEY FEEL STUPID; LIKE THEY'RE WORTH LESS; LIKE THEY'RE NOT AS GOOD AS EVERYONE ELSE; LIKE THEY'RE THE ONLY ONES WITH THE PROBLEM; LIKE THEY'RE A FAILURE
- 56 FEAR OF THE UNKNOWN; DON'T KNOW WHAT TO EXPECT; DON'T KNOW IF THE TUTORS WILL BE RESPONSIVE
- 57 LOGISTICS: NO TIME; NO CHILD CARE; GOVERNMENT RED TAPE INTERFERES; LITERACY AGENCY WONT TAKE THEM; TOO OLD; WILL TAKE TOO MUCH TIME
- 58 SOCIAL ISSUES: OTHER PEOPLE WILL THINK THEY'RE STUPID; WILL LOOK DOWN ON THEM; WILL THINK THEY'RE FAILURES; WILL STOP LIKING THEM; WILL RESPECT THEM LESS; STIGMA ATTACHED
- 59 TANGIBLE NEGATIVE CONSEQUENCES: JOB LOSS, DIVORCE
- 88 OTHER/MISCELLANEOUS

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VITA AUCTORIS

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