
Guidelines for Education and Training at the Doctoral and Postdoctoral Levels in Consulting Psychology/Organizational Consulting Psychology

American Psychological Association

Purpose of the Guidelines

The purpose of these “Guidelines for Education and Training at the Doctoral and Postdoctoral Levels in Consulting Psychology/Organizational Consulting Psychology” is to provide a common framework for use in the development, evaluation, and review of education and training in consulting psychology/organizational consulting psychology (CP/OCP). The intent of these guidelines is to improve the quality of teaching and learning in the area of the practice of CP, especially OCP, within the scientific discipline and profession of psychology.

Towards these ends, this document is intended as guidance for psychologists who teach or plan curricula for teaching CP/OCP at doctoral or postdoctoral levels of professional education and training in psychology. The guidelines are structured in the form of *overarching principles, general competencies, and domain-specific competencies* that are ideally obtained by persons receiving training at the doctoral or postdoctoral level in CP/OCP (see Figure 1).

Consulting psychology, a practice that focuses on consultation to, with, or for individuals and organizations at individual, group, and organizational/systemwide levels rooted in multiple areas of substantive expertise, is used here as defined in the 1999 Bylaws of the Society of Consulting Psychology (SCP), Division 13 of the American Psychological Association (APA):

Consulting psychology, for the purposes of these By-Laws, shall be defined as the function of applying and extending the special knowledge of a psychologist, through the process of consultation, to problems involving human behavior in various areas. A consulting psychologist shall be defined as a psychologist who provides specialized technical assistance to individuals or organizations in regard to the psychological aspects of their work. Such assistance is advisory in nature and the consultant has no direct responsibility for its acceptance. Consulting psychologists may have as clients individuals, institutions, agencies, corporations or other kinds of organizations. (www.div13.org/bylaws.aspx)

Also relevant to these guidelines is the general definition of psychological practice noted in the APA “Model Act for State Licensure of Psychologists” (APA, 1987) and the Association of State and Provincial Psychology Boards (ASPPB) “Model Act for Licensure of Psychologists” (ASPPB, 1992). *Practice of psychology* is defined (ASPPB, 1992, pp. 4–5) as

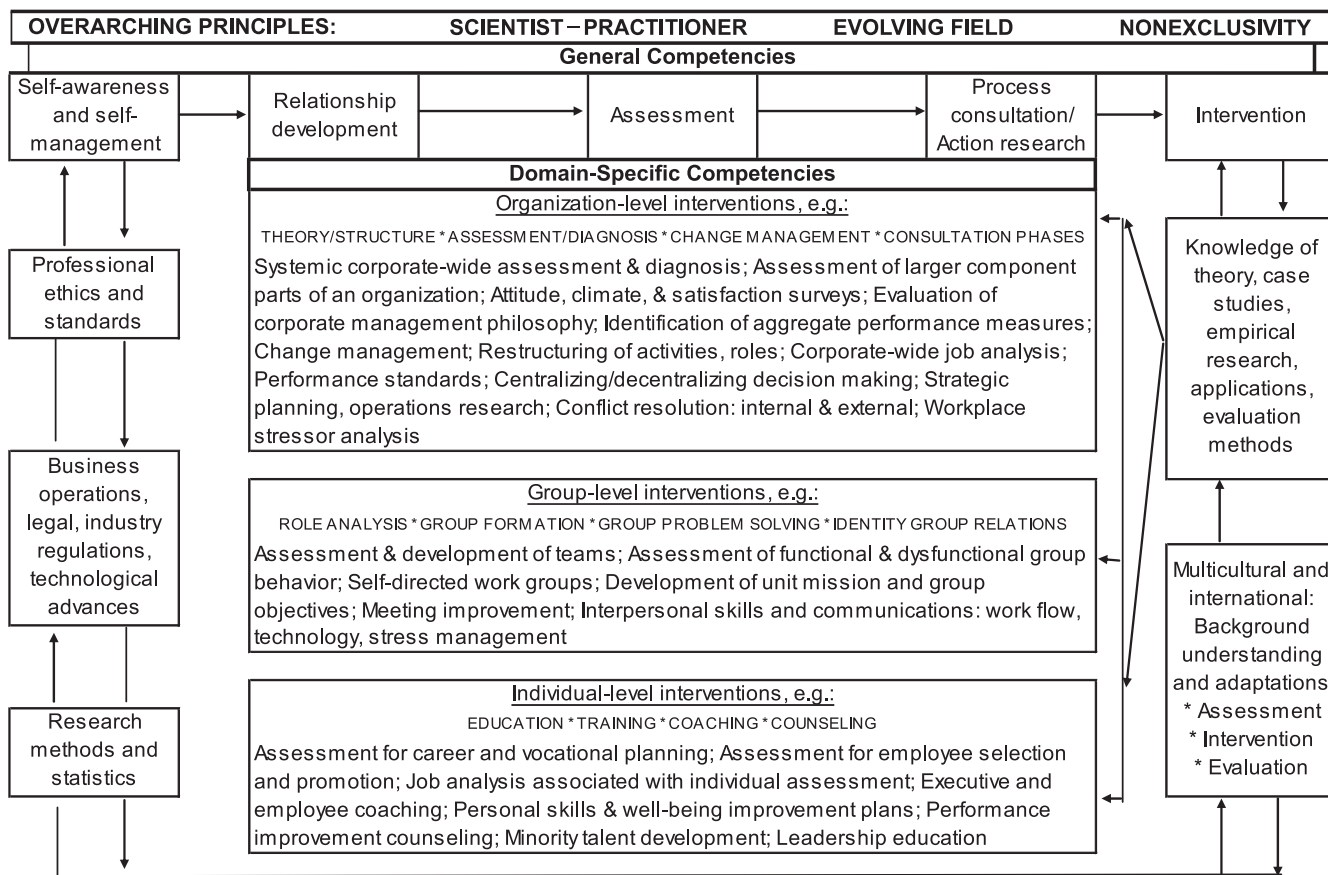
the observation, description, evaluation, interpretation, and/or modification of human behavior by the application of psychological principles, methods, or procedures, for the purpose of preventing or eliminating symptomatic, maladaptive, or undesired behavior and or enhancing interpersonal relationships, work and life adjustment, personal effectiveness, behavioral health and mental health. The practice of psychology includes, but is not limited to, psychological testing and the evaluation or assessment of personal characteristics, such as intelligence, personality, abilities, interests, aptitudes, and neuropsychological functioning; counseling, psychoanalysis, psychotherapy, hypnosis, biofeedback, and behavior analysis and therapy; diagnosis and treatment of mental and emotional disorder or disability, alcoholism and substance abuse, disorders of habit or conduct, as well as psychoeducational evaluation, therapy, remediation, and consultation. Psychological services may be rendered to individuals, families, groups, organizations, institutions and the public. The practice of psychology shall be construed within the meaning of this definition without regard to whether payment is received for services rendered [certain exemptions are noted, e.g., for teaching and research].

Authors of these revised Guidelines for Education and Training at the Doctoral and Postdoctoral Levels in Consulting Psychology/Organizational Consulting Psychology, which were adopted by the APA Council of Representatives in 2005, were Ann M. O’Roark, PhD (APA Division 13 Council Representative, 2004–2006, private practice consultant in management and leadership development, St. Augustine, FL); Paul J. Lloyd, PhD (APA Division 13 Council Representative, 1998–2003, Southeast Missouri State University); and Stewart Cooper, PhD (APA Division 13 Education and Training Committee chair, 2001–2004, Valparaiso University). Members of the Division 13 Guidelines Development Committee, 1997–2001, were Rodney L. Lowman, PhD (APA Division 13 Education and Training Committee chair; Alliant International University); Clayton Alderfer, PhD (Rutgers Graduate School of Applied and Professional Psychology); Michael Atella, PhD (Argonne National Laboratory, University of Chicago); Stewart Cooper, PhD (Valparaiso University); Andrew Garman, PhD (Rush University); David Hellkamp, PhD (Xavier University); Richard Kilburg, PhD (Johns Hopkins University); Paul Lloyd, PhD (Southeast Missouri State University); and Ann M. O’Roark, PhD (private practice consultant, St. Augustine, FL). The Education and Training Committee Chair (1994–1997) of the Preparations for Development was DeWayne Kurpius, PhD (Indiana University).

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Figure 1
 Overview of Consulting Psychology/Organizational Consulting Psychology Guidelines: General principles



Working Model and Assumption of the Principles

Areas of Training Addressed

This document proceeds from three overarching principles and 10 general areas of learning competencies, culminating in competencies specific to three domains or levels of organizational consulting psychology: *individual, group, and organization/systemwide/intersystem* (I-G-O). Although there are other applications of CP for which alternative or additional competencies may be relevant (e.g., health-related CP), the specific areas of expertise addressed in this document relate to CP as it is applied to organizational consulting psychology (OCP). These guidelines are not intended to replace, usurp, or conflict with training policies or principles that have been developed and approved for other areas of practice such as those in industrial/organizational, clinical, counseling, or school psychology.

These CP/OCP guidelines note that the effective practice of CP/OCP, ideally, draws simultaneously on general competencies applicable in every domain, for example:

recommended adherence to the scientist–practitioner model; recognition of the evolving nature of the field; acknowledging the multiple avenues for preparation for various roles as a consulting psychologist; encouraging self-awareness and self-management; relationship development; assessment competency; process consultation; interventions and methodological diversities required to meet contextual uniqueness; knowledge of theory, case studies, and empirical research; application of multicultural/international competencies; research methods and statistics; technological advances, business operations, industry regulations, and legal considerations; and advocating knowledge of and adherence to ethical and legal parameters.

Figure 1 provides an overview map of the CP/OCP Guidelines. These guidelines include three overarching principles, the assumptions and premises of the guidelines; ten general competency areas, the foundations common to applied psychology and included here to show the context of the OCP competencies; and three domains of specific competencies—Individual, Group, and Organizational & Systems [I-G-O], consolidated here to explicate competencies unique to OCP. The focus and task of this document is

to address the Domain-Specific I-G-O competencies uniquely relevant to organizational consulting psychology.

Overarching Principles

The overarching principles—(1) Scientist–Practitioner, (2) Evolving Field, and (3) Nonexclusivity—are the acknowledged assumptions and psychological context within which the OCP competencies are framed.

General Competencies

The 10 general competencies as detailed and promulgated by APA specialists in those topics show the psychological context within which the OCP competencies function: (1) Self-Awareness and Self-Management; (2) Relationship Development; (3) Assessment; (4) Process Consultation/Action Research; (5) Interventions; (6) Knowledge of Theory, Case Studies, Empirical Research, Applications, Evaluation Methods; (7) Multicultural and International Awareness, Knowledge of Sociopolitical Background and Cultural Values and Patterns; (8) Research Methods and Statistics; (9) Business Operations, Legal, Industry Regulations, Technological Advances; and (10) Professional Ethics and Standards.

Domain-Specific Competencies

These CP/OCP guidelines address attention to I-G-O competencies pertinent to the work of consulting: (1) Individual Level/Domain Interventions, (2) Group Level/Domain Interventions, and (3) Organization/Systems Level/Domain Interventions.

Overarching Principles

Scientist–Practitioner Assumptions

Consistent with the orientation of the SCP (Division 13 of APA), these guidelines assume that CP/OCP is guided by the *science* of psychology in evaluating and assessing the effectiveness of interventions and assessment methodologies used in the *practice* of OCP. The use of the term *interventions* here is consistent with the work of Dougherty (2000), who defined *interventions* as activities both the consultant and the client agree have a high probability for solving the problem at hand.

It is recommended that the consulting psychologist be competent to conduct and/or to evaluate and to utilize scientific-based research in the practice of CP/OCP. The effective consulting psychologist, ideally, has in-depth knowledge of the major theoretical models in psychology and of their particular methodologies and intervention strategies as they apply to individual, group, and organizational consulting domains. CP/OCP embraces a scientist–practitioner model (Baker & Benjamin, 2000; Stricker, 2000) of training, including training in traditional research skills (e.g., statistics, research design, test construction).

No single model of empirical research, however, is assumed to have a monopoly on truth by the endorsement of the scientist–practitioner model of consultation. CP/OCP trainees learn, for example, not just about research methodologies but also about the role of the consultant as an

active participant in the consulting process at hand (Lippitt & Lippitt, 1978). Action research, an assessment or study of the situation and problem undertaken by the consultant prior to the implementation of particular consultation services or interventions, is traced to Kurt Lewin (1951). An example of such practice in OCP is the joint consultant–client determination of an organization’s needs or critical problems and ideal outcomes, sometimes called *calibration consultation*, a process that is important when applying complex constructs to practical problems (Schein, 1985), especially in international or multicultural organizations (O’Roark, 2002).

Evolving Field

CP and OCP have evolved over time. The body of knowledge and methods of service delivery escalated in the past two decades, stimulated by the writings and publications of former SCP president Thomas Backer (1982a, 1982b). DeWayne Kurpius, who was the 1991 winner of SCP/APA Division 13’s award for lifetime achievement in consulting to organizations, prepared a consulting psychology reading list for a survey conducted while he was the Education and Training Committee chair for SCP (Robinson-Kurpius, Fuqua, Gibson, Kurpius, D., & Froehle, 1995). A 1999 SCP survey of “the best of the century” in consulting psychology reported the names of psychologists with the greatest influence on contemporary consulting psychologists, as well as listing 68 authors and 93 titles (O’Roark, 2007). The top-rated writings in APA Division 13’s millennium survey were similar to those in the earlier Kurpius survey: *Organizational Diagnosis* (Levinson, 1972); *Process Consultation* (Schein, 1969); *Intervention Theory and Methods* (Argyris, 1970); and *The Theory and Practice of Mental Health Consultation* (Caplan, 1970). Carl Rogers is cited six times. Three of these nominations are for his book *Freedom to Learn* (Rogers, 1969). Edgar Schein received four citations, two for his book *Organizational Culture and Leadership* (Schein, 1985, 1992) and two for *Process Consultation* (Schein, 1969). Other top-rated writings are those of Block (1981/1999), Caplan and Caplan (1993), Katz and Kahn (1978), Lippitt and Lippitt (1978), Senge (1990), and Tobias (1990).

OCP will continue to evolve and sometimes to use techniques that have received limited research investigation. The concern is to do so in an ethical manner. Standard 2.01(e) of the *Ethical Principles of Psychologists and Code of Conduct* (APA, 2002) was specifically written to provide guidance. It states,

(e) In those emerging areas in which generally recognized standards for preparatory training do not yet exist, psychologists nevertheless take reasonable steps to ensure the competence of their work and to protect clients/patients, students, supervisees, research participants, organizational clients, and others from harm. (p. 1064)

This standard is highlighted in regularly offered ethics workshops sponsored by SCP and is also attended to in articles published in the division’s two official publications, *Consulting Psychology: Practice and Research*, a

journal, and *The Consulting Psychologist*, the division newsletter.

Nonexclusivity

These CP/OCP guidelines recognize that there are appropriate ways other than doctoral training in CP/OCP to become proficient in the competencies here described. For example, applied research and practice in sports psychology, a field historically prominent in European psychology (Foster, 2002), and academic training applied in areas such as health psychology (Lloyd & Foster, 2006; Lloyd & Veneziano, 2002), industrial/organizational psychology (e.g., Society for Industrial and Organizational Psychology, 1998), and clinical or counseling psychology (Cooper, 2002) provide considerable training that is relevant for the practice of CP. These guidelines are intended to assist in the specific development of doctoral programs, postdoctoral training, and continuing education institutes/workshops in CP/OCP.

These CP/OCP guidelines and references have been prepared to reflect the current state and historical development of the OCP field, highlighting the contributions of SCP/APA Division 13 leaders, and to provide a conceptual framework for the development of training programs. It is expected that these CP/OCP guidelines will continue to change over time to keep pace with advances in research and practice.

General Competencies

These CP/OCP guidelines comprise sets of competencies needed for CP practice in work and organizational contexts. The document intentionally identifies *recommended competencies* (or “end states”) rather than presenting “model curricula” or specific course work since there are multiple ways to obtain the desired competencies. Indeed, innovation in doctoral and postdoctoral training methodologies for helping students achieve these competencies is encouraged.

Self-Awareness/Self-Management and Relationship Development

Two general competency areas, *self-awareness/self-management* and *relationship development*, are prerequisites for all areas of psychological practice. Graduate-level education, practicums, and internship work pertinent to these competencies ideally include close critiquing of personal value and belief systems as well as analysis of interpersonal exchanges with colleagues and clients. Self-Awareness and Relationship Development competencies apply in each of the I-G-O domains of consulting services. Psychologists learn how to build constructive, collaborative relationships with a variety of types of people and organizational representatives. They learn how to maintain both objectivity and personal engagement as they work with clients to further specific consultative goals.

Assessment

Assessment is considered to be not only a general competency but also a pivotal CP/OCP competency in all three

I-G-O consulting levels. It is given special attention here as a general competency to begin to highlight the aspects distinctive to OCP. Ryan and Zeran (1972) usefully defined assessment as (a) disciplined analysis of (b) a present situation that requires (c) determining what pertinent elements combine to (d) generate the current situation. Ideally, interactions among the pertinent elements can be synthesized into a new alignment that provides means for optimizing system outcomes.

Assessment competencies for organizational consulting can be depicted on dual continua: scientist–practitioner and theory to practice. While assessment approaches, methods, and instruments vary dramatically according to the I-G-O domain of focus and cultural context, skills to be developed in assessment, regardless of I-G-O focus, include identifying (observing, using logical deduction), integrating (classifying), and inferring (matching evidence to goals and assessment schemas) in order to assist in decision making, in implementing change, or in improving understanding (Barclay, 1991). Assessment, generically, is the systematic process of making inferences in order to arrive at a diagnosis for use in informed decision making regarding interventions. Special attention to and need for assessment in preparation to work with multicultural groups and international organizations is highlighted and defined in the calibration consultation model (O’Roark, 1995, 2007).

The pervasive aspect of competence (Standard 2 of the *Ethical Principles of Psychologists and Code of Conduct*, APA, 2002) in systematic, formal assessment across the three interactive domains (I-G-O) is recognized by representing psychological assessment as a general competency in these CP/OCP guidelines (see Figure 1).

Process Consultation/Action Research

Similarly, *process consultation* (Schein, 1965, 1969, 1985, 1987, 1999) is an important general competency and OCP competency in each I-G-O domain. Schein considered process consultation to be integral in a philosophy of helping that stands in contrast to medical (doctor/expert) consulting approaches. While he advocated never depriving a client (individual, group, or system) of one’s expertise, Schein (1989) detailed the value of starting in a process consultation mode, which means working from several basic assumptions:

clients . . . seek help when they do not know exactly what their problems are . . . the help they really need is in figuring out exactly what is wrong . . . most clients do not know what kinds of help are available and what kinds of help are relevant to their problems . . . many of the problems in human systems are such that clients . . . would benefit from participation in the process of making the diagnosis . . . only clients know what form of remedial intervention will really work because only they know what will fit their personalities and or group or organizational cultures. (p. 5)

Process consultation/action research is included in these CP/OCP guidelines as a general competency goal. Process skills contribute to a number of other competency areas and illustrate a hallmark expertise in OCP. Process skills are integral to organizational assessment and in most forms of intervention.

Other General Competency Areas

Other general competency areas are intervention; knowledge of theory and case studies; research methods and statistics; business operations (financial, legal, industry standards, technological advances); and professional ethics and standards.

Intervention, or activity that consultant and client agree will likely be effective in addressing the problem (Dougherty, 2000), refers to the psychological procedures and processes introduced into the organization. Standard, classical activities and innovations or variations fill volumes of “how to” books, such as the early University Associates publication of Pfeiffer and Jones’s (1975) series called *Structured Experiences for Human Relations Training*, now published as handbooks by Jossey-Bass.

Knowledge of theory and case studies serves as the substantive and applied scholarly foundation for engaging in OCP. Knowing the history, scope, and watershed applications of consulting psychology proves practically useful in preparing the consultant for designing interventions and for establishing credibility with organizational clients, who often read the management books that fill the airport shelves and enjoy telling their own versions of the good and the bad experiences with consultants.

Multicultural, international, gender, and life span competencies represent a learning area that cuts across the domain levels. Consulting psychologists acquire appropriate understanding of and sensitivity to multicultural/international issues as well as learning “identity group” (which is defined to include but not be limited to national heritage, age, occupational field, educational experience, race, ethnicity, culture, gender, sexual orientation, and disability status) consulting skills (Dana, 2001; House et al., 1999; O’Roark, 2002; Sue, Arredondo, & McDavis, 1992; Triandis, 1987).

While genuine, appropriate behavior is considered germane to effectiveness in every consulting venture, working with international clients and multicultural workgroups brings the U.S. consultant’s credibility and relevance under intensified scrutiny. The challenge for the organizational consultant is to temper interventions with consideration of the client’s *zeitgeist*, *ortgeist*, *weltanschauung*, and *erlebnistypus* (the “spirit” of the time, the “spirit” of the place/situation, the outlook on the world, and the client’s experience balance, respectively). The total of such dynamics is referred to as becoming “culture-centered” in the APA Multicultural Guidelines (APA, 2003).

In the interest of articulating a way of proactively addressing the “anticipated impact of the proposed guidelines (applying skills, techniques, and models included in these guidelines) on diverse individuals and groups” (APA, 2004a, p.10) with respect to corporate culture, gender, individual, and role differences, the published model for an international organizational consulting process is a variation on the *calibration consultation* model used for working in the United States with multicultural work groups, unique structural configurations, and employee subgroupings such as gender, first-language groups, payroll groups,

and union–nonunion employees. The process is adapted from the full-cycle “action research” process, which calls for the consultant to learn the organization’s culture before imposing an intervention. Calibration and *guanxi* (Chinese for instrumental relationship development) are terms that call attention to the need for the consultant to calibrate cultural dimensions and build relationships in the client organization before recommending any type of psychological intervention or organizational improvement activity (see the section of this document labeled III. Organizational/Systemic-Level Consulting Psychology Competencies).

Research methods and statistics competencies will not only enable the consultant to conduct surveys, interpret formal assessment data, and build empirical evidence of effectiveness of interventions but will provide a good beginning base for understanding business operating finances. OCP consultants who do not develop comfort and competence in reading organizational financial reports and budgets will be at a distinct disadvantage when competing with business administration management consultants or when coaching high-level executives.

Understanding business operations also means knowing legal constraints on competing for contracts, becoming familiar with industry-wide regulations such as the international standards established by the International Psychology Students Organization, and technological advances that have impacted the way businesses do business. Technology and the virtual workgroup will comprise a whole new chapter in the upcoming edition of the basic handbook/reference book on leadership (Bass, 1990).

Professional ethics and standards compliance is considered as a pervasive, general competency in the CP/OCP guidelines model. Knowledge of the psychologists’ code of ethics will permeate each of the three domains of interventions and is re-addressed in the concluding section of these CP/OCP guidelines, using a portion of a paper (Bradt, 2005) presented in one of the frequent SCP convention symposia dedicated to ethical issues. Particular references to the APA code of ethics are included in several sections of these guidelines, for example, Standard 2: Competence (General Competencies, *Assessment*, paragraph 3); Standard 4: Privacy and Confidentiality (I. Individual-Level Consulting Psychology Competencies, paragraph 7); and Standard 9: Assessment (I. Individual-Level Consulting Psychology Competencies, paragraphs 2 and 4).

Domain-Specific Competencies

Domain-specific competencies are organized into three broad domains of psychological expertise that are considered important in becoming competent as an organizational consulting psychologist: individual, group, and organizational/systems (I-G-O). This I-G-O model is primarily intended for organizing and conceptualizing purposes when thinking about curriculum design issues and continuing education programs; it is assumed that to some degree, competencies in each domain will interact with one another and that the effective practice of CP/OCP draws simultaneously on competencies relevant at each of the levels.

Although specific competencies do not always neatly fit within a single domain, grouping by focal categories of the organization levels serves as a useful organizing metric in thinking through the issues of how best to train people to become consulting psychologists. Within each of the three domains, a series of specific competencies is identified as having primary, but not exclusive, relevance to that intervention domain. Illustrative competencies, elaborated in subsequent sections, are listed here and include the following:

Primarily Individual-Level Core Competencies

- Individual assessment for purposes of career and vocational assessment
- Individual assessment for purposes of employee selection or development
- Job analysis and culture/diversity as found in race, ethnicity, gender (women/men), sexual orientation, disability status, socioeconomic status, national heritage, industry, education, job/role calibrations for purposes of individual assessment
- Executive and individual coaching
- Individual-level intervention for job and career-related problems
- Awareness of relevant ethical principles: i.e., confidentiality, culture-centered awareness/understanding/*guanxi* as they apply in the OCP context

Primarily Group-Level Core Competencies

- Assessment of functional and dysfunctional group behavior
- Assessment and development of teams with attention to diversity (here and after used to refer to the full range of diversity variables) considerations
- Creating group-level teams in organizations (e.g., self-directed work groups)
- Intergroup assessment and intervention
- Group boundary assessment and intervention
- Identity group (racial, gender, ethnic, age, nationality, sexual orientation, life span, disability groups, social prejudice, culture, religion, belief systems, organizational hierarchy role)

Primarily Organizational/Systemic-Level Core Competencies

- Organizational diagnosis including systemic assessment of the entire organization or large component parts of the organization and diversity cohorts within the organization's stakeholder groups
- Attitude, climate, and satisfaction surveys, including partitioned profiles representing work units, organizational-level groups, diversity/multicultural groups, and upfront/nonnegotiable announcements of ethical commitments, especially confidentiality
- Evaluation of corporate management philosophy, organizational culture, and nature of systemic stressors
- Workflow and project planning activities (e.g.,

Gantt charts, PERT (Program Evaluation Review Technique) charts, fishbone diagrams)

- Identification of aggregate performance measures, charting and plotting measures
- Assessment of organizational values and management practices and philosophy/policy
- Organizational-level interventions, collating data, partitioning data, intervention design
- Change management of organizational systems

In the following sections of this document, the core CP/OCP competencies are elaborated and illustrated. The competencies described here necessarily constitute an abbreviated listing of skills important in becoming a consulting psychologist.

I. Individual-Level Consulting Psychology Competencies

In the individual domain, consulting psychologists learn the skills for performing assessments and interventions centered on persons as separate entities in organizational and work contexts. It is recommended that consulting psychologists learn the knowledge, skills, and abilities required to assess and intervene with individuals in nonclinical work- and career-related contexts and how to differentiate between situations requiring assessment or intervention with abnormal psychological conditions and those with the more normal range of behavior.

A. Individual-Level Assessment

Doctoral-level consulting psychologists understand and learn to competently employ individual-level assessment methods and techniques appropriate for the types of problems and issues confronted by individuals in work, career, and organizational contexts. They become competent in psychometric issues in individual assessment and in procedures for conducting valid individual-level assessments and evaluations for purposes of career assessment, personnel selection, personal development, and in the context of determining appropriateness for, and specific needs of, coaching and counseling of persons in the work and career context. Such assessments are based on relevant evaluations using, as appropriate, psychological tests and other assessment procedures and include understanding of the legal and regulatory context in which individual assessments occur (*Ethical Principles of Psychologists and Code of Conduct*, Standard 9; APA, 2002).

The consulting psychologist learns to understand intrapsychic-level dynamics affecting observed individual behavior and can integrate this information into decision making regarding interventions appropriate for the client's situational context. CP individual-level assessment skills do not normally include assessment of abnormal personality or mental dysfunction except to the extent that the CP learns to recognize what impacts on work performance and, then, to differentiate persons whose individual needs may require a different type of intervention, such as a referral for a formal mental health evaluation or intervention.

Doctoral-level consulting psychologists learn individual-level assessment methodologies, including skills required for the administration and interpretation of a representative-level sample of relevant instruments and in providing feedback to individuals completing such measures (*Ethical Principles of Psychologists and Code of Conduct*, Standard 9; APA, 2002). These guidelines intentionally do not specify a list of assessment devices, procedures, or psychological tests (e.g., specific measures of occupational interests, abilities, and personality traits) in which consulting psychologists become competent, since any such list would quickly become outdated or irrelevant. It is advised that the consulting psychologist learn meta-skills in individual-level psychological test administration, interpretation, and feedback and experience administering, interpreting, and providing feedback with a sufficiently large number of scientifically sound instruments that new tests can quickly be mastered as they become available.

For competence in working at the individual level, the consulting psychologist learns to define relevant assessment questions, to choose appropriate instrumentation, to administer the relevant tests, and to provide feedback, both test results and pertinent behaviorally based feedback, to all relevant parties. Feedback includes helping the individual(s) assessed (and other relevant parties, such as third parties) understand the results and limitations of the assessment, helping to place the results in the appropriate organizational context, such as company culture and employee classifications and federal/state regulatory obligations (as represented in payroll categories, union membership, and safety requirements such as hard hats), addressing the affective aspects of such feedback, and helping identify relevant individual-situational (including, but not limited to interpersonal, identity groups, corporate purpose/values/structure/management practices) implications of the results of the assessment.

Thus, consulting psychologists learn to identify and put into a developmental and organizational context the strengths and limitations of each of several assessment methods: empirical methods (e.g., behavioral, content analysis), psychometric methods (cognition-learning, affect-behavior, conation-willing, i.e., integrative decision making), and more intuitive methods (projective and other). The history of the development of each methodology is supplemented with detailed exposure to preferred techniques, emphasizing the strengths and limitations that pertain to diagnostic outcomes specific to CP/OCP: classification for description, evaluation, placement; classification for performance competency; classification for consultant intervention, therapeutic recommendations, or referral for clinical treatment.

At the individual level, the consulting psychologist learns to understand and integrate the various components of psychological assessment (e.g., test results, behavioral observational data, relevant background and life history information) and to synthesize these data into pragmatically relevant results. The consulting psychologist is skilled in a range of individual-level assessment procedures (e.g., objective, projective, structured observation, ethnographic

field methods, interviews, ethical standards assuring privacy and confidentiality [*Ethical Principles of Psychologists and Code of Conduct*, Standard 4; APA, 2002]) and applies synthesis thinking to produce integrated results that are germane to the referral question(s) for which the assessment was undertaken.

B. Individual-Level Interventions

Consulting psychologists learn to implement a range of interventions that focus on the individual development level and are sensitive to life span perspectives and individual experiences. These interventions can be classified as educational, training, coaching, and counseling.

1. Educational. Consulting psychologists learn how to provide educational-based interventions for individuals. The goal of such activities would be to promote the acquisition and use of new knowledge by clients. The range and depth of such educational interventions will vary greatly and may incorporate various modalities including face-to-face and various telecommunications-based formats.

2. Training. Practitioners learn how to provide training interventions for individuals. The goals of such activities are to assist individuals in developing and strengthening skills relevant to the workplace. The range and types of skills applicable to jobs are enormous, and it is not expected that organizational consulting psychologists be able to demonstrate competency in all of them. However, practitioners are able to assess problems and design skill-building interventions that will help clients manage the challenges that they face.

3. Coaching. Practitioners learn how to provide competent, assessment-anchored coaching and other individual-level interventions. The goals of such activities include helping clients to improve their abilities to diagnose problems that they are confronting in the workplace; to change problematic attitudes, values, beliefs, and behaviors that may interfere with their performance; and to improve their skills, self-awareness, and self-efficacy in their work-related roles. Coaching may include education and training interventions as part of a package of activities that are usually negotiated and delivered to a client in the context of a formal agreement.

4. Counseling. Consulting psychologists learn to provide counseling interventions for individuals. The goal of such activities is to help individuals overcome internal psychological or behavioral barriers to the performance of their roles in the workplace. Although consulting psychologists are familiar with and able to apply an array of counseling theories and methods, they are not necessarily expected to be prepared to conduct long-term mental health treatment with clients for chronic or non-work-related conditions. Rather, consulting psychologists refer such clients to appropriately prepared colleagues when they believe that such care is necessary.

Foci for Individually Directed Interventions

CP/OCP training programs prepare practitioners to intervene with individuals in the workplace who may be en-

countering a wide variety of problems and issues. To be sure and inevitably, the academic and practice aspects of the programs will not be able to expose students to the full array of difficulties and challenges that clients may present to them once they leave school or when transitioning into CP/OCP. However, there are some foci for individual interventions that may be reasonable to include in curriculum and programs. These can include such specific applications as those named below.

Representative Individual-Oriented Consulting Competencies

- Career management
- Coaching on managerial roles and behaviors
- Fostering the development of leadership and followership behavior
- Technical roles in organizations
- Interpersonal relationships and psychosocial challenges, with analysis and accommodation of issues related to diversity (race, gender, values, sexual orientation, age, nationality) in organizations
- Intrapsychic aspects of work such as motivation, resistance to change, and emotional management
- Crisis management concerning individual behavior in organizations
- Individual performance in relationship to groups and organizations
- Role conflict management
- Assisting individuals to work effectively in globally oriented, culturally diverse organizations and within a multicultural work force (“Guidelines on Multicultural Education, Training, Research, Practice, and Organizational Change for Psychologists,” APA, 2003)
- Life span perspectives

Course work and practicum experiences in CP/OCP training programs integrate theory, research, technical skills and implementation methods, and approaches to evaluating individually based interventions. Consulting psychologists are, ideally, prepared to design, implement, and evaluate these approaches.

C. Self-Awareness, Self-Management, and Professional and Psychological Maturity

A general CP competency area is elaborated here since it addresses the OCP as an individual, and most individual-level assessment and intervention methods involve demonstration of certain personal characteristics. Graduate-level and postdoctoral training programs, which can include one-on-one supervision relevant for learning individual intervention skills, assist learners in developing the capacity for self-directed reflection. “Acknowledging the potential for the self to inadvertently cause harm to clients through acts of omission or commission, whether from ignorance or arrogant assumption, the international consultant takes time to hone the self-as-instrument” (O’Roark, 2002, p. 520).

This involves an ability to receive appropriate critical feedback from clients and colleagues and a willingness to

change behavior as needed (without violating essential ethics) to work effectively with individuals with diverse identity-group, organizational-culture, and social backgrounds in work-related contexts. It is recommended that organizational consulting psychologists have learning experiences that expose them to models and methods for accomplishing these tasks and demonstrate a reasonable ability to implement them. The capacity for developing self-awareness and self-management can be strengthened and deepened in a wide variety of ways. Curricular descriptions and policies of postdoctoral programs are suggested as ways to inform learners how the faculty assists with the achievement of professional and psychological maturity necessary for effective practice in the field.

II. Group-Level Consulting Psychology Competencies

Group-level OCP competencies take the group as the primary unit of analysis. The group-level frame of reference, however, does not pertain only to the interpersonal relations among members of task or cohort groups. Group domain competencies also address such phenomena as role analysis, leader–follower behavior, interpersonal conflict, workflow intergroup relations, diversity, authority dynamics, labor–management relations, and interorganizational relations.

Crucial propositions are the following: (1) Roles in organizations are shaped by group-level forces; (2) individuals in organizations function as representatives of their work group, whether or not they intend to do so; (3) dynamics of task groups cannot be adequately understood independently of the external relations/group-identifications of members of a work group; and (4) unconscious processes within individuals, within groups, and between groups affect individual roles, intragroup dynamics, intergroup relations, and interorganizational relations.

In doctoral and postdoctoral education programs in consulting psychology, psychologists learn how to carry out interventions with groups embedded in organizations. This education includes knowledge about (a) the self in relation to these phenomena, such as personal prejudice and bias, (b) relevant concepts and theories from social psychology, (c) specific and relevant case studies and statistical research results, and (d) social technologies appropriate to the work group. Effective intervention is associated with favorable confluence among all four of these elements. When knowledge and skills (competencies) related to any aspect are missing, or if all are not brought together in a congruous fashion, then additional OCP education is recommended.

The following sections elaborate specific types of group-level assessment and intervention approaches suggested as competencies for which an organizational consulting psychologist is trained: role analysis and renegotiation; group formation and development; group and intergroup problem solving; identity groups and intergroup relations; and group-level interventions.

A. Role Analysis and Renegotiation

The purpose of these activities is to enable individuals in roles within organizations to understand the forces that shape their roles and to take constructive initiatives to adjust those forces that cause dysfunctional consequences for themselves and/or the organization.

Consulting psychologists learn to establish their own roles in relation to their OCP work, know several versions of role theory (including those that take account of group-level processes), become familiar with the research on role dynamics in organizations, and gain competency in being able to diagnose barriers to effectiveness and then assist clients in analyzing and renegotiating their roles.

B. Group Formation and Development

Relevant OCP activities include facilitating group leaders and members to form a group, establishing productive relations between leader and members, developing constructive relations among peers within the team, and fashioning cooperative relations between the focal team and other groups, organizations, and stakeholders with whom the team must interact in order to perform effectively or achieve the group objective.

Consulting psychologists who provide this service learn to understand their own predispositions toward authority and group dynamics, gain working knowledge of theories of group and intergroup dynamics, become familiar with the empirical research on groups in organizations and the multicultural literature, and learn methods for diagnosing problems of the team, designing interventions to address those problems, and preparing the leader, team members and/or others who may be involved in implementing interventions. The organizational consulting psychologist gains competency in identifying both optimal, positive models of functioning and those that are dysfunctional and/or pathology driven.

C. Work Groups and Intergroup Problem Solving

The organizational consulting psychologist learns intervention skills that assist two or more identified groups with improving their relationship in order to carry out *interdependent work assignments* more effectively. Activities may be developed for operational groups (such as engineering and production or production and sales) that have different functions along a flow of work, between different hierarchical-level groups (such as between field units and headquarters), between entities attempting to merge, between labor and management groups, or between culturally diverse members of the work group.

Recommended competencies for organizational consulting psychologists who provide these services include learning to understand their own predispositions toward authority and intergroup relations (especially those that involve ethnocentric forms of conflict) in order to determine whether they can proceed to work alone or should invite one or more consultants representing different perspectives to assist in delivering the service. In situations

requiring a team of consultants, which may stem from self-insight, or simply the size of a project and the number of participating client-individuals, organizational consulting psychologists who work together are prepared to manage their relations with one another and in relation to the client in ways that enhance rather than diminish the quality of service.

D. Identity Groups and Intergroup Relations

Identity-group membership is defined in terms of birth and biology, including variables such as race, ethnicity, nationality, gender, family, generation, gender identity, disability, age, religion, social stigma, prejudice, and sexual orientation. The OCP goal of interventions is to eliminate group-level forces that result in members of some identity groups within organizations being treated unfairly by members of other identity groups on such matters as work assignments, salaries, and promotional opportunities. Interventions to alter unfairness among identity groups include educational activities that expand the knowledge and self-awareness of individuals and designing and recommending procedures that adjust distribution of authority and power among identity groups within organizations.

Competencies recommended for organizational consulting psychologists who provide these services include methods for assessing their own identities in relation to the client organizations where they provide services and learning strategies for working cooperatively with members of diverse identity groups to effect change (e.g., Whites with Blacks, women with men). They become knowledgeable about theory and research concerning the identity groups and cultures with which they interact. They adapt interventions appropriate to the conditions found in organizations and the diagnosed problems facing work groups.

E. Group-Level Interventions

Consulting psychologists learn to apply what they have learned about groups to address specific issues and problems within the organizational/systems context. Relevant competency areas include, for example, managing group conflict, enhancing group functioning so that it is better aligned with organizational objectives, assisting groups in creating conditions of social support to ameliorate the effects of organizational and occupational stress, and helping organizations design work groups that effectively bridge individual and organizational needs.

III. Organizational/Systemic-Level Consulting Psychology Competencies

This domain focuses either on interventions in which an entire organization is the targeted intervention level or in which the organization itself is integral in effecting changes to segments of the larger organization or system. In order for the organizational consulting psychologist to play useful roles in conducting organization-level interventions, recommended competencies include developing, managing, and interpreting surveys (such as organizational culture assessments and employee opinion/satisfaction polls);

designing and participating in the leadership of organizational strategic planning and change management programs; and conducting organization effectiveness/management development programs or research and evaluation functions. Competencies recommended in conjunction with this domain of intervention include those addressing organization theory and design; organizational assessment competencies and organizational diagnosis; organizational change; and the consultation process.

A. Organization Theory and Design: Organization Structures

Prior to practicing organization-level assessments and interventions, consulting psychologists learn about organizations, understand structures and systems for organizing work, and develop a solid theoretical foundation from which to make recommendations. Training in organizational theory, behavior, and design are the foundations from which interventions are designed. Relevant topic areas include organizational theory, both modern and historical (e.g., scientific management, the human relations movement, open systems theory, and organizational diagnostic theory); organizational structure and design (e.g., legal structures, centralization/decentralization, matrix configurations); organizational ecology (e.g., the effects of size, growth, market, and life cycle); organizational effectiveness (business planning, financial indicators, industry benchmarking); globalization (economic, social, and legal challenges, multilingual and multicultural issues); organizational diagnosis; and organizational culture and ethics.

B. Organizational Assessment Competencies: Organizational Diagnosis

The goal of organizational diagnosis is to develop an understanding of a system (purpose, where things are going well, where things are not going well) by its members by using the methods of applied behavioral science. The phases of organizational diagnosis include entry, data collection, analysis, and feedback.

Consulting psychologists who provide this service learn to develop a sound and feasible contract for doing the diagnosis and then how to carry out structured and unstructured observation, individual and group interviews, organic and standard questionnaires, and archival searches. Having obtained data from multiple sources and in various forms, they learn how to conduct appropriate qualitative and statistical analyses and to integrate the results.

The organizational consulting psychologist learns to present the findings from the organizational diagnosis, both orally in appropriately designed meetings and in writing. A full blown organizational diagnosis potentially addresses all of the foregoing areas of group-level inquiry (i.e., roles, teams, workflow, and identity groups) as well as organizational/systemic constructs. The requirements for proper preparation in each of those areas apply to organizational diagnosis as well. Conversely, methods used in organizational diagnosis are also, often, applied at the group and individual levels of interventions.

Developing expertise in organizational surveying and other assessment methodologies involves learning how to translate theory into applied practice. Skills to be mastered include systematic data collection efforts including survey design implementation and evaluation. In learning to design surveys, attention is paid to item design and item/survey evaluation. Practice in developing surveys, pilot testing them on representative samples, and evaluating these pilots can be covered through a combination of class projects and practicums. Expertise in general survey design topics might also be addressed, including the effects of factors such as survey length, methods of distribution (anonymity, paper-and-pencil vs. interactive voice response), and management (database theory and design, data security). In implementation of survey projects, skill in client definition (who is the key client, who comprises the client constituency to be surveyed) and learning to develop and negotiate clear, realistic contracts remain critical. Consulting psychologists also learn project skills, including managing a project from initial conceptualization to implementation and outcomes evaluation. As part of this process, consulting psychologists learn to consider such issues as incorporation of key stakeholders, development and execution of communication plans, formative and summative evaluations, and continuous quality and operational improvement of the process itself. Additionally, it is recommended that consideration and costing of alternative organizational assessment procedures be covered, helping students learn how to compare and contrast the costs and benefits of alternative strategies.

Evaluating diagnostic techniques includes learning to use statistics to examine reliability (test-retest and internal consistency) and validity (content, construct, criterion-related) of assessment devices. It is recommended that classical test methods, and item-based methods such as item response theory, be covered in conjunction with this work. It is advisable for the organizational consulting psychologist to learn a variety of diagnostic assessment methodologies, including those associated with the use of the psychologist him- or herself as an instrument for accurate organizational diagnosis.

C. Organizational Change

The organizational change domain focuses on working with organizations undergoing changes that are atypical for that organization in amount, quality, or both. A thorough understanding of client preferences concerning perceived change needs, organization design, and theories of organizational change (including drivers of both organizational inertia and organizational resilience) and an understanding of the characteristic psychological processes change evokes and of how to manage those reactions provide the foundation for effective intervention.

Organizational change approaches and theories of change necessarily incorporate knowledge and theories in the individual, group, and organizational domains, developmental theories, the organization's history, and change management theories and practice. Knowledge of workplace stressors and stress management techniques becomes

particularly useful during change interventions. Positive approaches (e.g., those based on positive psychology interventions, such as appreciative inquiry) are as important as those oriented to dysfunction.

D. Consultation Process Management

The OCP competencies listing will be an evolving set of recommendations that will likely continue to include knowledge and skill relevant for each consultation phase: contact and entry; contract formulation; problem identification and diagnostic analysis; goal setting and planning; action taking (intervention); and contract completion, continuity, and support. These service delivery and project management competencies are integral in brief as well as extended consultations. Additional education and training is important for those consulting psychologists who operate psychological consulting firms or departments within firms offering broader-range consulting services to businesses, industries, agencies, and organizations.

First and Last: Ethics

Recommendations for ethical competencies associated with the practice of OCP are associated with 10 questions that permeate every consultation, and the answers infuse the services provided. It is suggested that, in addition to familiarity with the APA Code of Ethics, dialogue with a mentor consultant and/or attendance at regular professional association gatherings enable an organizational consulting psychologist to keep ethical competencies fresh and active.

- Who is my client? The organization? The manager? The individual employee?
- What are the parameters of confidentiality in the client's expectation? Are they acceptable to me?
- Are the goals of the organization and consulting contract congruent with my personal and professional values and ethics?
- What rights, power, and freedom does each individual participant in the consultation process have? Are these acceptable to me?
- How do I balance the task dimension and the human dimension of my work with this organization?
- What control do I have over the use and dissemination of information I gather as a consultant?
- What are the parameters of my accountability? Are they acceptable to me?
- Do I have the skills to be an effective and efficient consultant to this organization and for this concern?
- How do I bridge the gap between maintaining the high standards of my profession and the profit motive that permeates consultation?
- How do I maintain objectivity and independence and avoid being used by one faction of the organization?

Ethical dilemmas for consulting psychologists in general and organizational consulting psychologists in particular were introduced into the most recent editing of the *APA Ethical Principles of Psychologists and Code of Con-*

duct (APA, 2002), and greater specificity and clarity are being developed. For example, the SCP Fellows Invited Address at the 2005 APA Convention (Bradt, 2005, pp. 1–2) spoke to these dilemmas:

Codes of ethics are most helpful when they are specific and unambiguous. Our APA code is very clear about some of the thou-shalt-nots, as in sex with clients/patients, and it is also quite straightforward about conflict of interest issues, e.g., the dual relationship pitfalls. But codes are less helpful addressing questions of how one should react when personal values clash with perceived values of the individual or organizational client.

Such questions may arise in two contexts. One involves decisions about whether to accept employment or contract work with an organization. The other involves questions of what to do if, in the course of providing service to a client, one discovers a profound difference in values.

Those engaged in organizational consulting psychology will face difficult and unexpected decisions when they encounter behaviors and philosophies within an organization that are repugnant to them personally. Former SCP President Kenneth Bradt suggested that while all professions have codes of ethics and while heavy legal requirements speak to some issues, individual decisions often come down to very personal value judgments of right and wrong. Those in the behavioral sciences and especially the helping professions may confront them more often, perhaps in part because they are attuned to the broader social implications of their work.

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