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Pepperdine University  
Graduate School of Education and Psychology

BEST PRACTICES IN ADDRESSING DIVERSITY IN CLINICAL SUPERVISION: A  
SURVEY OF EXPERIENCED SUPERVISORS

A clinical dissertation submitted in partial satisfaction  
of the requirements for the degree of  
Doctor of Psychology

by

Yeung Chan

September, 2019

Edward Shafranske, PhD - Dissertation Chairperson

This clinical dissertation, written by

Yeung Chan

under the guidance of a Faculty Committee and approved by its members, has been submitted to and accepted by the Graduate Faculty in partial fulfillment of the requirements for the degree of

DOCTOR OF PSYCHOLOGY

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## DEDICATION

To my family, who inspired me to never stop learning and supported me unconditionally.



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Finally, I want to thank my family members; none of this would have been possible without their love and support. They have been my biggest believers and have provided the encouragement and support I needed throughout my educational career as well as reminding me that there is life outside of graduate school.

## VITA

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Southern California Neuropsychological Group, Woodland Hills, CA <b>Adult &amp; Pediatric Neuropsychology &amp; Therapy, Extern</b>	July 2016 – June 2018
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Insight Collective, Pasadena, CA <b>Pediatric Neuropsychology &amp; Evidence-Based Interventions, Extern</b>	August 2015 – August 2016
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Asian Pacific Counseling and Treatment Center, Los Angeles, CA <b>Marriage and Family Therapist Intern</b>	September 2011 – June 2014
Exodus Recovery Inc., Culver City, CA <b>Practicum, MFT Trainee</b>	September 2010 – September 2011

**RESEARCH EXPERIENCE**


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Southern California Neuropsychological Group, Woodland Hills, CA <b>Research Assistant</b>	August 2016 – June 2018
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## ABSTRACT

The focus in this exploratory study was to investigate the opinions of licensed psychologists, who were experienced in clinical supervision, to obtain a list of specific supervisor behaviors and practices considered to be most important to address diversity in clinical supervision. Forty-four licensed psychologists completed the web-based questionnaire assessing opinions regarding the most important multicultural supervisory behaviors and practices. Results of the chi-square goodness-of-fit test indicated the frequencies of ratings were not equally distributed within this sample, indicating a level of consensus among survey participants. The results showed that when addressing multicultural and diversity issues in supervision, supervisors tend to take a more passive stance, which is contrary to recommended best practices in the multicultural supervision literature. Furthermore, results showed that supervisors' participation in continuing education regarding supervision and multicultural supervision was very limited. Implications for multicultural supervision practice and directions for future research are explored.

## **Introduction**

Clinical supervision is the foundational method used in mental health education and training programs to prepare students to provide effective psychological and counseling services. It encapsulates the essential and contractual relationship between a supervisor and a supervisee, as well as aids in students' own professional development and competent delivery of treatments to their clients (Falender & Shafranske, 2007). Clinical supervision is a continuous process that provides less skilled clinicians with ways to navigate new and challenging experiences based on others' knowledge, guidance, and expertise (Atkinson & Woods, 2007). Successful clinical supervision can facilitate supervisory alliance, enhance supervisee growth and independence, safeguard client welfare, and enhance both client and supervisee therapeutic outcomes (Falender, Shafranske, & Ofek 2014; Ladany, Mori, & Mehr, 2013).

The importance of incorporating diversity variables in clinical training and practice has led more recently to the development of culture-specific guidelines and standards (Dressel, Consoli, Kim, & Atkinson, 2007). Multiple studies have shown that when multicultural and diversity variables are addressed and attended to during supervision, supervisees report feeling considerably more satisfied with supervision, view supervisors as more sincere, experience a deeper working alliance with supervisors, and report their supervisors as more competent (Ancis & Marshall, 2010; Falender & Shafranske, 2014; Inman, 2006; Mori, Inman, & Caskie, 2009). According to Inman (2006), supervisors are ultimately responsible for promoting supervisees' multicultural competence by initiating and facilitating multicultural discussions in supervision. When supervisors fail to address and integrate cultural and diversity variables in the supervision process, supervisees may experience frustration and resistance and view their supervisors as culturally insensitive and incompetent (Hird, Cavalieri, Dulko, Felice, & Ho, 2001).

Over the last 30 years, authors and researchers have proposed many models of multicultural supervision that contributed to the conceptualization and understanding of this important field. However, very few existing models offer clear instructions for the application of the concepts through specific multicultural supervisory behaviors in supervision beyond simply introducing multiculturalism as a topic in supervision (Ober, Granello, & Henfield, 2009).

The purpose of this study was to obtain the opinions of licensed psychologists, who were experienced in clinical supervision, and to identify supervisor behaviors and practices considered to be most important to address diversity in clinical supervision. This list of behaviors could then be used to assess current multicultural supervisory practices, in multicultural supervision guidelines for supervisors, and in future studies to explore supervisory multicultural competence. The following presents a review of the major areas under investigation in this study.

## **Background**

This section provides an overview of the literature for the following topics: clinical supervision, diversity and multiculturalism in clinical supervision, multicultural competency in supervisors, multicultural clinical supervisory processes and framework, and limitations in the current multicultural supervision literature base.

### **Clinical Supervision**

Clinical supervision provides the foundation of training in health service psychology. It offers pre-degree students as well as postdegree/pre-licensed supervisees a learning experience to effectively integrate and apply knowledge, skills, and values in clinical practice (Bernard & Goodyear, 2014; Falender & Shafranske, 2004). Supervisors also are charged with the responsibility of monitoring the quality of professional service supervisees provide to clients. In other words, supervisors have an overall responsibility for the type and quality of treatment their supervisees are providing (Bernard & Goodyear, 2014; Watkins, 2012). In addition, supervisors serve as gatekeepers and ensure that only qualified trainees progress to licensing (Falender & Shafranske, 2004, 2017).

Clinical supervision is considered to be a crucial requirement for clinical training and program accreditation and has been recognized as a distinct professional specialty and practice (American Psychological Association [APA], 2010). Falender and Shafranske (2004) described clinical supervision as an exclusive interpersonal process that developed from science-informed practices. In addition, they noted that clinical supervision entails the facilitation of supervisees in their pursuit of knowledge and skills through instruction, demonstration, and mutual problem-solving.

Over the years, a considerable number of studies have been published regarding clinical supervision and its approaches, stages, components, and ethics (Barnett & Molzon, 2014; Goodyear, Lichtenberg, Bang, & Gragg, 2014); its value and merits (Falender & Shafranske, 2014); the nature of the supervisory relationship (Inman, 2006); the unavoidable conflicts and dilemmas (Safran, Muran, Stevens, & Rothman, 2007); its effectiveness in enhancing clinical work (Falender & Shafranske, 2014); and fostering attention to difference and diversity (Ancis & Ladany, 2010; Tsui, O'Donoghue, & Ng, 2014; Watkins, 2014).

Supervision is a continuous process that provides less skilled clinicians with ways to navigate new and challenging experiences based on others' knowledge, guidance, and expertise (Atkinson & Woods, 2007). Successful clinical supervision can facilitate the supervisory alliance, enhance supervisee growth and independence, safeguard client welfare, and enhance both client and supervisee therapeutic outcomes (Falender, Shafranske, & Ofek, 2014; Ladany et al., 2013).

The importance of the supervisory relationship is well-established in the empirical literature (Borders, 2014). According to Quek and Storm (2012), the supervisory relationship can facilitate the passing of knowledge, wisdom, insight, and experience from one professional generation to the next. Martínez and Holloway (1997) also noted that a positive supervisory relationship will provide the necessary environment to foster multicultural competence and help translate the supervisee's acquired theoretical knowledge into clinical practice.

In addition, the supervisory relationship can be viewed as a reciprocal educational process in which supervisors and supervisees learn about themselves and from each other (Ladany, Friedlander, & Nelson, 2005). Supervision can affect supervisees as well as clients. Bhat and Davis (2007) stated that supervision is a parallel process, as interactions from the

supervisory relationship can be repeated in the supervisee–client therapeutic relationship. Many researchers have suggested that when the supervisory relationship is based on safety, trust, understanding, support, and collaboration, the relationship will also be positively replicated in the supervisee–client relationship (Atkinson & Woods, 2007; Murphy & Wright, 2005). When attending to the supervisory relationship, experts and researchers have also recognized the need to address cultural variables in the supervisory process. Lassiter, Napolitano, Culbreth, and Ng (2008) recommended that existing supervision models be adapted to include a multicultural focus in supervision. Given the importance of clinical supervision, it is essential for supervisors to initiate discussions and practices that address multicultural variables in supervision (Soheilian, Inman, Klinger, Isenberg, & Kulp, 2014). Inman and DeBoer Kreider (2013) opined that one of the initial supervisory responsibilities is to help supervisees identify, understand, and clarify their own and their clients’ values and beliefs as well as how these beliefs are reflected across multiple social identities. Ancis and Marshall (2010) also noted that when supervisors encourage discussions of cultural issues in supervision, they enhance the supervisory relationship. In a related study, Toporek, Ortega-Villalobos, and Pope-Davis (2004) found that supervisees perceived an enhanced multicultural awareness after experiencing positive multicultural interactions with their supervisors.

### **Diversity and Multiculturalism in Clinical Supervision**

In the last 2 decades, the multicultural supervision literature not only has grown considerably, but also has contributed to an enhanced understanding about its practices (Ancis & Marshall, 2010; Falender, Shafranske, & Falicov, 2014; Soheilian et al., 2014; Watkins, 2014). However, multicultural supervision is still “one of the newest kids on the multicultural block and many of the emerging models and research findings are not yet clearly programmatic and



interrelated” (Inman & Ladany, 2014, p. 654). For some supervisors, there may be confusion about the meaning of multiculturalism or multicultural competence.

*Multiculturalism* is defined by the American Psychological Association as aspects of identity stemming from race, ethnicity, language, education, gender, religion and spiritual orientation, sexual orientation, disability, socioeconomic status, age, and any other cultural dimensions (APA, 2010). Integrating multicultural and attention to diversity is not optional in professional practice; rather, being able to address various diversity factors and provide feedback and training are considered to be important legal and ethical supervisor responsibilities (APA, 2014).

*Multicultural supervision* is defined as supervisory incidents where supervisors and supervisees consider and discuss a variety of cultural issues in their clinical understanding and practice with diverse clients (Ancis & Marshall, 2010). The ability to understand and address the influences of cultural as well as other aspects of identity in supervision have been regarded as essential components for supervisees to conduct ethical and effective practice with their clients (Ancis & Ladany, 2010). Diversity and multicultural practice in supervision includes paying attention to values and attitudes as well as an appreciation of many strands of identities of trainees and clients, involving race and ethnicity, gender and sex, social class and socioeconomic status, ability, religion and spirituality, immigration status, as well as age and generational experiences (Falender, Shafranske, & Falicov, 2014).

Many researchers have identified the following three widely accepted viewpoints as having high practical importance (Ancis & Ladany, 2010; Bernard & Goodyear, 2014). Effective multicultural supervision includes (a) establishing and maintaining a safe supervisory environment and a strong working alliance that functions as the foundational core of the

supervisor–supervisee relationship; (b) acknowledging that multiculturalism and diversity in supervision is an ongoing commitment to continually working toward awareness and knowledge enhancement; and (c) introducing and addressing multicultural issues throughout the entire supervisory process, making them consistent elements of the ongoing supervisory dialogue (Atkinson & Woods, 2007; Falender, Burnes, & Ellis, 2013; Wong, Wong, & Ishiyama, 2013).

According to Inman (2006), supervisors are ultimately responsible for promoting supervisees' multicultural competence by initiating and facilitating multicultural discussions in supervision. Many researchers believe it is impossible to conduct multicultural supervision if the supervisor does not have the ability to attend to issues of diversity and cultural identities in both the supervisory relationship as well as the supervisee's relationship with clients (Bernard & Goodyear, 2014; Falender et al., 2013). This means supervisors have to be willing to be proactive, to be willing to do some self-exploration, and to have courage to talk openly with supervisees about potentially uncomfortable issues (Garrett et al., 2001). "Supervisors should not wait for racial and cultural issues to come up during supervision, but rather supervisors should take initiative and raise these issues" (Gatmon et al., 2001, p. 109).

Numerous studies have been published on the components of successful versus unsuccessful, supportive versus unsupportive, and competent versus incompetent multicultural supervision (Falender et al., 2013; Falender, Shafranske, & Falicov, 2014; Inman et al., 2014). These studies all showed that culturally responsive supervisors demonstrate and appreciate the multicultural aspects of clients during case presentations and continually encourage supervisees' recognition and interest regarding the diversity variables of their clients. This appreciation, in turn, can create a stronger therapeutic alliance between the supervisee and the client (Burkard et al., 2006).

## **Multicultural Supervisory Framework and Processes**

The competency-based approach to clinical supervision provides a framework with which to understand complex issues of diversity variables and their interactions among supervisor, supervisee, and clients (Falender, Shafranske, & Falicov, 2014). Addressing diversity issues and challenges should always be acknowledged and be part of the ongoing conversations in clinical supervision.

A supervisor using a multicultural framework models openness, self-awareness, and the integration of values, beliefs, and biases in relation to culturally diverse clients and their social contexts (Falender, Shafranske, & Falicov, 2014). It can be said that all supervision is multicultural because culture incorporates the influences of issues such as gender, race, ethnicity, sexual orientation, religion and spirituality, and socioeconomic status on our assumptions, thoughts, and behaviors (Killian, 2001).

Ancis and Ladany (2001) proposed a framework for multicultural supervision competencies influenced by the APA guidelines for clinical training and codes of ethics. Ancis and Ladany's multicultural supervision guidelines were divided into five areas: (a) personal development, (b) conceptualization, (c) interventions, (d) process, and (e) evaluation. In the supervision literature, these domains have all been recognized as important for the personal and professional development of supervisors and supervisees as well as clinical techniques and interventions (Ancis & Marshall, 2010). The personal development domain consists of supervisor-focused personal development and supervisee-focused personal development. Supervisor-focused personal development refers to the process of self-awareness and knowledge of multicultural beliefs, biases, strengths, and limitations. This domain also involves supervisors' participation in related training, educational, and consultative multicultural experiences.

Supervisee-focused personal development refers to facilitating discussions and encouraging supervisee self-exploration, awareness, and understanding of one's cultural knowledge (Ancis & Ladany, 2001).

The conceptualization domain encourages consideration of the impact of personal and contextual factors on clients' lives and the examination of the impact of stereotyping and oppression on clients' perspectives and concerns. The interventions domain refers to supervisors encouraging consideration and flexibility regarding the use of interventions and alternative approaches that are culturally appropriate and relevant with diverse clients. The process domain encourages a supervisory alliance that conveys acceptance, respect, and support. This domain also refers to discussions of power dynamics in supervision and facilitating a climate in which diversity variables can be openly and safely discussed. Finally, the evaluation domain refers to the ethical responsibility of supervisors to identify and provide feedback regarding supervisees' multicultural strengths and weaknesses. Considering the various and interrelated demands of the supervisor's responsibilities, Ancis and Ladany (2001) mentioned the possibility of some overlap among the competencies identified across these five dimensions.

To summarize, a multicultural framework in supervision provides guidelines for supervisors to consciously integrate diversity variables and global perspectives in the supervisory process (Falender, Shafranske, & Falicov, 2014). The goal is to enhance the success of the working relationship between the supervisor and the supervisee as well as the therapeutic alliance between the supervisee and the client.

One of the most fundamental notions of effective clinical supervision is creating a collaborative supervisory interaction grounded in honest and constructive conversations. The responsibility of creating an environment where trainees can discover and share their values and

beliefs lies with the supervisor (Falender & Shafranske, 2014; Yabusaki, 2010). In this collaborative and supportive environment, trainees can feel safe to be vulnerable, reveal uncertainties, and to accept suggestions and feedback (Ancis & Marshall, 2010). It is worth noting that this type of relational safety does not refer to blind validation and emotional support, but to the development of critical thinking in a caring relational environment (Hernández & McDowell, 2010).

The current supervision literature shows that when supervisors attended to diversity and power issues in supervision, supervisees reported increased satisfaction with supervision (Gatmon et al., 2001; Inman, 2006; Murphy & Wright, 2005). Furthermore, supervisees reported a higher level of satisfaction with the supervision experiences when they viewed their supervisors to be competent in addressing and discussing diversity variables (Inman, 2006).

In a qualitative study of the experiences of supervisees in multicultural supervision, Hird et al. (2001) stated that supervisees reported that having discussions of cultural interactions in supervision had a great positive impact on supervisory alliance. Most importantly, racial identity interactions between the supervisors and supervisees not only influenced the supervisory alliance, but also the development of the supervisees' multicultural competence. The authors also stated that "multicultural supervision consists of the process of modeling, supporting, teaching, coaching and evaluating a supervisee's development" (p. 118). A multiculturally competent supervisor attempts to recognize the supervisee's understanding of "self in the world" and how the self can be validated, sustained, and used to conceptualize the supervisee's growth.

When supervisors fail to integrate cultural and diversity variables in the supervision process, supervisees may experience frustration and resistance and view their supervisors as culturally insensitive and incompetent (Burkard, Knox, Clarke, Phelps, & Inman, 2014; Hird et

al., 2001). In addition, not addressing multicultural issues in supervision can lead supervisees to feel misunderstood, miscommunicated, disconnected, dismissed, and ignored by their supervisors, which, in turn, makes the supervision process unsatisfying and negative (Burkard et al., 2006).

### **Multicultural Competence in Clinical Supervisors**

The APA's recent *Clinical Supervision Guidelines* (APA, 2015) and *Multicultural Guidelines* (APA, 2017) as well as current leading models of supervision all identified the importance of attending to diversity issues in the supervision process (Falender, 2018; Falender, Shafranske, & Falicov, 2014; Falender, Shafranske, & Ofek, 2014; Inman & Ladany, 2014; Tohidian & Quek, 2017; Westefeld, 2009). Domain B, Diversity, of the *Clinical Supervision Guidelines* (APA, 2015) highlighted many supervisory behaviors that are associated with multicultural competence in supervision. Supervisors should explore multicultural issues during supervision with supervisees, such as by placing focus on the diverse identities in the supervisory dyad in order to benefit supervisees and clients.

In recent years, there has been an increased number of articles and studies focused on conducting culturally competent and effective supervision (Borders, 2014; Falender et al., 2013; Falender, Shafranske, & Falicov, 2014; Falender, Shafranske, & Ofek, 2014; Hernández & McDowell, 2010; Tohidian & Quek, 2017; Watkins, 2014). Over the past few decades, multicultural competence in therapy also received heightened attention in the mental health literature (Ancis & Marshall, 2010; Clauss-Ehlers, Chiriboga, Hunter, Roysurcar, & Tummala-Narra, 2019; Inman & DeBoer Kreider, 2013; Watkins, 2014).

Ancis and Marshall (2010) defined *cultural competence* as having an awareness of one's own cultural beliefs and biases, understanding the personal and cultural worldviews of diverse

clients, and being committed to developing ways to appropriately work with client of diverse cultural background. Researchers have also suggested that supervisor self-disclosure, self-awareness, genuine attention, and support and non-defensive feedback can contribute to a culturally responsive supervisory relationship (Bernard & Goodyear, 2014; Christiansen et al., 2011; Falender & Shafranske, 2017; Inman & Ladany, 2014; Tohidian & Quek, 2017).

Through the examination of the literature available on various dimensions of providing multiculturally competent supervision, common themes can be identified. Overall, the literature supports the supervisor as the key to inviting multiculturalism into the supervisory discussion and instigating active dialogues regarding diversity and differences (Falender, 2018; Falender, Shafranske, & Ofek, 2014; Fouad & Chavez-Korell, 2014; Furr & Brown-Rice, 2016; Phillips, Parent, Dozier & Jackson, 2017; Trimble & King, 2014). In order to accomplish this, the supervisor need to embody a certain degree of openness, self-disclosure, and self-awareness regarding his or her own identity development related to multicultural factors as well as foster an environment of safety and self-exploration within the supervisory relationship (Bernard & Goodyear, 2014; Clauss-Ehlers et al., 2019; Falender & Shafranske, 2017; Tohidian & Quek, 2017). This can be done via the creation of clear goals and expectations of supervision (Falender, Shafranske, & Falicov, 2014).

Furthermore, the creation of clear boundaries and expectations of supervision may also counteract the fear of repudiation can prevent supervisees from bringing issues of multiculturalism into the supervision (Sue, Rivera, Capodilupo, Lin, & Torino, 2010). The client will be better served and all aspects of the client's identity will be considered when supervisory issues related to diversity and culture are further addressed. Increased self-awareness and self-

exploration will not only be beneficial to the treatment of clients, but also to supervisors and supervisees both personally and professionally.

### **Limitations and Gaps in Multicultural Supervision Literature**

Through the process of examining the current literature regarding multicultural competence in clinical supervision, it is evident that the existing knowledge and literature must be further expanded to fully address all aspects of multiculturalism within clinical practice and supervision. Although there is readily available literature on conceptual theories and models of multicultural supervision, there is a relative lack of literature that addressed the various aspects of the actual implementation of multicultural supervision through the use of specific practices and techniques.

Literature on multicultural psychotherapy and competence has flourished since the 1990s but is still in its early stages (Ladany, 2014). The literature on multicultural supervision has also flourished but few authors reviewed and discussed best practices in teaching about the supervision process (Bernard & Luke, 2015; Ladany, 2014). In fact, a content analysis of the last 10 years of published supervision articles in counseling revealed that even articles that were identified as training articles only contained descriptions of supervision processes and not the teaching and actual practice of these processes (Bernard & Luke, 2015). This is an indication that currently there is an imbalance in the focus of literature where scholarly opinions regarding multicultural supervision are outpacing studies that focus on the actual implementation and practices of clinical multicultural supervision (Falender & Shafranske, 2017). Leaders in the field of multicultural supervision continue to call for the studies of supervision techniques of initiating and maintaining discussion of multicultural issues in supervision (Falender et al., 2013; Falender, Shafranske, & Ofek, 2014; Gatmon et al., 2001; Inman & Ladany, 2014).



Supervisors continue to face the challenges of addressing, facilitating, and integrating multicultural issues in supervision. These challenges encountered by supervisors can be the result of multiculturally incorrect perceptions of supervision and psychotherapy by minimizing or ignoring multicultural issues (Ancis & Ladany, 2010; Inman, 2006; Ladany, 2014).

Furthermore, researchers and theorists speculate that difficulties in supervision related to multicultural issues often occur because many experienced supervisors may have entered the mental health field before the emergence of the multicultural movement in psychology and therefore do not know how to address issues of race and culture in the therapy or supervision process (Jernigan, Green, Helms, Perez-Gualdrón, & Henze, 2010). As a result, there is a significant need for multicultural supervision training among supervisors in order to promote effective supervision and help ensure supervisees' competency in providing services to clients.

Over the last 30 years, authors and researchers have proposed many models of multicultural supervision that contributed to the conceptualization and understanding of this important field. However, very few existing models offer clear instructions for the application of the concepts through specific multicultural supervisory behaviors in supervision beyond simply introducing multiculturalism as a topic in supervision (Bernard & Luke, 2015; Ober et al., 2009). In addition, the current existing research is limited in terms of the qualities and sources through which supervisors gain multicultural competencies and researchers have noted the importance for supervisors to obtain training and education on multicultural supervision as studies have shown there is a low frequency of discussions related to cultural variables during supervision that are initiated by supervisors (Falender, 2018; Falender & Shafranske, 2017; Fukuyama, 1994; Gatmon et al., 2001; Phillips et al., 2017; Priest, 1994).

As such, there is a need to explore and identify whether there are any specific multicultural supervisory practices and behaviors in clinical supervision that are commonly considered to be most important by experienced supervisors. Furthermore, multicultural supervisory behaviors that are identified by experienced supervisors can be compared to those recommended as best practices based on the current literature to examine the differences between the current recommended standards in multicultural supervision and the actual implementation of these standards in actual practice at active training sites.

### **Purpose of Study and Research Question**

The purpose of this exploratory study was to invite experienced supervisors at active training sites to rate and categorize a list of specific supervisor behaviors that best demonstrate multicultural supervision competence and address diversity in clinical supervision as well as to determine whether there was consensus among the participants. This categorized list of behaviors can then be used to assess current multicultural supervisory practices at training sites compared to the recommendations of current literature, as possible multicultural supervision guidelines for supervisors, and in future studies to explore supervisory multicultural competence and actual implementations of multicultural supervisory practices at active training sites.

Using quantitative data and descriptive and frequency analyses, this study was designed to investigate the most important multicultural supervisory practices as recommended by experienced supervisors in multicultural psychology through the use of a survey. The research questions for this study were:

1. What are the best practices in addressing diversity in clinical supervision as recommended by experienced supervisors?

2. Are there any discrepancies between the best practices recommended by experienced supervisors and suggested by current literature publications?

## **Method**

### **Research Approach and Design**

This study involved the use of a survey approach to assess participants' opinions regarding effective multicultural supervision practices. Specifically, the use of an Internet-based instrument provided for relatively expedited, straightforward, and cost-effective recruitment and survey administration (Hoonakker & Carayon, 2009). In addition, the study procedures reflected several recommendations for enhancing recruitment and participation in web-based survey studies (Hoonakker & Carayon, 2009). Descriptive and frequency distribution approaches to data analysis were used to investigate the best practices to address diversity issues in clinical supervision as recommended by survey participants.

### **Participants**

Participants recruited for this study were licensed psychologists who were currently supervising trainees or interns or had provided supervision previously. They were required to have at least 5 years of supervision experience and to have supervised at least 10 supervisees. Participants were recruited from several sources: (a) members of the APA Division 45, (b) members of the Association of Black Psychologists, (c) members of the Asian APA, (d) members of the National Latina/o Psychological Association, and (e) university and college counseling center directors. Participants were also asked to forward recruitment announcement email to other licensed psychologists who would be interested in participating in the study.

For the purpose of this study, "experienced supervisors" were defined as licensed psychologists who were highly experienced in multicultural psychology and supervision based on years of experience working in settings that served a diverse population (at least 5 years of post-doctoral supervision experience) and the number of supervisees supervised (at least 10

supervisees). Those who met the selection criteria were selected based on the information included in the demographic questionnaire given at the beginning of the survey.

A total of 122 licensed psychologists responded to the recruitment announcement and email by completing the consent for this study; however, 60 individuals consented but did not complete the survey and were therefore excluded from data analysis. Overall, 62 licensed psychologists participated and completed the survey study. Of the 62 participants, 18 participants were excluded as a result of not meeting the selection criteria of having at least 5 years of postdoctoral supervision experience and having supervised at least 10 supervisees, resulting in a final sample of 44.

**General characteristics of participants.** Detailed demographic characteristics of the 44 participants are displayed in Table 1. Participants ranged in age from 34 to 66 years ( $M = 49.2$ ,  $SD = 8.11$ ). The range of years of licensure was from 5 to 36 years ( $M = 15.16$ ,  $SD = 7.26$ ). Of the 44 participants, 30 (68.18%) were female and 14 (31.82%) were male. With regard to racial/ethnic identification, 68.18% of the participants identified as Caucasian/White, 9.09% as African American/Black, 9.09% as Latinx, 6.82% as bi-racial or multiracial, 4.54% as Asian, and 2.27% as Iranian. With regard to sexual orientation, 84.09% identified as heterosexual, 4.54% as lesbian, 4.54% as pansexual, 2.27% as gay, 2.27% as gay or queer, and 2.27% did not report their sexual orientation. In terms of primary theoretical orientation, 25% described their orientation as integrative or eclectic, 20.45% as cognitive, 15.91% as psychodynamic or relational, 9.09% as humanistic, 4.54% as cognitive-behavioral, 4.54% as feminist, 4.54% as multicultural, 2.27% as behavioral, 2.27% as existential, 2.27% as interpersonal (IPT), 2.27% as neuropsychotherapy, 2.27% as postmodern constructive, 2.27% as relational or cultural, and 2.27% as systems or family systems. With regard to most recent work, training, or teaching site,

52.27% were in a university counseling center, 18.18% were in a veteran affairs medical center, 9.09% were in multiple sites, 6.82% were in private practice, 4.54% were in medical school, 2.27% were in an armed forces medical center, 2.27% were in child or adolescent psychiatric or pediatrics, 2.27% were in community mental health, and 2.27% were in a state funded non-profit agency or regional center. Finally, 86.36% of the participants reported not being an APA Division 45 member, 11.36% reported being a member of APA Division 45, and 2.27% did not respond.

### **Supervision and supervision training experience characteristics of participants.**

Detailed supervision and supervision training experience characteristics of the 44 participants are displayed in Table 2. A total of 90.91% of the participants were currently providing supervision and 9.09% were not currently supervising. Years of supervision experience ranged from 5 to 36 years ( $M = 14.11$ ,  $SD = 6.43$ ). The number of supervisees they supervised in the last 10 years ranged from 10 to 200 ( $M = 36.5$ ,  $SD = 31.96$ ). The current weekly number of supervisees they supervised was reported to be from 0 to 13 ( $M = 3.98$ ,  $SD = 3.25$ ). The number of weekly hours that participants spent on direct supervision ranged from 0 to 10 hours ( $M = 3.77$ ,  $SD = 2.01$ ). The number of weekly hours spent on indirect supervision ranged from 0 to 20 hours ( $M = 4$ ,  $SD = 4.39$ ). With regard to number of supervision workshops or trainings attended during the last 2 licensure cycles, the range was from 0 to 10 ( $M = 3.09$ ,  $SD = 2.48$ ). The number of multicultural supervision workshops or trainings attended during the last two licensure cycles ranged from 0 to 5 ( $M = 1.32$ ,  $SD = 1.33$ ). In terms of the number of supervision books or articles read during the last two licensure cycles, participants' reports ranged from 0 to 50 ( $M = 5.75$ ,  $SD = 8.6$ ) and the number of multicultural supervision books or articles read during the last two licensure cycles ranged from 0 to 15 ( $M = 3.43$ ,  $SD = 4.14$ ). A total of 54.55% of the participants did not take a

graduate course in clinical supervision and 45.45% did. Of the participants, 88.65% took a graduate course in culture or diversity and 11.36% did not. Finally, 72.73% of the participants received supervision of supervision and 27.27% did not.

### **Instrumentation**

The web-based survey instrument included a Demographic Questionnaire and the Multicultural Supervisory Behaviors and Practices form (see Appendices B-C).

**Demographic questionnaire.** The Demographic Questionnaire was developed for the purpose of collecting information regarding demographics of study participants (e.g., age, gender, ethnicity, supervision setting, supervision experience, theoretical orientation) by participant self-report. This measure consisted of free response and force-choice items. The Demographic Questionnaire can be found in Appendix C.

**Multicultural supervisory behaviors and practices form.** The Multicultural Supervisory Behaviors and Practices (MSBP) form was developed for the purpose of this investigation to assess the best supervisory behaviors and practices in addressing diversity issues in clinical supervision. The MSBP consists of 20 specific supervisory behaviors and practices that facilitate discussions of diversity issues and cultivate multicultural competence in clinical supervision (e.g., “articulating a commitment to develop multicultural competence by discussing expectations within the first two supervision sessions” and “addressing feelings of discomfort experienced by trainees concerning multicultural issue”). During the first part of the survey, participants were asked to rate each behavior into one of two categories based on its importance on addressing diversity issues in clinical supervision (1 was *more important* and 2 was *less important*). The participants were also instructed to only include 10 specific behaviors in each category. During the second part of the survey, participants were asked again to rate the 10

behaviors they rated as *more important* in the first part into one of two categories based on their importance on addressing diversity issues in clinical supervision (1 was *most important* and 2 was *moderately important*). The participants were also instructed to only include five specific behaviors in each category. Items on the MSBP form were specifically selected and developed based on successful multicultural supervisory behaviors identified in current literature. Each behavior or practice was carefully worded to be action-focused as well as to be observable/measurable. The MSBP can be found in Appendix B.

Respondents were provided the following instructions in Part I:

On the following page, there are 20 specific multicultural supervisory behaviors. As you read through the behaviors, please rate the behaviors into one of two categories (1 *more important* and 2 *less important*) based on its importance on addressing diversity issues in clinical supervision. Please ONLY include 10 behaviors in EACH category.

Respondents were provided the following instructions in Part II:

On the following page, there are 10 specific multicultural supervisory behaviors that you have just rated as *more important*. As you read through the behaviors again, please rate the behaviors into one of two categories (1 *most important* and 2 *moderately important*) based on its importance on addressing diversity issues in clinical supervision. Please ONLY include 5 behaviors in EACH category.

The MSBP form was developed based on an extensive review of the literature on competency-based supervision practices, effective and ineffective supervisory behaviors, supervision processes and outcomes, cross-cultural and multicultural supervision, power and diversity in supervision, and cultural responsiveness in clinical supervision. Based on the literature review (see Ancis & Marshall, 2010; Burkard et al., 2006; Dressel et al., 2007; Duan & Roehlke, 2001; Estrada, Frame, & Williams, 2004; Foo & Rodolfa, 2013; Fukuyama, 1994; Garrett et al., 2001; Gatmon et al., 2001; Green & Dekkers, 2010; Hernández, Taylor, & McDowell, 2009; Hird, Tao, & Gloria, 2005; Jernigan et al., 2010; Kaduvettoor et al., 2009;



Ladany et al., 2013; Magnuson, Wilcoxon, & Norem, 2000; Murphy-Shigematsu, 2010; Ryde, 2000; Taylor, Hernández, Deri, Rankin, & Siegel, 2007; Toporek et al., 2004; Wong et al., 2013), the researcher initially compiled an inventory of 82 behaviors or practices but later narrowed the list down for redundancies and identified 20 supervisor-specific behaviors or practices that have the most importance in addressing diversity issues in clinical supervision. Each behavior or practice was carefully worded to be action-focused as well as observable or measurable for the purpose of this study.

A majority of the items in the MSBP form are similar to the top 20 elements of successful multicultural supervision developed based on a 2007 study published by Dressel et al.. In their study, university counseling center supervisors with significant experience in multicultural supervision generated and ranked elements of successful and unsuccessful multicultural supervision using the Delphi method. The Delphi method is widely used in the counseling field as a relevant process to achieve consensus among knowledgeable respondents (e.g., Dimmitt, Carey, & McGannon, 2005; Doerries & Foster, 2005; Norcross, Hedges, & Prochaska, 2002). In the Delphi method, researchers gather a panel of knowledgeable participants, typically through a nomination process that identifies individuals considered experienced in the area being surveyed. The panel is surveyed repeatedly (in several rounds) to arrive at a consensus opinion on a topic of interest (Dalkey, Rourke, Lewis, & Snyder, 1972).

### **Procedures**

Data collection occurred through the use of a web-based survey instrument designed specifically for this study that contained two primary components of (a) participant demographics and (b) multicultural supervisory behaviors and practices.

**Recruitment.** Recruitment of study participants occurred following study approval by Pepperdine University's Institutional Review Board (IRB). Following final IRB approval, recruitment opened for a period of 2 months. Initial invitations were sent via email with one follow-up reminder after approximately 3 weeks. In order to make the study available to as many potential participants identified above, recruitment occurred via three main approaches. First, the managers of the listservs of the specific psychological associations identified were contacted via email and asked to post a recruitment announcement containing invitation for study participation on the listserv websites. Second, invitations for study participation were sent via emails acquired through an online search of individuals who self-identified as members of the specific psychological associations. Third, these announcements invited recipients to forward the survey to any individuals who were eligible for study participation. This type of snowball sampling method allowed participants who may not have received the invitation from the first two recruitment methods to access the survey and participate in the study. One drawback of using this recruitment method is that participants may receive an invitation to participate more than once and will have the opportunity to participate more than once. However, the web-based program housing the survey only allowed each computer IP address to access the survey once, although the IP addresses were not recorded or stored to protect participant anonymity.

Recruitment materials are included in Appendices D through G.

**Protection of human subjects.** The study proposal was submitted to Pepperdine University's Graduate and Professional Schools IRB to ensure the protection of participants. The investigator sought expedited IRB review and approval as the study posed no greater than minimal risk to participants. Risk was reduced by not collecting identifying information from participants and through the use of hypothetical supervision experiences as opposed to asking

about participants' personal experiences. In addition, the hypothetical supervision experiences comprised multicultural supervisory behaviors of which the participants were aware because these behaviors are required competencies in multicultural supervision (Borders, 2104; Soheilian et al., 2014; Watkins, 2014). Potential participants were informed of the purpose of the study, study procedures, estimated participation time, protection of confidentiality, and potential risks and benefits associated with participation. They were advised that participation was strictly voluntary and that they may refuse to answer questions or discontinue the study at any time.

**Consent for participation.** Because risk to participants was minimized in this study by not collecting identifying information, the investigator applied for a Waiver of Documentation of Informed Consent from the IRB. Instead, the invitation for research participation and survey included a statement of informed consent and stated that the participants were confirming their consent by completing the survey and were asked to check the confirmation box prior to beginning the survey. The informed consent statement included the aforementioned information related to the study, including the purpose, procedures, the rights of human research subjects, and the potential risks and benefits associated with study participation.

**Potential risks and benefits.** This study was thought to pose no more than minimal risk to participants. Risks included inconvenience as a result of time spent participating in the study (approximately 15 minutes), fatigue, and the potential for distressing reactions in response to survey items. The risk of distressing emotional reactions was minimized in this study through the use of hypothetical supervision experiences. Risk for this study was also minimized by attempting to make the administration as convenient as possible, through not collecting any identifying information regarding participants, and through suggesting that participants seek assistance to deal with any distress related to participation. Participants were provided the name

and contact information of the researcher and the project advisor, and advised to seek help in the event the study procedure results in distress. No participants contacted the researcher reporting adverse events over the course of this study.

Participants might not have directly benefited from study participation. However, it was believed that this study would provide information related to effective multicultural supervision that may help future psychology trainees and supervisors. Potential benefits included the opportunity to reflect on their multicultural supervisory behaviors and practices with their supervisees.

**Data collection.** Data were collected via a web-based survey to recruit participants nationwide, eliminating geographic restrictions and reducing costs. The data collection window for the current study was January 16, 2019 through March 21, 2019. Surveys administered through email and the Internet generally have a shorter response time and better response quality compared to postal mail surveys and also show similar response rates (52% versus 51%) to postal mail surveys (Hoonakker & Carayon, 2009). The use of the Internet to recruit and administer the study survey presented advantages for potential participants, as it was relatively quicker to participate, convenient to access the survey at anytime and from any location for the duration of data collection, and protected the confidentiality of participants. These factors potentially contributed to higher response rate and presumably honest reporting by participants (Hoonakker & Carayon, 2009).

In addition, collecting raw data online reduced the time and cost associated with manual data entry as well as prevented human error associated with manual data entry. An online service, Qualtrics, was used for housing the study questionnaires and protecting participant anonymity by not obtaining information about IP addresses accessing the website. The use of an

online survey service also enabled the data to be converted to a digital database that facilitated data analyses. The data will be stored on a password-protected external computer drive for 5 years and will then be destroyed by the investigator.

**Data analysis.** Prior to analyzing the data collected, the raw data were examined for missing information and errors and a determination was made regarding final data inclusion in the analysis. The final dataset was converted from the web-based survey to data analysis software and analyzed through a combination of descriptive statistics and frequency analyses. Descriptive statistics were used to report the categorical and continuous variables of participant demographics as well as supervision and supervision training experience (See Tables 1 & 2). Chi-Square goodness of fit test was used to compare and report the observed sample distribution with the expected probability distribution of the multicultural supervisory behaviors that were rated by study participants as most important (See Table 3).

## Results

The purpose of this exploratory study was to invite licensed psychologists who were experienced in the field of multicultural psychology and supervision to rate and categorize a list of specific supervisor behaviors and practices that are most important in demonstrating multicultural supervision competence and addressing diversity in clinical supervision. A total of 44 completed surveys were used in data analyses. A chi-square goodness-of-fit test was used to compare the observed sample frequency distribution with the expected probability distribution of the multicultural supervisory behaviors and practices that were rated by study participants as most important. Results of the goodness-of-fit test indicated the frequencies of multicultural supervisory behaviors and practices that were rated as most important were not equally distributed within this sample; these frequencies were statistically different from what would be expected by chance (See Table 3).

It appears the following multicultural supervisory behaviors and practices were regarded as having the highest level of importance (See Table 3):

- Creating a safe (nonjudgmental, supportive) environment for the discussion of multicultural issues, values, and ideas through the use of verbal and nonverbal communication
- Addressing feelings of discomfort experienced by trainees concerning multicultural issues
- Inviting supervisee to explore and discuss the possible existence of personal cultural biases and prejudices in the conceptualization and practice with clients
- Acknowledging and discussing realities of racism and oppression during supervision

- Providing supervisees with a multiculturally diverse caseload to ensure breadth of clinical experience
- Acknowledging and discussing power issues in supervision that may be related to racial or ethnic multicultural differences
- Modeling for supervisees by initiating, attending to, and demonstrating interest and respect for clients' intersecting identities and culture during case conceptualization and discussion

It appears the following multicultural supervisory behaviors and practices were regarded as having the lowest level of importance (See Table 4):

- Encouraging supervisees to share, within supervision, their personal and professional cultural backgrounds and experiences
- Consulting colleagues willingly about one's own reactions to racial or ethnic concerns as a result of any supervision experience
- Acknowledging, discussing, and providing affirming statements that demonstrate respect for racial or ethnic multicultural similarities and differences between the self and supervisee, and discussing feelings concerning these similarities or differences
- Self-disclosing own development of self-awareness about cultural and ethnic identity, biases, and limitations
- Providing recommended multicultural readings and related training experiences to supervisee

## **Discussion**

The focus in this study was to explore whether certain multicultural supervisor behaviors and practices in demonstrating multicultural supervision competence and addressing diversity in clinical supervision are commonly considered to be the most important by licensed psychologists who are experienced in the field of multicultural psychology and supervision. Results showed a number of multicultural supervisory behaviors and practices were commonly regarded as having the highest level of importance by study participants. The major finding of this study indicated that participants rated practices that focused on the supervisee and on process importance more highly and practices that focused on the supervisor less highly. This is further discussed in detail in the following section.

### **Study Results and Multicultural Supervision Competency Framework**

Multicultural supervision has been defined as a “supervisor’s ability to address and facilitate cultural discussions in supervision; incorporate culturally sensitive interventions, assessments, client conceptualizations; and evaluate the multicultural competence of her or his supervisee” (Soheilian et al., 2014, p. 380). Multicultural supervision considers and integrates “multiple cultural interactions as they occur within the triadic process of the supervisor, supervisee, and client;” it also represents the multiple cultural interactions and contexts that occur within counseling and supervision dyads (Hird et al., 2001, p. 118).

As suggested by the Competency Benchmarks published by Falender et al. in 2013, supervisors are responsible for attending to and initiating discussions of multicultural issues and identities and for preparing psychology trainees to address these issues in their own respective advocacy, practice, and research settings. Much of the existing literature also supports that supervisors bear the responsibility to initiate discussions of multicultural issues with supervisees,



especially during the initial phase of supervision. Supervision that consciously encourages explorations of multicultural issues has been shown to promote growth in supervisees' cultural competencies (Killian, 2001; Ladany, Inman, Constantine, & Hofheinz, 1997). This means supervisors have to be willing to be proactive, to be willing to do some self-exploration, and to have courage to talk openly with supervisees about potentially uncomfortable issues (Garrett et al., 2001). According to Gatmon et al. (2001), "Supervisors should not wait for racial and cultural issues to come up during supervision, but rather supervisors should take initiative and raise these issues" (p. 109).

Ancis and Marshall (2010) delineated six domains under which multicultural supervision practices fall: (a) supervisor-focused personal development, (b) supervisee-focused personal development, (c) conceptualization, (d) interventions, (e) process, and (f) evaluation. Based on the current survey results, multicultural supervisory behaviors and practices that are more frequently regarded as having the highest level of importance can be categorized into one of the six domains listed above (See Table 4):

- Process – Creating a safe (nonjudgmental, supportive) environment for the discussion of multicultural issues, values, and ideas through the use of verbal and nonverbal communication
- Supervisee-focused personal development – Addressing feelings of discomfort experienced by trainees concerning multicultural issues
- Supervisee-focused personal development – Inviting supervisees to explore and discuss the possible existence of personal cultural biases and prejudices in the conceptualization and practice with clients

- Supervisee-focused personal development – Acknowledging and discussing realities of racism and oppression during supervision
- Process – Providing supervisees with a multiculturally diverse caseload to ensure breadth of clinical experience
- Process – Acknowledging and discussing power issues in supervision that may be related to racial or ethnic multicultural differences
- Conceptualization – Modeling for supervisees by initiating, attending to, and demonstrating interest and respect for clients’ intersecting identities and culture during case conceptualization and discussion

In addition, the multicultural supervisory behaviors and practices that are regarded as having less degree of importance can also be categorized into one of the six domains as specified above (See Table 4):

- Supervisee-focused personal development – Encouraging supervisees to share, within supervision, their personal and professional cultural backgrounds and experiences
- Supervisor-focused personal development – Consulting colleagues willingly about one’s own reactions to racial or ethnic concerns as a result of any supervision experience
- Supervisor-focused personal development – Acknowledging, discussing, and providing affirming statements that demonstrate respect for racial or ethnic multicultural similarities and differences between the self and supervisee, and discussing feelings concerning these similarities or differences
- Supervisor-focused personal development – Self-disclosing own development of self-awareness about cultural or ethnic identity, biases, and limitations

- Supervisee-focused personal development – Providing recommended multicultural readings and related training experiences to supervisees

A closer examination of the seven multicultural supervisory behaviors and practices regarded as the most important by the participants of this study revealed that three behaviors and practices belong to the *process* domain: creating a safe (nonjudgmental, supportive) environment for discussion of multicultural issues, values, and ideas through the use of verbal and nonverbal communication; providing supervisee with a multiculturally diverse caseload to ensure breadth of clinical experience; acknowledging and discussing power issues in supervision that may be related to racial/ethnic multicultural differences. Three behaviors and practices belong to the *supervisee-focused personal development* domain: addressing feelings of discomfort experienced by trainees concerning multicultural issue; inviting supervisee to explore and discuss possible existence of personal cultural biases and prejudices on the conceptualization and practice with clients; and acknowledging and discussing realities of racism/oppression during supervision. One behavior belongs to the *conceptualization* domain: modeling for supervisee by initiating, attending to, and demonstrating interest and respect for client's intersecting identities and culture during case conceptualization and discussion. It is worth noting that the most important supervisory behavior identified in this study was "Creating a safe (nonjudgmental, supportive) environment for discussion of multicultural issues, values, and ideas through the use of verbal and nonverbal communication," which is consistent with the supervisory behavior identified by Dressel and colleagues in a 2007 study (Dressel et al., 2007) as the most important behavioral element involved in successful multicultural supervision.

A closer examination of the five multicultural supervisory behaviors and practices that participants regarded as having less degree of importance revealed that three behaviors and

practices belong to the *supervisor-focused personal development* domain: consulting colleagues willingly about my own reactions to racial/ethnic concerns as a result of any supervision experience; acknowledging, discussing, and providing affirming statements that demonstrate respect for racial/ethnic multicultural similarities and differences between myself and supervisee, and discussing feelings concerning these similarities and/or differences; and self-disclosing own development of self-awareness about cultural/ethnic identity, biases, and limitations. Two behaviors and practices belong to the *supervisee-focused personal development* domain: encouraging supervisee to share, within supervision, their personal and professional cultural background and experiences; and providing recommended multicultural readings and related training experiences to supervisee.

Based on the results of this exploratory study, this author hypothesizes that the extent to which a supervisory behavior is believed to be important by supervisors will affect the frequency of their performance of that behavior when they are conducting supervision. In other words, this study results support that the current multicultural supervisory behaviors and practices viewed as most important and perhaps practiced more frequently by supervisors have a greater emphasis on the domains of *process* and *supervisee-focused self development* and less emphasis on the domain of *supervisor-focused self development*. Though supervisors may put more of their focus on creating a safe space and tending to supervisees' thoughts and feelings regarding culture and diversity issues, supervisors are less likely to actively bring up these issues in supervision. In addition, there seemed to be a greater emphasis on managing multicultural issues through the supervisee–client dyad and less focus on self-reflection and self-disclosure at the supervisee–supervisor dyad level.

The study finding that supervisor-focused supervisory behaviors were rated as having lower importance also supported findings in other research studies that showed supervisors are taking a more passive stance toward initiating diversity conversation during supervision (Fukuyama, 1994; Gatmon et al., 2001; Phillips et al., 2017; Priest, 1994). This passive approach is contrary to the recommendations given in the existing multicultural supervision literature and indicates that supervisors are more reliant on implicit communication and wait for supervisees to initiate discussions of multicultural and diversity issues in supervision. This approach can potentially lead to many missed opportunities for multicultural and diversity discussions by placing the responsibility on supervisees to bring these issues into supervision—ultimately, supervisees do not know what they do not know.

In order to foster and instill multicultural competency in supervisees, supervisors should focus on communicating culture and diversity issues explicitly during supervision and pay attention by proactively raising culture and diversity issues, exploring any discomfort that arises from culture and diversity discussions, and modeling self-reflection as well as encouraging supervisee self-reflection during supervision instead of passively waiting for these issues to be brought up by supervisees.

### **Clinical Supervision and Multicultural Supervision Training**

A closer look at survey participants' responses on questions regarding continuing education on clinical supervision and multicultural supervision revealed relatively low numbers of workshops or trainings attended and books or articles read during the last two licensure cycles, especially with regard to multicultural supervision. With regard to the number of supervision workshops or trainings attended, the range was from 0 to 10 ( $M = 3.09$ ,  $SD = 2.48$ ) and five out of the 44 participants (11.36%) stated they did not attend any supervision workshops or trainings.

The number of multicultural supervision workshops or trainings attended ranged from 0 to 5 ( $M = 1.32$ ,  $SD = 1.33$ ) and 14 out of the 44 participants (31.82%) indicated they did not attend any multicultural supervision workshops or trainings. In terms of the number of supervision books or articles read during the last two licensure cycles, participants' reports ranged from 0 to 50 ( $M = 5.75$ ,  $SD = 8.6$ ) and seven out of the 44 participants (15.91%) stated they did not read any supervision books or articles. Finally, in terms of the number of multicultural supervision books or articles read during the last two licensure cycles, the range was from 0 to 15 ( $M = 3.43$ ,  $SD = 4.14$ ) and nine out of the 44 participants (20.45%) indicated they did not read any multicultural supervision books or articles. This indicates supervisors do not engage in adequate continuing education regarding the topic of supervision and multicultural supervision. In addition, there is a need for clinical supervisors to be exposed to and trained more in multicultural supervision theories as well as learn strategies to effectively facilitate skills to initiate discussions about culture and diversity issues in supervision.

### **Limitations**

Several methodological limitations were identified in the study. First, this study relied exclusively on self-report, which may result in self-report bias as it assumes participants are being honest about their experiences, are not engaging in social desirability, and are able to accurately recall their experiences. Another possible limitation is self-selection bias, with those who were more interested in supervision and multicultural supervision being more likely to participate in this study. Along these lines, there was a relatively low response rate given how many venues for recruitment were used to reach out to elicit participation. This study also included the assumptions that the results can be generalized to different clinical settings and the sample surveyed in this study had expert knowledge in multicultural supervision based on work

settings and years of supervision experience. Furthermore, it was assumed that the 20 multicultural supervisory behaviors identified based on literature review were representative of the best multicultural supervision practices. Finally, based on the small sample size, the results may not be representative of the entire population of experienced clinical supervisors. Despite these limitations, the present study did demonstrate the frequencies of multicultural supervisory behaviors and practices viewed as most important were not equally distributed within this sample, indicating some level of consensus on the most important behaviors among survey participants. This study also offered some insight into the current practices of multicultural supervision at training sites as well as the levels of multicultural supervision training received by licensed psychologists who are providing supervision.

### **Directions for Future Research**

Because this was an exploratory study with a relatively small sample size that was designed to examine whether there was consensus among more experienced supervisors regarding the most important multicultural supervisory behaviors, future research should be conducted to explore whether there is a similar consensus with a larger sample size. Future studies should also be conducted to explore whether there are any differences between the opinions of experienced supervisors and the opinions of early career supervisors. It would also be helpful to explore whether differences in opinion exist among supervisors who have participated in more extensive continuing education regarding multicultural supervision compared to those who have less extensive continuing education regarding multicultural supervision. In addition, investigations should be conducted examining opinions and attitudes regarding supervisory behaviors and the actual performance of these supervisory behaviors.

## Conclusions

The purpose of this exploratory study was to invite licensed psychologists who were experienced in the field of multicultural psychology and supervision to rate and categorize a list of specific supervisor behaviors and practices that they considered to be most important in demonstrating multicultural supervision competence and addressing diversity in clinical supervision. A total of 44 completed surveys were used in data analyses. Results of the chi-square goodness-of-fit test indicated the frequencies of multicultural supervisory behaviors and practices rated as most important were not equally distributed within this sample and these frequencies were statistically different from what would be expected by chance, indicating a level of consensus among survey participants. This study provided a snapshot of what type of multicultural supervisory behaviors and practices were viewed as most important by survey participants and perhaps also currently practiced more frequently by supervisors at training sites. Results support that when it comes to multicultural and diversity issues, supervisors tend to use a more passive approach, which is contrary to what the present multicultural supervision literature and research recommend as best practices. Furthermore, supervisors' engagement in continuing education regarding supervision and multicultural supervision is very limited. This indicates there is a need for clinical supervisors to be exposed to and trained more in multicultural supervision theories as well as to learn effective facilitative skills to initiate discussions about culture and diversity issues in supervision.



## REFERENCES

- American Psychological Association. (2010). *Ethical principles of psychologists and code of conduct*. Retrieved from <http://www.apa.org/ethics/code/principles.pdf>
- American Psychological Association. (2014). *Guidelines for clinical supervision in health service psychology*. Retrieved from <http://apa.org/about/policy/guidelines-supervision.pdf>
- American Psychological Association. (2015). Guidelines for clinical supervision in health service psychology. *American Psychologist*, 70, 33–46. <https://doi.org/10.1037/a0038112>
- American Psychological Association. (2017). *Multicultural guidelines: An ecological approach to context, identity, and intersectionality, 2017*. Retrieved from <http://www.apa.org/about/policy/multicultural-guidelines.aspx>
- Ancis, J. R., & Ladany, N. (2001). A multicultural framework for counselor supervision. In L. J. Bradley & N. Ladany (Eds.), *Counselor supervision: Principles, process, and practice* (3rd ed., pp. 63–90). New York, NY: Brunner-Routledge.
- Ancis, J. R., & Ladany, N. (2010). A multicultural framework for counselor supervision. In N. Ladany & L. J. Bradley (Eds.), *Counselor supervision* (4th ed., pp. 53–94). New York, NY: Routledge.
- Ancis, J. R., & Marshall, D. S. (2010). Using a multicultural framework to assess supervisees' perceptions of culturally competent supervision. *Journal of Counseling & Development*, 88(3), 277–284. <https://doi.org/10.1002/j.1556-6678.2010.tb00023.x>
- Atkinson, C., & Woods, K. (2007). A model of effective fieldwork supervision for trainee educational psychologists. *Educational Psychology in Practice*, 23(4), 299–316. <https://doi.org/10.1080/02667360701660902>

- Barnett, J. E., & Molzon, C. H. (2014). Clinical supervision of psychotherapy: Essential ethics issues for supervisors and supervisees. *Journal of Clinical Psychology, 70*(11), 1051–1061. <https://doi.org/10.1002/jclp.22126>
- Bernard, J. M., & Goodyear, R. K. (2014). *Fundamentals of clinical supervision* (5th ed.). Upper Saddle River, NJ: Pearson.
- Bernard, J. M., & Luke, M. (2015). A content analysis of 10 years of clinical supervision articles in counseling. *Counselor Education and Supervision, 54*(4), 242–257. <https://doi.org/10.1002/ceas.12024>
- Bhat, C. S., & Davis, T. E. (2007). Counseling supervisors' assessment of race, racial identity, and working alliance in supervisory dyads. *Journal of Multicultural Counseling and Development, 35*(2), 80–91. <https://doi.org/10.1002/j.2161-1912.2007.tb00051.x>
- Borders, D. L. (2014). Best practices in clinical supervision: Another step in delineating effective supervision practice. *American Journal of Psychotherapy, 68*(2), 151–162. <https://doi.org/10.1176/appi.psychotherapy.2014.68.2.151>
- Burkard, A. W., Johnson, A. J., Madson, M. B., Pruitt, N. T., Contreras-Tadych, D. A., Kozlowski, J. E. M., . . . Knox, S. (2006). Supervisor cultural responsiveness and unresponsiveness in cross-cultural supervision. *Journal of Counseling Psychology, 53*(3), 288–301. <https://doi.org/10.1037/0022-0167.53.3.288>
- Burkard, A. W., Knox, S., Clarke, R. D., Phelps, D. L., & Inman, A. G. (2014). Supervisors' experiences of providing difficult feedback in cross-ethnic/racial supervision. *The Counseling Psychologist, 42*(3), 314–344. <https://doi.org/10.1177/0011000012461157>
- Christiansen, A. T., Thomas, V., Kafescioglu, N., Karakurt, G., Lowe, W., Smith, W., & Wittenborn, A. (2011). Multicultural supervision: Lessons learned about an ongoing

struggle. *Journal of Marital and Family Therapy*, 37(1), 109–119.

<https://doi.org/10.1111/j.1752-0606.2009.00138.x>

Clauss-Ehlers, C. S., Chiriboga, D. A., Hunter, S. J., Roysurcar, G., & Tummala-Narra, P. (2019). APA multicultural guidelines executive summary: Ecological approach to context, identity, and intersectionality. *American Psychologist*, 74(2), 232–244.

<https://doi.org/10.1037/amp0000382>

Dalkey, N. G., Rourke, D. L., Lewis, R., & Snyder, D. (1972). *Studies in the quality of life: Delphi and decision-making*. Lexington, MA: Lexington Books.

Dimmitt, G., Carey, J. G., & McGannon, W. (2005). Identifying a school counseling research agenda: A Delphi study. *Counselor Education and Supervision*, 44, 214–228.

<https://doi.org/10.1002/j.1556-6978.2005.tb01748.x>

Doerries, D. B., & Foster, V. A. (2005). Essential skills for novice structural family therapists: A Delphi study of experienced practitioners' perspectives. *Family Journal: Counseling and Therapy for Couples and Families*, 13, 259–265.

<https://doi.org/10.1177/1066480704273639>

Dressel, J. L., Consoli, A. J., Kim, B. S. K., & Atkinson, D. R. (2007). Successful and unsuccessful multicultural supervisory behaviors: A Delphi poll. *Journal of Multicultural Counseling and Development*, 35(1), 51–64. [https://doi.org/10.1002/j.2161-](https://doi.org/10.1002/j.2161-1912.2007.tb00049.x)

[1912.2007.tb00049.x](https://doi.org/10.1002/j.2161-1912.2007.tb00049.x)

Duan, C., & Roehlke, H. (2001). A descriptive “snapshot” of cross-racial supervision in university counseling center internships. *Journal of Multicultural Counseling and Development*, 29(2), 131–146. <https://doi.org/10.1002/j.2161-1912.2001.tb00510.x>

- Estrada, D., Frame, M. W., & Williams, C. B. (2004). Cross-cultural supervision: Guiding the conversation toward race and ethnicity. *Journal of Multicultural Counseling and Development, 32*, 307–319.
- Falender, C. A. (2018). Clinical supervision—The missing ingredient. *American Psychologist, 73*(9), 1240–1250. <https://doi.org/10.1037/amp0000385>
- Falender, C. A., Burnes, T. R., & Ellis, M. V. (2013). Multicultural clinical supervision and benchmarks: Empirical support informing practice and supervisor training. *Counseling Psychologist, 41*(1), 8–27. <https://doi.org/10.1177/0011000012438417>
- Falender, C. A., & Shafranske, E. P. (2004). The practice of clinical supervision. In C. A. Falender & E. P. Shafranske (Eds.), *Clinical supervision: A competency-based approach* (pp. 3–35). Washington, DC: American Psychological Association. <https://doi.org/10.1037/10806-001>
- Falender, C. A., & Shafranske, E. P. (2007). Competence in competency-based supervision practice: Construct and application. *Professional Psychology: Research & Practice, 38*(3), 232–240. <https://doi.org/10.1037/0735-7028.38.3.232>
- Falender, C. A., & Shafranske, E. P. (2014). Clinical supervision: The state of the art. *Journal of Clinical Psychology, 70*(11), 1030–1041. <https://doi.org/10.1002/jclp.22124>
- Falender, C. A., & Shafranske, E. P. (2017). Competency-based clinical supervision: Status, opportunities, tensions, and the future. *Australian Psychologist, 52*(2), 86–93. <https://doi.org/10.1111/ap.12265>
- Falender, C. A., Shafranske, E. P., & Falicov, C. J. (2014). *Multiculturalism and diversity in clinical supervision: A competency-based approach*. Washington, DC: American Psychological Association. <https://doi.org/10.1037/14370-000>

- Falender, C. A., Shafranske, E. P., & Ofek, A. (2014). Competent clinical supervision: Emerging effective practices. *Counselling Psychology Quarterly*, 27(4), 393–408.  
<https://doi.org/10.1080/09515070.2014.934785>
- Foo, K. N. M. R., & Rodolfa, E. R. (2013). Putting the benchmarks into practice: Multiculturally competent supervisors-effective supervision. *Counseling Psychologist*, 41(1), 121–130.  
<https://doi.org/10.1177/0011000012453944>
- Fouad, N. A., & Chavez-Korell, S. (2014). Considering social class and socioeconomic status in the context of multiple identities: An integrative clinical supervision approach. In C. A. Falender, E. P. Shafranske, & C. J. Falicov (Eds.), *Multiculturalism and diversity in clinical supervision: A competency-based approach* (pp. 145–161). Washington, DC: American Psychological Association. <https://doi.org/10.1037/14370-006>
- Fukuyama, M. A. (1994). Critical incidents in multicultural counseling supervision: A phenomenological approach to supervision research. *Counselor Education and Supervision*, 34(2), 142–151. <https://doi.org/10.1002/j.1556-6978.1994.tb00321.x>
- Furr, S., & Brown-Rice, K. (2016). Doctoral students' knowledge of educators' problems of professional competency. *Training and Education in Professional Psychology*, 10(4), 223–230. <https://doi.org/10.1037/tep0000131>
- Garrett, M. T., Borders, L. D. A., Crutchfield, L. B., Torres-Rivera, E., Brotherton, D., & Curtis, R. (2001). Multicultural SuperVISION: A paradigm of cultural responsiveness for supervisors. *Journal of Multicultural Counseling and Development*, 29(2), 147–158.  
<https://doi.org/10.1002/j.2161-1912.2001.tb00511.x>
- Gatmon, D., Jackson, D., Koshkarian, L., Martos-Perry, N., Molina, A., Patel, N., & Rodolfa, E. (2001). Exploring ethnic, gender, and sexual orientation variables in supervision: Do they

- really matter? *Journal of Multicultural Counseling and Development*, 29(2), 102–113.  
<https://doi.org/10.1002/j.2161-1912.2001.tb00508.x>
- Goodyear, R., Lichtenberg, J. W., Bang, K., & Gragg, J. B. (2014). Ten changes psychotherapists typically make as they mature into the role of supervisor. *Journal of Clinical Psychology*, 70(11), 1042–1050. <https://doi.org/10.1002/jclp.22125>
- Green, M., & Dekkers, T. (2010). Attending to power and diversity in supervision: An exploration of supervisee learning outcomes and satisfaction with supervision. *Journal of Feminist Family Therapy*, 22(4), 293–312.  
<https://doi.org/10.1080/08952833.2010.528703>
- Hernández, P., & McDowell, T. (2010). Intersectionality, power, and relational safety in context: Key concepts in clinical supervision. *Training and Education in Professional Psychology*, 4(1), 29–35. <https://doi-org/10.1037/a0017064>
- Hernández, P., Taylor, B. A., & McDowell, T. (2009). Listening to ethnic minority AAMFT approved supervisors: Reflections on their experiences as supervisees. *Journal of Systemic Therapies*, 28(1), 88-100. <https://doi.org/10.1521/jsyt.2009.28.1.88>
- Hird, J. S., Cavalieri, C. E., Dulko, J. P., Felice, A. A. D., & Ho, T. A. (2001). Visions and realities: Supervisee perspectives of multicultural supervision. *Journal of Multicultural Counseling & Development*, 29(2), 114–130. <https://doi.org/10.1002/j.2161-1912.2001.tb00509.x>
- Hird, J., Tao, K., & Gloria, A. (2005). Examining supervisors' multicultural competence in racially similar and different supervision dyads. *The Clinical Supervisor*, 23(2), 107–122. [https://doi.org/10.1300/j001v23n02\\_07](https://doi.org/10.1300/j001v23n02_07)

- Hoonakker, P., & Carayon, P. (2009). Questionnaire survey nonresponse: A comparison of postal mail and Internet surveys. *International Journal of Human-Computer Interaction*, 25(5), 348–373. <https://doi.org/10.1080/10447310902864951>
- Inman, A. G. (2006). Supervisor multicultural competence and its relation to supervisory process and outcome. *Journal of Marital and Family Therapy*, 32(1), 73–85. <https://doi.org/10.1111/j.1752-0606.2006.tb01589.x>
- Inman, A. G., & DeBoer Kreider, E. (2013). Multicultural competence: Psychotherapy practice and supervision. *Psychotherapy*, 50(3), 346–350. <https://doi.org/10.1037/a0032029>
- Inman, A. G., Hutman, H., Pendse, A., Devdas, L., Luu, L., & Ellis, M. V. (2014). Current trends concerning supervisors, supervisees, and clients in clinical supervision. In C. J. Watkins & D. L. Milne (Eds.), *The Wiley international handbook of clinical supervision* (pp. 61–102). New York, NY: Wiley-Blackwell. <https://doi.org/10.1002/9781118846360.ch4>
- Inman, A. G., & Ladany, N. (2014). Multicultural competencies in psychotherapy supervision. In F. T. L. Leong, L. Comas-Díaz, G. C. Nagayama Hall, V. C. McLoyd, & J. E. Trimble (Eds.), *APA handbook of multicultural psychology, Vol. 2: Applications and training* (pp. 643–658). Washington, DC: American Psychological Association. <https://doi.org/10.1037/14187-036>
- Jernigan, M. M., Green, C. E., Helms, J. E., Perez-Gualdrón, L., & Henze, K. (2010). An examination of people of color supervision dyads: Racial identity matters as much as race. *Training And Education in Professional Psychology*, 4(1), 62–73. <https://doi.org/10.1037/a0018110>
- Kaduvetoor, A., O’Shaughnessy, T., Mori, Y., Beverly, C. I. I. I., Weatherford, R. D., & Ladany, N. (2009). Helpful and hindering multicultural events in group supervision:

- Climate and multicultural competence. *Counseling Psychologist*, 37(6), 786–820.  
<https://doi.org/10.1177/0011000009333984>
- Killian, K. D. P. D. (2001). Differences making a difference. *Journal of Feminist Family Therapy*, 12(2), 61–103. [https://doi.org/10.1300/j086v12n02\\_03](https://doi.org/10.1300/j086v12n02_03)
- Ladany, N. (2014). The ingredients of supervisor failure. *Journal of Clinical Psychology*, 70(11), 1094–103. <https://doi.org/10.1002/jclp.22130>
- Ladany, N., Friedlander, M. L., & Nelson, M. L. (2005). Heightening multicultural awareness: It's never been about political correctness. In N. Ladany, M. L. Friedlander, & M. L., Nelson (Eds.), *Critical events in psychotherapy supervision: An interpersonal approach* (pp. 53–77). Washington, DC: American Psychological Association. <https://doi.org/10.1037/10958-003>
- Ladany, N., Inman, A. G., Constantine, M. G., & Hofheinz, E. W. (1997). Supervisee multicultural case conceptualization ability and self-reported multicultural competence as functions of supervisee racial identity and supervisor focus. *Journal of Counseling Psychology*, 44(3), 284–293. <https://doi.org/10.1037//0022-0167.44.3.284>
- Ladany, N., Mori, Y., & Mehr, K. E. (2013). Effective and ineffective supervision. *Counseling Psychologist*, 41(1), 28–47. <https://doi.org/10.1177/0011000012442648>
- Lassiter, P. S., Napolitano, L., Culbreth, J. R., & Ng, K. (2008). Developing multicultural competence using the structured peer group supervision model. *Counselor Education and Supervision*, 47(3), 164–178. <https://doi.org/10.1002/j.1556-6978.2008.tb00047.x>
- Magnuson, S., Wilcoxon, S. A., & Norem, K. (2000). A profile of lousy supervision: Experienced counselors' perspectives. *Counselor Education and Supervision*, 39(3), 189–202. <https://doi.org/10.1002/j.1556-6978.2000.tb01231.x>



- Martínez, R. P., & Holloway, E. L. (1997). The supervision relationship in multicultural training. In D. B. Pope-Davis & H. K. Coleman (Eds.), *Multicultural counseling competencies: Assessment, education and training, and supervision* (pp. 325–349). Thousand Oaks, CA: Sage. <https://doi.org/10.4135/9781452232072.n15>
- Mori, Y., Inman, A. G., & Caskie, G. I. L. (2009). Supervising international students: Relationship between acculturation, supervisor multicultural competence, cultural discussions, and supervision satisfaction. *Training and Education in Psychology, 3*(1), 10–18. <https://doi.org/10.1037/a0013072>
- Murphy, M. J., & Wright, D. W. (2005). Supervisees' perspectives of power use in supervision. *Journal of Marital and Family Therapy, 31*(3), 283–295. <https://doi.org/10.1111/j.1752-0606.2005.tb01569.x>
- Murphy-Shigematsu, S. (2010). Microaggressions by supervisors of color. *Training and Education in Professional Psychology, 4*(1), 16–18. <https://doi.org/10.1037/a0017472>
- Norcross, J. G., Hedges, M., & Prochaska, J. (2002). The face of 2010: A Delphi poll on the future of psychotherapy. *Professional Psychology: Research and Practice, 33*(3), 316–322. <https://doi.org/10.1037/0735-7028.33.3.316>
- Ober, A. M., Granello, D. H., & Henfield, M. S. (2009). A synergistic model to enhance multicultural competence in supervision. *Counselor Education and Supervision, 48*(3), 204–221. <https://doi.org/10.1002/j.1556-6978.2009.tb00075.x>
- Phillips, J. C., Parent, M. C., Dozier, V. C., & Jackson, P. L. (2017). Depth of discussion of multicultural identities in supervision and supervisory outcomes. *Counselling Psychology Quarterly, 30*(2), 188–210. <https://doi.org/10.1080/09515070.2016.1169995>

- Priest, R. (1994). Minority supervisor and majority supervisee: Another perspective of clinical reality. *Counselor Education and Supervision, 34*(2), 152–158.  
<https://doi.org/10.1002/j.1556-6978.1994.tb00322.x>
- Quek, K., & Storm, C. (2012). Chinese values in supervisory discourse: Implications for culturally sensitive practices. *Contemporary Family Therapy: An International Journal, 34*(1), 44–56. <https://doi.org/10.1007/s10591-011-9172-4>
- Ryde, J. (2000). Supervising across difference. *International Journal of Psychotherapy, 5*(1), 37–48. <https://doi.org/10.1080/13569080050020254>
- Safran, J. D., Muran, J. C., Stevens, C., & Rothman, M. (2007). A relational approach to supervision. In C. A. Falender & E. P. Shafranske (Eds.), *Casebook for clinical supervision: A competency-based approach* (pp. 137–157). Washington, DC: American Psychological Association. <https://doi.org/10.1037/11792-007>
- Soheilian, S. S., Inman, A. G., Klinger, R. S., Isenberg, D. S., & Kulp, L. E. (2014). Multicultural supervision: Supervisees' reflections on culturally competent supervision. *Counselling Psychology Quarterly, 27*(4), 379–392.  
<https://doi.org/10.1080/09515070.2014.961408>
- Sue, D. W., Rivera, D. P., Capodilupo, C. M., Lin, A. I., & Torino, G. C. (2010). Racial dialogues and White trainee fears: Implications for education and training. *Cultural Diversity and Ethnic Minority Psychology, 16*(2), 206–214.  
<https://doi.org/10.1037/a0016112>
- Taylor, B. A., Hernández, P., Deri, A., Rankin, P. R., & Siegel, A. (2007). Integrating diversity dimensions in supervision. *The Clinical Supervisor, 25*(1), 3–21.  
[https://doi.org/10.1300/j001v25n01\\_02](https://doi.org/10.1300/j001v25n01_02)

- Tohidian, N. B., & Quek, K. M. (2017). Processes that inform multicultural supervision: A qualitative meta-analysis. *Journal of Marital and Family Therapy, 43*(4), 573–590. <https://doi.org/10.1111/jmft.12219>
- Toporek, R. L., Ortega-Villalobos, L., & Pope-Davis, D. B. (2004). Critical incidents in multicultural supervision: Exploring supervisees' and supervisors' experiences. *Journal of Multicultural Counseling and Development, 32*(2), 66–83. <https://doi.org/10.1002/j.2161-1912.2004.tb00362.x>
- Trimble, J. E., & King, J. (2014). Considerations in supervision working with American Indian and Alaska Native clients: Understanding the context of deep culture. In C. A. Falender, E. P. Shafranske, & C. J. Falicov (Eds.), *Multiculturalism and diversity in clinical supervision: A competency-based approach* (pp. 231–254). Washington, DC: American Psychological Association. <https://doi.org/10.1037/14370-010>
- Tsui, M., O'Donoghue, K., & Ng, A. K. T. (2014). Culturally competent and diversity-sensitive clinical supervision. In C. E. Watkins & D. L. Milne (Eds.), *The Wiley international handbook of clinical supervision* (pp. 238–254). New York, NY: John Wiley & Sons. <https://doi.org/10.1002/9781118846360.ch10>
- Watkins, C. E., Jr. (2012). Development of the psychotherapy supervisor: Review of and reflections on 30 years of theory and research. *American Journal of Psychotherapy, 66*(1), 45–83. <https://doi.org/10.1176/appi.psychotherapy.2012.66.1.45>
- Watkins, C. E., Jr. (2014). Clinical supervision in the 21st century: revisiting pressing needs and impressing possibilities. *American Journal of Psychotherapy, 68*(2), 251–272. <https://doi.org/10.1176/appi.psychotherapy.2014.68.2.251>

Westefeld, J. S. (2009). Supervision of psychotherapy: Models, issues, and recommendations.

*Counseling Psychologist*, 37(2), 296–316. <https://doi.org/10.1177/0011000008316657>

Wong, L. J., Wong, P. P., & Ishiyama, F. I. (2013). What helps and what hinders in cross-

cultural clinical supervision: A critical incident study. *The Counseling Psychologist*,

41(1), 66–85. <https://doi.org/10.1177/0011000012442652>

Yabusaki, A. S. (2010). Clinical supervision: Dialogues on diversity. *Training and Education in*

*Professional Psychology*, 4(1), 55–61. <https://doi.org/10.1037/a0017378>

## TABLES

Table 1  
*Participant Demographics (N = 44)*

Characteristic	Range	<i>M</i>	<i>SD</i>
Age	34 – 66	49.20	8.11
Years Licensed	5 – 36	15.16	7.26
		<i>n</i>	%
Gender			
Female		30	68.18
Male		14	31.82
Race/Ethnicity			
African American/Black		4	9.09
Asian		2	4.54
Vietnamese American		1	
Japanese American		1	
Bi-racial/Multiracial		3	6.82
Caucasian/Middle Eastern		1	
White/German/English/French/Cherokee		1	
White/Latino		1	
Caucasian/White		30	68.18
Irish/Scottish		1	
Italian American		1	
Romanian		1	
Did not specify		27	
Iranian		1	2.27
Latinx		4	9.09
Cuban American		1	
Puerto Rican		1	
Salvadoran American		1	
Did not specify		1	
Sexual Orientation			
Gay		1	2.27
Gay/Queer		1	2.27
Heterosexual		37	84.09
Lesbian		2	4.54
Pansexual		2	4.54
Not reported		1	2.27
Primary Theoretical Orientation			
Behavioral		1	2.27

(continued)

Table 1 (continued)

*Participant Demographics (N = 44)*

Characteristics	<i>n</i>	%
Cognitive	9	20.45
Cognitive-Behavioral	2	4.54
Existential	1	2.27
Feminist	2	4.54
Humanistic	4	9.09
Integrative/Eclectic	11	25.00
Interpersonal (IPT)	1	2.27
Multicultural	2	4.54
Neuropsychotherapy	1	2.27
Postmodern Constructive	1	2.27
Psychodynamic/Relational	7	15.91
Relational/Cultural	1	2.27
Systems/Family Systems	1	2.27
Most Recent Work/Training/Teaching Site(s)		
Armed Forces Medical Center	1	2.27
Child/Adolescent Psychiatric/Pediatrics	1	2.27
Community Mental Health	1	2.27
Medical School	2	4.54
Multiple Sites	4	9.09
Consortium & Private Practice	1	
Community Mental Health & School District	1	
Private Practice & University Counseling Center	1	
Private Practice & School District & University Counseling Center	1	
Private Practice	3	6.82
State Funded Non-Profit Agency/Regional Center	1	2.27
University Counseling Center	23	52.27
Veteran Affairs Medical Center	8	18.18
APA Division 45 Member		
Yes	5	11.36
No	38	86.36
Not reported	1	2.27

Table 2

*Participant Supervision and Supervision Training Experience (N = 44)*

Characteristic	Range	<i>M</i>	<i>SD</i>
Years provided/providing supervision	5 - 36	14.11	6.43
Number of supervisees in the last 10 years	10 - 200	36.5	31.96
Number of supervisees in the last 3 years	1 - 60	13.16	10.72
Current weekly number of supervisees	0 - 13	3.98	3.25
Current weekly direct supervision hours	0 - 10	3.77	2.01
Current weekly indirect supervision hours	0 - 20	4	4.39
Number of supervision workshops/trainings attended during last 2 licensure cycles	0 - 10	3.09	2.48
Number of multicultural supervision workshops/trainings attended during last 2 licensure cycles	0 - 5	1.32	1.33
Number of supervision books/articles read during last 2 licensure cycles	0 - 50	5.75	8.6
Number of multicultural supervision books/articles read during last 2 licensure cycles	0 - 15	3.43	4.14
		<i>n</i>	%
Currently Supervising Trainees/Interns			
Yes		40	90.91
No		4	9.09
Current supervisees bring up culture/diversity issues during supervision			
Always		1	2.27
Very Often		9	20.45
Often		17	38.64
Sometimes		13	29.54
Rarely		3	6.82
Very Rarely		0	0.00
Never		1	2.27
Supervisor brings up culture/diversity issues during supervision			
Always		3	6.82
Very Often		12	27.27
Often		18	40.91
Sometimes		11	25.00
Rarely		0	0.00
Very Rarely		0	0.00
Never			
Supervisor taken graduate course in clinical supervision			
Yes		20	45.45
No		24	54.55

(continued)

Table 2 (continued)

*Participant Supervision and Supervision Training Experience (N = 44)*

Characteristics	<i>n</i>	%
Supervisor taken graduate course in culture/diversity		
Yes	39	88.64
No	5	11.36
Supervisor received supervision of supervision		
Yes	32	72.73
No	12	27.27
Supervisor brought up culture/diversity issues during supervision as a trainee		
Always	1	2.27
Very Often	8	18.18
Often	10	22.73
Sometimes	22	50
Rarely	3	6.82
Very Rarely	0	0.00
Never	0	0.00
When supervisor was a trainee, their supervisors brought up culture/diversity issues during supervision		
Always	0	0.00
Very Often	6	13.64
Often	5	11.36
Sometimes	26	59.09
Rarely	6	13.64
Very Rarely	0	0.00
Never	1	2.27
Years provided/providing supervision		
5-9 years	13	29.55
10-14 years	11	25.00
15-19 years	11	25.00
≥ 20 years	9	20.45
Number of supervisees in the last 10 years		
10-19	11	25.00
20-29	11	25.00
30-39	8	18.18
40-49	4	9.09
50-99	8	18.18
≥ 100	2	4.55

(continued)



Table 2 (continued)

*Participant Supervision and Supervision Training Experience (N = 44)*

Characteristics	<i>n</i>	%
Number of supervisees in the last 3 years		
1-4	4	9.09
5-9	14	31.82
10-14	13	29.55
15-19	5	11.36
20-24	3	6.82
≥25	5	11.36
Current weekly number of supervisees		
0	3	6.82
1-4	25	56.82
5-9	10	22.73
≥10	6	13.64
Current weekly direct supervision hours		
0	1	2.27
1-4	28	63.64
5-9	14	31.82
≥ 10	1	2.27
Current weekly indirect supervision hours		
0	4	9.09
1-4	27	61.36
5-9	8	18.18
10-20	3	6.82
≥ 20	2	4.55
Number of supervision workshops/trainings attended during last 2 licensure cycles		
0	5	11.36
1-2	18	40.91
3-4	11	25.00
5-6	5	11.36
≥ 7	5	11.36
Number of multicultural supervision workshops/trainings attended during last 2 licensure cycles		
0	14	31.82
1-2	22	50.00
3-4	7	15.91
≥ 5	1	2.27

(continued)

Table 2 (continued)

*Participant Supervision and Supervision Training Experience (N = 44)*

Characteristics	<i>n</i>	%
Number of supervision books/articles read during last 2 licensure cycles		
0	7	15.91
1-3	16	36.36
4-6	11	25.00
7-9	1	2.27
10-14	3	6.82
15-19	3	6.82
≥ 20	3	6.82
Number of multicultural supervision books/articles read during last 2 licensure cycles		
0	9	20.45
1-3	21	47.73
4-6	6	13.64
7-9	2	4.55
10-14	4	9.09
≥ 15	2	4.55

Table 3

*Frequencies of Multicultural Supervisory Behaviors Rated as Most Important*

Behavioral statement	Observed frequency	Expected frequency (proportion)
Creating a safe (nonjudgmental, supportive) environment for discussion of multicultural issues, values, and ideas through the use of verbal and nonverbal communication	31	11 (0.05)
Addressing feelings of discomfort experienced by trainees concerning multicultural issue	23	11 (0.05)
Inviting supervisee to explore and discuss possible existence of personal cultural biases and prejudices on the conceptualization and practice with clients	20	11 (0.05)
Acknowledging and discussing realities of racism/oppression during supervision	17	11 (0.05)
Providing supervisee with a multiculturally diverse caseload to ensure breadth of clinical experience	14	11 (0.05)
Acknowledging and discussing power issues in supervision that may be related to racial/ethnic multicultural differences	14	11 (0.05)
Modeling for supervisee by initiating, attending to, and demonstrating interest and respect for client's intersecting identities and culture during case conceptualization and discussion	14	11 (0.05)
Communicating acceptance of and respect for supervisee's own culture and perspectives through verbal phrases	11	11 (0.05)
Initiating respectful and explicit discussions about the importance of culture/multicultural issues during supervision	11	11 (0.05)
Articulating a commitment to develop multicultural competence by discussing expectations within the first two supervision sessions	10	11 (0.05)
Listening [to] and providing affirming statements to demonstrate genuine respect [for] supervisee's ideas about how culture influences the clinical interaction	10	11 (0.05)
Engaging supervisee actively in discussions to explore clients' cultural perspectives	9	11 (0.05)
Initiating dialogue during supervision about supervisees' own racial/ethnic identity development	8	11 (0.05)
Encouraging discussion regarding multicultural issues by presenting myself non-defensively such as maintaining an open posture and calming tone of voice when supervisee shows feelings of anger, rage, and/or fear when these issues are raised during supervision	7	11 (0.05)
Identifying and discussing racial/ethnic cultural differences reflected in parallel process issues (supervisor/supervisee and supervisee/client)	6	11 (0.05)
Encouraging supervisee to share, within supervision, their personal and professional cultural background and experiences	5	11 (0.05)
Consulting colleagues willingly about my own reactions to racial/ethnic concerns as a result of any supervision experience	4	11 (0.05)
Acknowledging, discussing, and providing affirming statements that demonstrate respect for racial/ethnic multicultural similarities and differences between myself and supervisee, and discussing feelings concerning these similarities and/or differences	4	11 (0.05)
Self-disclosing own development of self-awareness about cultural/ethnic identity, biases, and limitations	2	11 (0.05)
Providing recommended multicultural readings and related training experiences to supervisee	0	11 (0.05)

Note.  $\chi^2 = 98.15^*$ ,  $df = 19$ . Numbers in parentheses, (), are expected proportions.

\* $p < 0.001$ .

Table 4

*Top Five Supervisory Behaviors Compared to Bottom Five Supervisory Behaviors*

Behavioral statement	Type of focus	Frequency rank
Creating a safe (nonjudgmental, supportive) environment for discussion of multicultural issues, values, and ideas through the use of verbal and nonverbal communication	Process	1
Addressing feelings of discomfort experienced by trainees concerning multicultural issue	Supervisee Focused Personal Development	2
Inviting supervisee to explore and discuss possible existence of personal cultural biases and prejudices on the conceptualization and practice with clients	Supervisee Focused Personal Development	3
Acknowledging and discussing realities of racism/oppression during supervision	Supervisee Focused Personal Development	4
Providing supervisee with a multiculturally diverse caseload to ensure breadth of clinical experience	Process	5
Acknowledging and discussing power issues in supervision that may be related to racial/ethnic multicultural differences	Process	5
Modeling for supervisee by initiating, attending to, and demonstrating interest and respect for client's intersecting identities and culture during case conceptualization and discussion	Conceptualization	5
Encouraging supervisee to share, within supervision, their personal and professional cultural background and experiences	Supervisee Focused Personal Development	16
Consulting colleagues willingly about my own reactions to racial/ethnic concerns as a result of any supervision experience	Supervisor Focused Personal Development	17
Acknowledging, discussing, and providing affirming statements that demonstrate respect for racial/ethnic multicultural similarities and differences between myself and supervisee, and discussing feelings concerning these similarities and/or differences	Supervisor Focused Personal Development	17
Self-disclosing own development of self-awareness about cultural/ethnic identity, biases, and limitations	Supervisor Focused Personal Development	19
Providing recommended multicultural readings and related training experiences to supervisee	Supervisee Focused Personal Development	20

## APPENDIX A

## Literature Review Tables

## Literature Review Table: Clinical Supervision

### Clinical Supervision – Theoretical Publications

Author(s)/ Year	Research Questions/ Objectives	Research Approach/ Design	Instrumentation	Sample	Major Findings
Barnett and Molzon (2014)	<ul style="list-style-type: none"> <li>To describe and explain the elements of the ethical, legal, and competent practice of clinical supervision</li> </ul>	Conceptual/ theoretical framework	N/A	N/A	<ul style="list-style-type: none"> <li>Tailoring the supervision provided to each individual supervisee's training needs is essential</li> <li>It is essential that a thorough informed consent process be engaged in at the outset of the supervisory relationship</li> <li>The clinical supervisor will likely take a rather active role in the beginning of the supervisory relationship, and then gradually reduce his or her involvement to allow the supervisee to take on greater autonomy and responsibility</li> <li>The supervisee must perceive the supervisory relationship to be sufficiently safe to be able to openly share thoughts, ideas, experiences, and feelings with the supervisor</li> <li>In addition to all the teaching that clinical supervisors provide, they also serve the important function of professional role model</li> <li>Issues of diversity in all its forms should be given active attention in all aspects of the supervision process as well as within the supervisory relationship</li> <li>It is important for supervisors to address issues of diversity between the supervisor and supervisee within supervision as well as to foster the development of cultural competence for supervisees in their work with clients</li> </ul>

Author(s)/ Year	Research Questions/ Objectives	Research Approach/ Design	Instrumentation	Sample	Major Findings
Borders (2014)	<ul style="list-style-type: none"> <li>To highlight the differences between competencies and best practices</li> <li>To describe the development and content of one comprehensive statement, the Best Practices in Clinical Supervision created for the field of counseling and counselor education</li> <li>To illustrate the applicability of the Best Practices across disciplines and countries through a comparison and contrast with several other existing documents</li> <li>To briefly examine the development of supervisor expertise, which requires not only declarative knowledge (competencies) and procedural</li> </ul>	Literature review; conceptual/theoretical framework	N/A	N/A	<ul style="list-style-type: none"> <li>The development of supervisor expertise, requires reflective knowledge and the insights one gains over time about how and when to adapt (even improvise)</li> <li>One’s supervision approach is based on the context, supervisee, and client through recognizing the complexity, ambiguity, and ill-defined problems endemic to supervision</li> <li>Meta-competence is defined as “the ability to assess what one knows and what one doesn’t know” or “the need to make appropriate adaptations in order to maximize the supervisee’s ability to learn” and the ability to “apply professional judgment to complex issues”</li> <li>Reflective knowledge is built during years of practice and is dependent on continual self-awareness, self-assessment, self-monitoring, and self-reflection, which are predominant characteristics of expert supervisors as reported in a recent study</li> <li>“Professional artistry,” based in supervisor’s reflective knowledge, requires both reflection-in-action, supervisors’ thinking about what they are doing while they are doing it, as well as reflection on reflection-in-action</li> </ul>

Author(s)/ Year	Research Questions/ Objectives	Research Approach/ Design	Instrumentation	Sample	Major Findings
Cashwell, Looby, and Housley (2008)	<p>knowledge (statements of best practices), but also reflective knowledge</p> <ul style="list-style-type: none"> <li>• To provide specific supervision techniques and tasks to help service providers examine issues of cultural diversity in their work</li> <li>• To facilitate more effective multicultural services through the supervision process</li> </ul>	Conceptual/ theoretical framework	N/A	N/A	<ul style="list-style-type: none"> <li>• It is important to raise the issue of cultural diversity in group or individual supervision when cultural issues may be affecting the therapeutic process</li> <li>• Less experienced clinicians may not consider the influence of culture on the therapeutic relationship</li> <li>• Raising multicultural issues in individual and group supervision encourages self-exploration with multicultural populations, supervisors need to consult with minority colleagues and remain open to increasing their own knowledge, skills, and self-awareness with multicultural populations to increase their effectiveness as supervisors</li> <li>• Cultural heterogeneity within supervision groups, when possible, also is encouraged</li> <li>• Self-reports from the counselor may be unreliable or even biased accounts of counseling sessions; direct methods such as review of audiotapes or live supervision are needed to help clinicians identify issues of cultural blindness or cultural encapsulation</li> </ul>



Author(s)/ Year	Research Questions/ Objectives	Research Approach/ Design	Instrumentation	Sample	Major Findings
Falender and Shafranske (2007)	<ul style="list-style-type: none"> <li>• To review perspectives on competence as a construct</li> <li>• To define competency-based clinical supervision, with particular attention to the nature of ethical, legal, contextual, and practice issues that arise</li> <li>• To discuss challenges faced in clinical supervision</li> <li>• To make recommendations for best practices</li> </ul>	Theoretical framework	N/A	N/A	<ul style="list-style-type: none"> <li>• Competence, an ethical principle that informs the practice of psychology, refers to requisite knowledge, skills, and values for effective performance</li> <li>• A presumption of clinical competence is implicit in supervision</li> <li>• The supervisor is presumed to be more competent than the supervisee in most areas, including the practice of supervision and the content areas supervised</li> <li>• A competency-based approach can be used to enhance supervisor and practitioner competence similar to its application in clinical training</li> <li>• Clinical supervision ideally requires a foundation of education and training, continuous self-assessment (leading to self-directed learning), and participation in professional development</li> <li>• Among the ethical standards, multicultural competence is an area that requires particular attention in our self-assessment practice and commitments to development and training in light of the existing literature</li> </ul> <p>For supervisors, research has reported:</p> <ul style="list-style-type: none"> <li>• Inattention to culture and diversity in cross-cultural supervisory dyads (Burkard et al., 2006)</li> <li>• Supervisors not as culturally competent as their supervisees (Constantine, 2001)</li> </ul>

Author(s)/ Year	Research Questions/ Objectives	Research Approach/ Design	Instrumentation	Sample	Major Findings
Falender and Shafranske (2014)	<ul style="list-style-type: none"> <li>• To highlight recent developments and the state of the art in supervision, with particular emphasis on the competency-based approach</li> <li>• To presents effective clinical supervision strategies, providing an integrated snapshot of the current status</li> <li>• To examine current training practices in supervision and challenges</li> </ul>	Theoretical framework	N/A	N/A	<ul style="list-style-type: none"> <li>• Failure to acknowledge lack of cross-racial supervision experience (Duan &amp; Roehlke, 2001)</li> <li>• Failure to initiate discussion of cultural differences between supervisor and supervisee (Gatmon et al., 2001)</li> <li>• Failure to initiate diversity discussions in general even though this has been demonstrated to enhance alliance (Gatmon et al., 2001)</li> <li>• Greater attention has been placed on diversity factors, emphasizing multicultural supervision practice</li> <li>• Effective supervision is defined as practice that encourages supervisee development and autonomy, facilitates the supervisory relationship, protects the client, and enhances both client and supervisee outcomes.</li> <li>• An ethical imperative underlying all clinical practice and supervision is diversity competence</li> <li>• Although greater attention is being directed to diversity, still data are emerging that supervisors often are not initiating consideration of multiple diversity factors in supervision, nor are factors of privilege, historical trauma, and oppression being addressed (Falender, Shafranske, &amp; Falicov, 2014; Hernandez &amp; McDowell, 2010)</li> <li>• Specific competence is needed to address the multiple identities (e.g., race, socioeconomic status, sexual orientation, gender identity,</li> </ul>

Author(s)/ Year	Research Questions/ Objectives	Research Approach/ Design	Instrumentation	Sample	Major Findings
Falender, Shafranske, and Ofek (2014)	<ul style="list-style-type: none"> <li>To explore the strengths and emerging competencies of the supervisee and the clinical and supervision competencies of the supervisor.</li> <li>To address the state of the literature on</li> </ul>	Meta-theoretical framework with case example	N/A	N/A	<p>ethnicity, religion, disability, age) among client, supervisee/psychotherapist, and supervisor to consider the multiple worldviews and the effects of these upon the assessment and treatment of the client</p> <ul style="list-style-type: none"> <li>Addressing these diversity competence factors and providing feedback and training when supervisees do not demonstrate adequate competence are important supervisor responsibilities</li> <li>In the collaborative supervisory relationship, the supervisee is empowered to address diversity issues such as generation (age) and culture to reflect on different perspectives</li> <li>Other factors affecting effective clinical supervision include supervisory alliance, addressing personal factors and countertransference in supervision, competences, self-assessment, feedback, evaluation, and ethical and legal competencies</li> <li>In developing a strong supervisory alliance, the personal characteristics and behaviors of the supervisor such as warmth, empathy, genuineness, respect, flexibility, a nonjudgmental stance, and transparency are important factors</li> <li>Supervisors are more likely to build and maintain effective supervisory relationships and to promote trainee self-efficacy by using supervisory skills such as encouraging developmentally appropriate autonomy, expressing confidence and trust in trainees'</li> </ul>

Author(s)/ Year	Research Questions/ Objectives	Research Approach/ Design	Sample	Instrumentation	Major Findings
	<p>effective clinical supervision and the specific knowledge, skills, and attitudes that comprise competent supervision</p> <ul style="list-style-type: none"> <li>• To provide a brief summary of research on several particular pivotal areas, i.e. alliance, multicultural competence, legal and ethical issues</li> <li>• To provide a self-assessment device for both current supervisors and supervisors-in-preparation to assess readiness, competence, and areas in which additional training and experience are desirable</li> <li>• To provide a vignette illustrating the implementation of effective</li> </ul>				<p>abilities, providing positive as well as constructive feedback, demonstrating their own clinical expertise in the service of trainee growth, and being responsive to supervisee's individual learning styles</p> <ul style="list-style-type: none"> <li>• Best practices around multicultural competence include self-awareness of one's own multiple cultural identities and the impact of supervisor worldview on supervision and the clinical work, adopting a position of cultural humility, exercising meta-competence, and not erroneously assuming one is competent in facilitating culturally responsive supervision</li> <li>• Engaging in reflective practice and identifying areas for further growth in multicultural competence is part of a commitment to a lifetime of learning – a core value in professional psychology – and pertinent especially to issues of multicultural competence</li> <li>• A supervisor's transparency in acknowledging gaps or limitations in knowledge or the challenges in implementing culture-sensitive approaches to treatment provides an opening for mutual discussion and models meta-competence and commitment to enhancing multicultural competence</li> <li>• Trainee disclosure is a necessary component for effective supervision. Without such disclosure, a supervisor cannot confidently carry out the supervisory tasks of protecting the</li> </ul>

Author(s)/ Year	Research Questions/ Objectives	Research Approach/ Design	Instrumentation	Sample	Major Findings
	supervision practices				trainee's clients and helping to promote to trainee's competence
Herbert and Caldwell (2015)	<ul style="list-style-type: none"> <li>• To define clinical supervision and barriers to supervision</li> <li>• To examine the developmental process in progressing from counselor to supervisor roles</li> <li>• To review effective practices in group supervision</li> <li>• To discuss multicultural perspectives on supervision</li> <li>• To identify clinical supervision strategies consistent with good ethical practice</li> </ul>	Conceptual/theoretical framework	N/A	N/A	<ul style="list-style-type: none"> <li>• Issues of diversity in age, disability, ethnicity, gender, religious affiliation and spirituality, sexual orientation, and/or socioeconomic status are embedded in every professional and social relationship and, as a result, how we perceive one another will be manifested within the supervisory relationships</li> <li>• It is always the supervisor's responsibility to initiate and address multicultural aspects</li> <li>• Supervisors, who are skilled in self-disclosing their cultural heritage, biases, values, and worldviews consistent with their supervisory style, can offer a safe environment for the counselor with a more regressed racial identity, so that greater self-awareness occurs to promote change</li> </ul>
Ladany (2014)	<ul style="list-style-type: none"> <li>• To present a conceptualization of the theoretical, empirical, and practical elements</li> </ul>	Conceptual/theoretical framework	N/A	N/A	<ul style="list-style-type: none"> <li>• Supervisors continue to pose challenges due to culturally misguided notions about supervision and psychotherapy, or by minimizing or altogether ignoring multicultural issues, particularly in relation to gender, race,</li> </ul>

Author(s)/ Year	Research Questions/ Objectives	Research Approach/ Design	Instrumentation	Sample	Major Findings
	<p>of supervisor failures</p> <ul style="list-style-type: none"> <li>• To provide recommendations for increasing supervisor success and limiting supervisor failure</li> </ul>				<p>sexual orientation, and other variables such as disability, social class, and religion</p> <ul style="list-style-type: none"> <li>• Racial microaggressions have been highlighted as problematic in supervisory dyads (Dressel, Consoli, Kim, &amp; Atkinson, 2007), and trainees of color have been found to experience supervisors as culturally unresponsive in comparison to White trainees (Burkard et al., 2006)</li> <li>• With advances in multicultural training at the graduate level, supervisors are now often the least multiculturally adept member of the supervisory dyad, forming what has been referred to as regressive relationships (Constantine, 2001)</li> <li>• Without the desire for, or engagement in, supervisor training, supervisors will likely continue to demonstrate multicultural incompetence and not provide effective supervision</li> <li>• Without such training, supervisors are not likely to facilitate multicultural growth in trainees, such as enhancing their gender or racial identity or increasing their multicultural knowledge or skills in psychotherapy</li> </ul> <p>3 overarching recommendations for supervisors who aspire to become excellent in the field:</p> <ul style="list-style-type: none"> <li>• Training</li> </ul>

Author(s)/ Year	Research Questions/ Objectives	Research Approach/ Design	Instrumentation	Sample	Major Findings
Watkins (2012)	<ul style="list-style-type: none"> <li>• To examine the last 30-year period of supervisor development theory, measurement, and quantitative and qualitative study</li> <li>• To provide a contemporary status report on this subject</li> <li>• To identify some important matters for research and practical consideration</li> </ul>	Literature review; theoretical framework	N/A	N/A	<ul style="list-style-type: none"> <li>• Assessment</li> <li>• Accountability</li> <li>• As of the mid-1990s, psychotherapy supervisor development had been declared "the richest yet most untapped facet of the clinical supervision endeavor"</li> <li>• Five supervisor development models had been proposed</li> <li>• All the models were judged to be quite similar in structure, seemed clinically valid, yet remained incomplete in some respects (e.g., lacking a transition theory) because of their newness</li> <li>• Attention to and interest in psychotherapy supervisor development appeared to be high, and all indications suggested that this area was poised and primed to be taken to its next level of conceptual, experimental, and practical scrutiny and sophistication</li> <li>• Four particular mechanisms that emerged as critical and pivotal for change and growth across models: (1) sufficient interest in being and desire to improve as a supervisor; (2) openness to one's supervisory self-experiencing; (3) capacity for and willing embrace of supervisory self-examination and self-reflection; and (4) action, practice, and experimentation (e.g., with regard to</li> </ul>

Author(s)/ Year	Research Questions/ Objectives	Research Approach/ Design	Instrumentation	Sample	Major Findings
Watkins (2014)	<ul style="list-style-type: none"> <li>• To discuss the most pressing needs currently confronting clinical supervision</li> <li>• To examine where supervision is now relative to four areas: (a) supervision training and practice; (b) measurement; (c) difference and diversity; and (d) research</li> </ul>	Comparative literature review	N/A	N/A	<p>supervision skills, strategy deployment, and alliance formation)</p> <ul style="list-style-type: none"> <li>• Training in supervision matters</li> <li>• The reach of the psychotherapy supervisor is broad, far, and affecting</li> <li>• In the supervision training experience, supervisors strive to enhance the learning and development of their supervisees and, accordingly, their supervisees' patients</li> <li>• Unfortunately, the developmental process, trajectory, and experiences of the supervisor have remained more mystery than manifest for far too long</li> </ul> <p>Difference and Diversity:</p> <ul style="list-style-type: none"> <li>• Difference and diversity are now prominently featured in current supervision competency frameworks</li> <li>• Whatever the country of origin, acquiring multicultural competence appears to now be internationally considered to be a supremely significant, integral aspect of supervision practice</li> <li>• The literature on supervision multicultural issues has grown considerably over the last 20 years and contributed to a better understanding about its practice and limitations</li> <li>• Particular efforts to create models or theoretical visions about multicultural factors and their import and impact on supervision have also been evident across the last two decades</li> </ul>



Author(s)/ Year	Research Questions/ Objectives	Research Approach/ Design	Instrumentation	Sample	Major Findings
Westefeld (2009)	<ul style="list-style-type: none"> <li>To examine current models and issues related to psychotherapy supervision</li> </ul>	Literature review	N/A	N/A	<ul style="list-style-type: none"> <li>The reality remains that multicultural supervision is still “one of the newest kids on the multicultural block, and as such, many of the emerging models and research are yet to be clearly programmatic and interrelated”</li> </ul> <p>Research:</p> <ul style="list-style-type: none"> <li>The number of supervision studies produced each year still tends to be somewhat limited</li> <li>Estimates have indicated that approximately 10 supervision investigations appear annually</li> <li>That limited output can be seen as potentially constraining research advancement</li> </ul> <p>3 supervision models are important models that have made major a major contribution to the field of counseling psychology:</p> <ul style="list-style-type: none"> <li>Developmental approach</li> <li>Systems approach</li> <li>Interpersonal approaches</li> <li>Diversity is one of the most neglected areas in supervision training and research (“Falender &amp; Shafranske, 2004, p.115)</li> <li>Diversity experiences in training combined with personal experiences involving diversity resulted in higher scores related to multicultural competence</li> <li>Higher amounts of coursework in multiculturalism, attending workshops on multiculturalism, and having had supervision in a multicultural situation all contributed to a</li> </ul>

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Author(s)/ Year	Research Questions/ Objectives	Research Approach/ Design	Instrumentation	Sample	Major Findings
					higher skill level in terms of multicultural competence

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### Clinical Supervision – Empirical Studies and Publications

Author(s)/ Year	Research Questions/ Objectives	Research Approach/ Design	Instrumentation	Sample	Major Findings
Atkinson and Woods (2007)	<ul style="list-style-type: none"> <li>To provide current survey data from qualified psychologists about effective supervision</li> </ul>	Qualitative study using focus groups	<ul style="list-style-type: none"> <li>Proprietary questionnaire</li> </ul>	<ul style="list-style-type: none"> <li>N=93 educational psychologists</li> <li>71 of the respondents had experience of supervising a trainee</li> <li>22 did not have supervising experience</li> <li>49 respondents identified that they had been supervised as a trainee within the last five years</li> <li>43 respondents had not</li> </ul>	<ul style="list-style-type: none"> <li>EPs rated the statement “supervision offers guidance, problem-solving and support appropriate to the needs of the trainee,” as the most important in facilitating a successful trainee placement</li> <li>The second highest mean rating given to “effective communication between the supervisor and trainee” emphasizes the importance of communication as a core concept of supervision in establishing a trusting relationship and an effective partnership between supervisor and trainee</li> <li>Difficulties with the supervisory relationship and with effective communication were perceived to be the most significant barriers to effective trainee supervision</li> </ul>
Coleman (2006)	<ul style="list-style-type: none"> <li>Are there identifiable process components of multicultural counselor training that influence trainees’</li> </ul>	Qualitative analyses of critical incidents	<ul style="list-style-type: none"> <li>Demographic questionnaire</li> <li>Multicultural Environment Inventory-Revised (MEI-R)</li> <li>Critical Incident Protocol</li> </ul>	<ul style="list-style-type: none"> <li>N=59 graduate students</li> <li>15% master’s level</li> <li>80% doctoral-level</li> <li>20% men/75% women</li> <li>Average age: 28</li> <li>24% African American/Black, 5% Asian</li> </ul>	<ul style="list-style-type: none"> <li>Three types of influential process components in multicultural counselor training: <ul style="list-style-type: none"> <li>Experiences with colleagues from diverse cultural backgrounds in their multicultural training</li> <li>Didactic and experiential course components</li> </ul> </li> </ul>

Author(s)/ Year	Research Questions/ Objectives	Research Approach/ Design	Instrumentation	Sample	Major Findings
	<p>development of the MCC?</p> <ul style="list-style-type: none"> <li>Does the multicultural environment of the training program affect the different processes?</li> <li>Do trainees of color and White trainees have different experiences in their development of the MCC?</li> </ul>			<p>American, 59% European American/White</p> <ul style="list-style-type: none"> <li>7% Latina/o</li> <li>3% Bi/Multiracial</li> </ul>	<ul style="list-style-type: none"> <li>Experiences with culturally diverse others in their personal lives as being</li> </ul>
Cook and Helms (1988)	<ul style="list-style-type: none"> <li>To study the quality of cross-cultural individual therapist supervision</li> </ul>	Factor analysis	<ul style="list-style-type: none"> <li>Barrett-Lennard Relationship Inventory (BLRI)</li> <li>Worthington and Roehlke's measures of satisfaction</li> <li>Personal data sheet</li> </ul>	<ul style="list-style-type: none"> <li>N=225 non-Caucasian students who were enrolled in clinical and counseling psychology programs</li> <li>57% women</li> <li>57% Blacks</li> <li>Age range between 26-31</li> </ul>	<p>5 nonorthogonal dimensions were identified:</p> <ul style="list-style-type: none"> <li>Supervisor's liking</li> <li>Emotional discomfort</li> <li>Conditional interest</li> <li>Conditional liking</li> <li>Unconditional liking</li> </ul> <p>Findings:</p> <ul style="list-style-type: none"> <li>The combination of supervisor's liking and conditional interest consistently contributed to greater satisfaction</li> </ul>

Author(s)/ Year	Research Questions/ Objectives	Research Approach/ Design	Instrumentation	Sample	Major Findings
Ladany, Mori, and Mehr (2013)	<ul style="list-style-type: none"> <li>To identify supervisor skills, techniques, and behaviors that were deemed effective in facilitating supervisee growth vs. those skills, techniques, and behaviors that were ineffective, or limited or hindered supervisee growth</li> <li>To examine the relationship between effective and ineffective supervisor behavior and supervision process and outcome, specifically the</li> </ul>	<p>Mixed-method design, qualitative and quantitative inquiry</p>	<ul style="list-style-type: none"> <li>Supervisee evaluation of supervisor form</li> <li>Working Alliance Inventory/Supervision-Short Form (WAI/S-Short)</li> <li>Supervisory Styles Inventory (SSI)</li> <li>Supervisor Self-Disclosure Index (SSDI)</li> <li>Trainee Disclosure Scale (TDS)</li> <li>Evaluation Process Within Supervision Inventory (EPSI)</li> </ul>	<p>Trainees:</p> <ul style="list-style-type: none"> <li>N=128</li> <li>100 female, 27 male, 1 unknown</li> <li>Average age: 35.4</li> <li>85% European American/White; 6% Hispanic/Latino(a), 4% African American/Black; 2% Asian American or Pacific Island; 2% Other</li> </ul> <p>Best Supervisors:</p> <ul style="list-style-type: none"> <li>N=128</li> <li>85% White; 4% Hispanic/Latino; 4% African American; 3% Asian American; 2% Other</li> <li>56% female, 41% male</li> <li>87% had doctoral degree</li> </ul> <p>Worst Supervisors:</p> <ul style="list-style-type: none"> <li>N=128</li> </ul>	<p>The most effective supervisor skills, techniques, and behaviors:</p> <ul style="list-style-type: none"> <li>Encouraged autonomy</li> <li>Strengthened the supervisory relationship</li> <li>Facilitated open discussion</li> </ul> <p>The most ineffective supervisor skills, techniques, and behaviors:</p> <ul style="list-style-type: none"> <li>Depreciated supervision</li> <li>Performed ineffective client conceptualization and treatment</li> <li>Weakened the supervisory relationship</li> <li>Empowering the supervisee via encouraging autonomy and facilitating openness to the supervisee's ideas is valued by supervisees</li> </ul> <ul style="list-style-type: none"> <li>Supervisors who were able to demonstrate their clinical knowledge, that is, to self-disclose clinical information that was relevant to the supervisees presenting concerns and was in the service of the supervisee, seemed particularly helpful</li> <li>Feedback that was positive and challenging seemed to be uniquely beneficial to supervisees</li> </ul>

Author(s)/ Year	Research Questions/ Objectives	Research Approach/ Design	Instrumentation	Sample	Major Findings
	<p>supervisory working alliance, supervisor style, supervisor self-disclosure, supervisee nondisclosure, and supervisee evaluation</p> <ul style="list-style-type: none"> <li>• To determine the differences between the best and worst supervisors in relation to the supervisory working alliance, supervisor style, supervisor self-disclosure, supervisee nondisclosure, and supervisee evaluation</li> </ul>			<ul style="list-style-type: none"> <li>• 87% White; 5% Hispanic/Latino; 2% African American; 2% Asian;</li> <li>• Approx. 50/50 female/male</li> <li>• 82% had doctoral degree</li> </ul>	

Author(s)/ Year	Research Questions/ Objectives	Research Approach/ Design	Instrumentation	Sample	Major Findings
Magnuson, Wilcoxon, and Norem (2000)	<ul style="list-style-type: none"> <li>To examine ineffective supervision practices</li> <li>To identify counterproductive supervisory behaviors and to develop a schema for categorizing these behaviors</li> </ul> <p><b>Research questions:</b></p> <ul style="list-style-type: none"> <li>What behaviors lead to the perception of ineffective supervision?</li> <li>What, if any, patterns emerge from these behaviors?</li> </ul>	Qualitative method	<ul style="list-style-type: none"> <li>Semi-structured interviews</li> </ul>	<ul style="list-style-type: none"> <li>N=11</li> <li>Counselors who represented various professional experiences</li> <li>8 men/3 women</li> <li>4 states</li> <li>3 ethnic groups represented: African American, Hispanic, and European American</li> <li>Taught in counselor education programs or practiced in private settings, schools, UCCs, and juvenile correction facilities</li> <li>10 were clinical supervisors</li> </ul>	<p>Analyses of the interview data yielded two broad categories of findings: (a) overarching principles of lousy supervision and (b) general spheres of lousy supervision</p> <p>Lousy Supervision: Overarching Principles (OP)</p> <ul style="list-style-type: none"> <li>OP 1: Unbalanced</li> <li>OP 2: Developmentally inappropriate</li> <li>OP 3: Intolerant of differences.</li> <li>OP 4: Poor model of professional/personal attributes</li> <li>OP 5: Untrained</li> <li>OP 6: Professionally apathetic</li> </ul> <p>Lousy Supervision: General Spheres (GS)</p> <ul style="list-style-type: none"> <li>GS 1: Organizational/administrative</li> <li>GS 2: Technical/cognitive</li> <li>GS 3: Relational/affective</li> </ul>
Murphy and Wright (2005)	<ul style="list-style-type: none"> <li>To examine the use of power in the supervisory</li> </ul>	Qualitative	<ul style="list-style-type: none"> <li>Semi-structured interviews</li> </ul>	<ul style="list-style-type: none"> <li>N=11 supervisees in an academic clinical training program</li> </ul>	<p>Themes for supervisors' power uses included:</p> <ul style="list-style-type: none"> <li>Discussions of power</li> <li>Empowering supervisees</li> </ul>

Author(s)/ Year	Research Questions/ Objectives	Research Approach/ Design	Instrumentation	Sample	Major Findings
	relationship from supervisees' perspectives			<ul style="list-style-type: none"> <li>• 8 females/3 males</li> <li>• 100% Caucasian</li> <li>• Age range: 23-38</li> <li>• 6 in master's-level program; 5 in doctoral-level program</li> <li>• Mix of religious preferences (a variety of Christian identities, i.e. Catholic and Lutheran)</li> </ul>	<ul style="list-style-type: none"> <li>• Promoting an atmosphere of safety</li> <li>• Collaborating with supervisees</li> <li>• Imposition of style/orientation</li> <li>• Misuses of power, i.e. violation of confidentiality</li> </ul> <p>Themes for supervisees' power uses included:</p> <ul style="list-style-type: none"> <li>• Supervisee-peer power</li> <li>• Supervisees as consumers</li> <li>• Withholding information</li> </ul> <p>Recommendations:</p> <ul style="list-style-type: none"> <li>• Because safety is clearly identified as being very important in supervision, supervisors should think about what they can do to facilitate a safe environment in supervision</li> <li>• Supervisors can actively collaborate with and empower their supervisees</li> <li>• Supervisors can be clear about their expectations, in part by providing explicit expectations that are linked to summative and formative evaluations of supervisees</li> </ul>
Russell and Yarhouse (2006)	• To assess how systematically religion / spirituality is incorporated into	Survey	• Web-based survey (18-items)	• N=139 APA-accredited pre-doctoral internship sites	<ul style="list-style-type: none"> <li>• Religion/spirituality is most often addressed in internship training when clients bring it up</li> <li>• Religion/spirituality is processed further in the context of supervision</li> </ul>



Author(s)/ Year	Research Questions/ Objectives	Research Approach/ Design	Instrumentation	Sample	Major Findings
	psychology programs				<ul style="list-style-type: none"> <li>• Relatively few internship sites provide more formal training in religion/spirituality</li> </ul>

## Literature Review Table: Multicultural Supervision

### Multicultural Supervision – Theoretical Publications

Author(s)/ Year	Research Questions/ Objectives	Research Approach/ Design	Instrumentation	Sample	Major Findings
Chang, Hays, and Shoffner (2003)	<ul style="list-style-type: none"> <li>To examine the benefits and challenges related to cross-racial supervision</li> <li>To discuss the significance of integrating racial identity development in the supervision process</li> </ul>	Literature Review Conceptual/ Theoretical	N/A	N/A	<ul style="list-style-type: none"> <li>Cross-racial supervision serves as a rich learning opportunity and a source for personal and professional growth. It also provides an opportunity to increase supervisor and supervisee's levels of multicultural awareness, knowledge, and skills as they examine how cultural variables impact counseling and supervision</li> <li>A review of the literature suggests that it is the supervisors' responsibility to address racial and cultural issues with their supervisees, yet supervisors often ignore or avoid cultural issues</li> <li>A lack of awareness of racial and cultural similarities and differences between the supervisor and supervisee, or a lack of attention to culturally relevant issues, will negatively impact the relationship and may hinder the supervisee's future success in multicultural counseling</li> <li>Cross-racial competence can be enhanced by fostering multicultural training in general. When addressing racial identity issues in supervision, it is effective to focus initially on self-awareness</li> <li>Strategies that encourage both the supervisor and the supervisee to address racial identity issues include journaling and the use of critical incidents</li> </ul>

Author(s)/ Year	Research Questions/ Objectives	Research Approach/ Design	Instrumentation	Sample	Major Findings
Christiansen et al. (2011)	<ul style="list-style-type: none"> <li>To examine the experiences of 7 diverse therapists in a supervision course as they wrestled with the real-world application of multicultural supervision</li> </ul>	Case examples	N/A	N/A	<ul style="list-style-type: none"> <li>Another strategy involves the use of dyads and sharing of stories in group supervision to acknowledge differences and similarities of racial groups and discuss their sources</li> <li>Additional strategies include reading and writing assignments addressing issues related to racial identity, structured immersion and experiential experiences (e.g., visiting cultural centers and attending cultural activities), and the use of role plays in individual supervision</li> <li>Race very much still matters, not only in the lives of clients, but also between supervisors and supervisees</li> <li>Opportunities for increasing the multicultural sensitivity of both therapists and supervisors occur during the supervision process</li> </ul> <p>Despite differing backgrounds, several similarities emerged across case examples:</p> <ul style="list-style-type: none"> <li>In all case examples, negative emotional reactions were present (i.e., discomfort, anxiety, and anger)</li> <li>All of these instances of multicultural supervision were unplanned; they occurred spontaneously out of the content of therapy or supervision</li> <li>All of the therapists involved discuss the need for their supervisor's support and validation of their experiences, including their negative emotional reactions</li> <li>There is a clear need in all of these examples for a safe space within which to communicate and</li> </ul>

Author(s)/ Year	Research Questions/ Objectives	Research Approach/ Design	Instrumentation	Sample	Major Findings
Collins and Pieterse (2008)	<ul style="list-style-type: none"> <li>To discuss 2 perspectives on the Multicultural Counseling Competencies: fixed goal and process</li> <li>To operationalize active racial/cultural awareness</li> <li>To critique current training approaches from a process perspective</li> <li>To discuss the critical incident analysis as a tool for increasing racial/cultural awareness</li> </ul>	Literature review with critique and critical incident analysis	N/A	N/A	<p>process these experiences at the supervisory level, rather than on the therapeutic level</p> <ul style="list-style-type: none"> <li>The analysis of a critical incident should incorporate four core elements: acknowledgment, confrontation, reflection, and commitment</li> <li>Authors recommend that educators review and implement CIABT and other training models that affect <i>the process aspect of multicultural competence</i> and promote active racial/cultural awareness</li> <li>Counselor educators and researchers need greater empirical understanding of the underlying processes of multicultural competence and incompetence to better inform multicultural training strategies</li> <li>Because this involves constructs and phenomena that are unconscious and difficult to measure, the authors recommend that researchers use a variety of research methods</li> </ul>
Eklund, Aros- O'Malley, and Murrieta (2014)	<ul style="list-style-type: none"> <li>To explore cultural factors impacting supervision</li> <li>To outline racial identity development models and their</li> </ul>	Literature review with case examples	N/A	N/A	<p>Literature review was conducted in the following areas:</p> <ul style="list-style-type: none"> <li>Cultural Match</li> <li>White Privilege</li> <li>Communication Styles</li> <li>Training and Supervision</li> <li>Racial Identity Development Models</li> </ul>

Author(s)/ Year	Research Questions/ Objectives	Research Approach/ Design	Instrumentation	Sample	Major Findings
Estrada, Frame, and Williams (2004)	<p>application within the context of culturally competent supervision</p> <ul style="list-style-type: none"> <li>• To highlight best practice considerations for engaging in effective multicultural supervision</li> </ul>	Literature review; case example	N/A	N/A	<ul style="list-style-type: none"> <li>• White Racial Identity Development Model</li> <li>• Framework for Multicultural Supervision</li> <li>• Best Practice Considerations in Multicultural Supervision</li> </ul> <p>The following Best Practice Considerations in MC Supervision were made:</p> <ul style="list-style-type: none"> <li>• Discuss cultural similarities and differences</li> <li>• Show genuine interest in and respect for the supervisee's unique culture</li> <li>• Create a safe and inclusive setting</li> <li>• Model and impart multicultural competencies</li> <li>• Value ongoing professional development opportunities</li> <li>• Apply a multicultural framework for supervision</li> </ul> <p>It is the supervisor's responsibility to facilitate the following examinations in a climate of safety, trust, and comfort...</p> <p>Making Supervision Safe:</p> <ul style="list-style-type: none"> <li>• Acknowledging their personal and professional power is a first step in building a safe climate for the supervisee</li> <li>• Avoid using power in arbitrary and destructive ways and must be intentional about addressing the power inherent in the supervisory relationship</li> <li>• Create a climate of honesty and trust wherein supervisees have the opportunity for honing their counseling skills as well as addressing the personal and contextual issues that arise</li> </ul>

Author(s)/ Year	Research Questions/ Objectives	Research Approach/ Design	Instrumentation	Sample	Major Findings
	cultural supervision				<ul style="list-style-type: none"> <li>• Raise the issues of racial and ethnic difference, of expectations, and fears</li> </ul> <p>Conducting Supervisor and Supervisee Self-Assessment:</p> <ul style="list-style-type: none"> <li>• It is critical for both supervisors and supervisees to consider their own racial and ethnic backgrounds and belief systems and how these may impact the supervisory relationship</li> <li>• One strategy to increase awareness of racial and ethnic identity is for both the supervisor and supervisee to prepare cultural genograms</li> <li>• Other avenues for exploring racial and ethnic identity issues include the use of racial identity inventories</li> <li>• Supervisors and supervisees working with racially different clients are encouraged to self-administer the racial identity inventories and discuss the results in supervision</li> </ul> <p>Embracing Learning Opportunities</p> <ul style="list-style-type: none"> <li>• Taking responsibility for learning about the racial patterns and practices of their ethnically diverse clients</li> </ul> <p>Supervisors and supervisees mutually undertake the task of learning about clients' racial and ethnic context</p> <ul style="list-style-type: none"> <li>• There exists a critical need within applied psychology to understand and promote supervision using a competency-based multicultural framework</li> </ul>
Falender, Burnes, and Ellis (2013)	• To provide background knowledge and context for competency-	Literature review with theoretical and	N/A	N/A	

Author(s)/ Year	Research Questions/ Objectives	Research Approach/ Design	Instrumentation	Sample	Major Findings
	<p>based clinical supervision</p> <ul style="list-style-type: none"> <li>To showcase a diversity of methodologically sound empirical approaches to study effective supervision, including multiculturally competent supervision, and comparative perspectives on supervision cross-culturally</li> </ul>	conceptual implications			<p>Authors provide valuable guidance for supervisors about effective supervision and the complexities of international, cross-cultural, and multicultural group supervision; they offer 6 implications:</p> <ol style="list-style-type: none"> <li>Facilitating and engaging in the transformation to competency-based supervision remaining mindful of power, perspective, and the cultural and diversity relativity and context of competencies</li> <li>Encouraging methodological advances and new constructs in supervision research</li> <li>Attending to multiple identities of client(s), supervisees, and supervisors</li> <li>Translating robust results into frameworks for training of supervisors.</li> <li>Conducting research on effectiveness of supervision training for supervisees in development and for more experienced supervisors</li> <li>Increasing attention to cross-national studies of supervision practice, international competency standards, and evolving practices and guidelines in the international arena</li> </ol>
Foo and Rodolfa (2013)	<ul style="list-style-type: none"> <li>To explore how the TCP Major Contribution, “Multicultural Clinical Supervision and Benchmarks: Empirical Support</li> </ul>	Commentary	N/A	N/A	<p>The article operationalized numerous benchmarks and provided a specific pathway to help supervisors become increasingly multiculturally competent</p> <p>Working Alliance in supervision is key to fostering trainee learning</p> <ul style="list-style-type: none"> <li>The best supervisors build strong supervisory relationships</li> <li>Use of empathy and encouragement</li> </ul>

Author(s)/ Year	Research Questions/ Objectives	Research Approach/ Design	Instrumentation	Sample	Major Findings
	Informing Practice and Supervisor Training," can be applied to the refining of competencies for the profession of psychology				<ul style="list-style-type: none"> <li>• Provide positive and challenging feedback</li> </ul> <p>Supervisor Use of Self/Disclosure: judicious use of self-disclosure by supervisors was very helpful to supervisees</p> <p>Empowering Supervisees:</p> <ul style="list-style-type: none"> <li>• Encouraging autonomy and openness to trainees' ideas</li> <li>• Ability to reflect on own roles and power was particularly helpful to supervisees</li> </ul> <p>Cross-Cultural Competencies</p> <ul style="list-style-type: none"> <li>• Lack of awareness → harmful to supervisees of color</li> </ul> <p>Ethical Behaviors: there is a need for supervisors to frame and model ethical behavior for supervisees</p> <p>Mentorship: particularly effective approach for trainees of color</p> <p>Competency for Supervision and Training, Area D: Awareness of Factors Affecting Quality:</p> <p><u>Readiness for Internship:</u></p> <ul style="list-style-type: none"> <li>• Knowledge about the impact of diversity on all professional settings and supervision participants including self as defined by APA policy</li> <li>• Demonstrates awareness of role of oppression and privilege on supervision process</li> </ul> <p><u>Readiness for Entry to Practice:</u></p> <ul style="list-style-type: none"> <li>• Understanding of other individuals and groups and intersection dimensions of diversity in the</li> </ul>
Fouad et al. (2009)	<ul style="list-style-type: none"> <li>• To outline core foundational and functional competencies in professional psychology across three levels of professional development: readiness for practicum, readiness for</li> </ul>	Conceptual framework	N/A	N/A	



Author(s)/ Year	Research Questions/ Objectives	Research Approach/ Design	Instrumentation	Sample	Major Findings
	<p>internship, and readiness for entry to practice</p> <ul style="list-style-type: none"> <li>To serve as a resource for those charged with training and assessing for competence</li> </ul>				<p>context of supervision practice, able to engage in reflection on the role of one's self on therapy and in supervision</p> <ul style="list-style-type: none"> <li>Demonstrates integration of diversity and multiple identity aspects in conceptualization of supervision process with all participants (clients, supervisee, supervisor)</li> <li>Demonstrates adaptation of own professional behavior in a culturally sensitive manner as appropriate to the needs of the supervision context and all parties in it</li> <li>Articulates and uses diversity appropriate repertoire of skills and techniques in supervisory process</li> <li>Identifies impact of aspect of self in therapy and supervision</li> </ul>
Garrett et al. (2001)	<ul style="list-style-type: none"> <li>To address the need for cultural responsiveness in supervision and provide supervisors with a paradigm to help them work more effectively with supervisees, given differences in values and belief systems, interpretation of experiences, structure</li> </ul>	Theoretical framework	N/A	N/A	<p>VISION is useful for relating the ongoing interactional process of culture in the way that supervisor and supervisee:</p> <p>V (Values and Belief Systems): structure their phenomenal world in terms of <i>Values</i> and belief systems</p> <p>I (Interpretation of Experiences): respond to the internal and external stimuli of their phenomenal world by <i>Interpreting</i> their experiences and ascribing meanings</p> <p>S (Structuring): <i>Structure</i> their phenomenal world according to personal/cultural meanings and preferences that provide appropriate avenues for goal-directed behaviors and expectations</p>

Author(s)/ Year	Research Questions/ Objectives	Research Approach/ Design	Instrumentation	Sample	Major Findings
	<p>preferences, interactional style, operational strategies, and perceived needs of supervisees</p> <ul style="list-style-type: none"> <li>• To describe the VISION model of cultural responsiveness as a practical means of supervisors exploring multicultural issues in the supervisory relationship</li> </ul>				<p>I (Interactional Style): engage in interactive learning and self-expression through an <i>Interactional</i> style of verbal and nonverbal communication in social groups and the surrounding environment that requires a continuous process of adaptation</p> <p>O (Operational Strategies): develop <i>Operational</i> strategies and procedures for accomplishing their expectations and goals</p> <p>N (Needs, Perceived): develop a particular perspective in seeking to fulfill perceived physical, mental, spiritual (emotional) and environmental <i>Needs</i></p>
Gray and Smith (2009)	<ul style="list-style-type: none"> <li>• To introduce an approach to supervision that enhances the supervisor's cultural responsiveness and attention to the influence of diversity</li> <li>• To describe strategies to identify the supervisee's personal qualities</li> </ul>	Theoretical framework (postmodern and constructivist perspectives); case example	N/A	N/A	<p>The authors propose incorporating the conceptual intersection of these two therapy approaches to set the stage for a framework for supervision:</p> <ul style="list-style-type: none"> <li>• Attentive to the aspects of difference found in the relationship between supervisor and supervisee and</li> <li>• Distinguished by reflective communication and questions (or RCQ) as a comprehensive dialogic and recursive process</li> </ul> <p>Solution-Focused:</p> <ul style="list-style-type: none"> <li>• Socialize the supervisee to a solution-focused supervisory format</li> <li>• Focus on "exceptions" (or a time when the supervisee has experienced some degree of</li> </ul>

Author(s)/ Year	Research Questions/ Objectives	Research Approach/ Design	Instrumentation	Sample	Major Findings
	and skills that could be accessed in order to foster competent practice				<p>success; help supervisee repeat what has worked in the past and to gain confidence in his/her ability to make improvements for the future</p> <ul style="list-style-type: none"> <li>• Explore coping: ask coping questions</li> <li>• Emphasize helping the supervisee construct a positive vision of his/her future work with a client</li> <li>• Use “scaling questions” to identify useful “differences” for the supervisee</li> <li>• Compliment the supervisee for having tried to solve a problem</li> <li>• Pay attention to what was attended to or ignored in supervision sessions</li> </ul> <p>Narrative:</p> <ul style="list-style-type: none"> <li>• Listen to the supervisee’s “story”</li> <li>• Dismantle stuck “stories”</li> <li>• Deconstruct limiting narratives</li> <li>• Engage a preferred reality</li> <li>• Engage outsider witnesses</li> <li>• Utilize metaphors</li> </ul>
Hird, Cavaliere, Dulko, Felice, and Ho (2001)	<ul style="list-style-type: none"> <li>• To provide an overview of the experiences of 4 psychologists-in-training as supervisees in multicultural supervision relationships</li> <li>• To understand supervisees’</li> </ul>	Literature review; case examples	N/A	N/A	<p>Conceptualization and Experience of Multicultural Supervision:</p> <ul style="list-style-type: none"> <li>• Multicultural supervision considers and integrates multiple cultural interactions as they occur within the triadic process of the supervisor, supervisee, and client</li> <li>• Although variations in the definition and operationalization of multicultural supervision exist, all supervision experiences need to integrate culture into the process</li> </ul>

Author(s)/ Year	Research Questions/ Objectives	Research Approach/ Design	Instrumentation	Sample	Major Findings
	<p>needs and perspectives for culturally integrated supervision</p> <ul style="list-style-type: none"> <li>• To discuss multicultural issues during supervision</li> <li>• To provide recommendations for facilitating the development of effective multicultural supervision</li> </ul>				<p>Effects on the Dynamics of Supervision Relationship due to Cultural Differences:</p> <ul style="list-style-type: none"> <li>• Cultural interactions greatly affect the dynamics of supervision relationship</li> <li>• Power differences by race, ethnicity, gender, or other cultural factor also contribute to the quality of the supervisory experience</li> <li>• The greatest cost of not discussing multiculturalism ins supervision typically occurs for those who have the least sociopolitical and contextual power (i.e. the supervisee and the client)</li> </ul> <p>How to Introduce Cultural Issues into the Supervisory Relationship:</p> <ul style="list-style-type: none"> <li>• Conversations about multiculturalism should occur early in supervision, in particular to dispel any preconceptions and assumptions that might undermine the supervision process</li> <li>• Self-disclosures of vulnerability and struggle by an experienced mentor can be comforting to supervisees, providing a model by which supervisees can address their own biases and assumptions as they understand and integrate multiculturalism</li> <li>• Consider the use of semi-structured questions to prompt the discussion of cultural issues in the supervision process</li> </ul> <p>Assessments of Multicultural Competencies:</p> <ul style="list-style-type: none"> <li>• Multicultural Awareness-Knowledge-Skills Survey (MAKSS)</li> </ul>

Author(s)/ Year	Research Questions/ Objectives	Research Approach/ Design	Instrumentation	Sample	Major Findings
Holloway and Wolleat (1994)	<ul style="list-style-type: none"> <li>To examine clinical supervision in professional psychology from the perspective of gender (to describe supervision within the context of gender and power)</li> </ul>	Theoretical framework with case examples	N/A	N/A	<ul style="list-style-type: none"> <li>Cross Cultural Counseling Inventory-Revised (CCCI-R)</li> <li>Multicultural Counseling Inventory (MCI)</li> <li>This article confirms the legitimate power inherent in the role of supervisor regardless of whether a male or female is in the role</li> <li>Gender role characteristics come to play, however, within the trainee role</li> <li>A subordinate position of frequent acquiescence is reinforced interactionally for female trainees</li> <li>Central to supervision is the role of power and involvement in the supervisory relationship and the intentions of the supervisor as she or he designs way of teaching and learning that are necessarily in a context of a professional and hierarchical relational structure</li> </ul>
Inman and DeBoer Kreider (2013)	<ul style="list-style-type: none"> <li>To offer two supervisory interventions, the Critical Events Model and the Heuristic Model of Non-oppressive Interpersonal Development to highlight the use of a multiculturally competent framework in</li> </ul>	Conceptual/Theoretical	N/A	N/A	<ul style="list-style-type: none"> <li>As a key component to effective psychotherapy training, clinical supervision and multicultural competencies have been considered core competencies in the provision of ethical practice</li> <li>Responsibility falls on training programs and supervisors to prepare trainees and supervisees for the ongoing pursuit of multicultural competence</li> <li>Theory suggests that supervisor modeling of culturally appropriate discussions and interventions, as well as acknowledgment of their own limits regarding multicultural knowledge, facilitates supervisee development and competence in the multicultural arena</li> </ul>

Author(s)/ Year	Research Questions/ Objectives	Research Approach/ Design	Instrumentation	Sample	Major Findings
	psychotherapy and supervision				<ul style="list-style-type: none"> <li>• Research indicates that the provision of multiculturally competent supervision positively influences multicultural counseling knowledge, cultural empathy, multicultural counseling self-efficacy, supervisory working alliance and satisfaction with supervision, and learning outcomes</li> <li>• The Critical Events Model is an interpersonal approach that emphasizes multiculturally competent counseling and supervision within an events-based model</li> <li>• There are, currently, two studies that have aimed to provide empirical support for the Critical Events Model</li> <li>• The model emphasizes supervisee learning and growth, and considers the supervisory working alliance to be the “foundation for effective supervision”</li> <li>• Based on the therapeutic working alliance, the supervisory multicultural working alliance is composed of three factors: the emotional bond, an agreement on supervisory goals, and an agreement on the tasks of supervision. Multicultural empathy aids in establishing a strong bond</li> <li>• The supervisory alliance can be the focus of work (figure) in supervision and can also serve as the backdrop (ground), on which other supervisory work is addressed</li> <li>• Three theoretical structures combine to make up multicultural supervision: supervisees’ multicultural competence as therapists,</li> </ul>

Author(s)/ Year	Research Questions/ Objectives	Research Approach/ Design	Instrumentation	Sample	Major Findings
Ladany, Friedlander and Nelson (2005)	<ul style="list-style-type: none"> <li>• To discuss multicultural challenges in supervision</li> <li>• To conceptualize multicultural supervision as incorporating three theoretical structures: supervisees' multicultural competence as therapists, client-</li> </ul>	Conceptual/ Theoretical	N/A	N/A	<p>supervisors' multicultural competence, and client–supervisee– supervisor cultural identity interactions</p> <ul style="list-style-type: none"> <li>• The Heuristic Model of Non-oppressive Interpersonal Development (HMNID) is helpful in determining the ways in which multicultural identities (i.e., gender, race, ethnicity, sexual orientation, disability, socioeconomic status, age, religion, etc.) of each member of the supervisory triad interact and impact the therapeutic and supervisory relationships</li> <li>• Theory suggests that most supervisory/therapeutic successes evolve from parallel-advanced interactions; progressive interactions lead to highest gains in multicultural competence in supervisees/clients; and supervisory/therapeutic failures are more likely to occur within regressive interactions</li> <li>• To assess and enhance multicultural abilities in their supervisees, supervisors must possess these abilities themselves</li> <li>• The less multiculturally adept the supervisor, the more likely there is conflict in the supervisory relationship, with negative consequences for the therapeutic services offered to clients</li> <li>• The task for the supervisor is to identify the type of interaction occurring in the therapy relationship to facilitate the most positive supervision experience possible</li> <li>• In supervision, processes and outcomes can be predicted based on interpersonal relationship interactions</li> </ul>

Author(s)/ Year	Research Questions/ Objectives	Research Approach/ Design	Instrumentation	Sample	Major Findings
	supervisee- supervisor cultural identity interactions, and supervisors' multicultural competence				<ul style="list-style-type: none"> <li>• It might be expected that progressive and parallel-advanced relationships characterize the most productive supervision processes and outcomes, whereas parallel-delayed and regressive interactions produce the least effective ones</li> <li>• More advanced relationships enjoy a strong supervisory alliance and observable gains in supervisee's multicultural competence, whereas the latter might have a weak alliance and no growth in cultural competence</li> <li>• Supervisors must undertake their own journey toward multicultural development such as reading relevant literature and attending continuing education seminars that address various multicultural issues</li> </ul>
Murphy- Shigematsu (2010)	<ul style="list-style-type: none"> <li>• To present personal experiences through narrative as a way of contributing knowledge of the racial and cultural dynamics in supervision</li> <li>• To use microaggressions to examine racial experiences in supervision</li> </ul>	Perspective	N/A	N/A	<ul style="list-style-type: none"> <li>• Supervisors of color are not only targets of discrimination but also perpetrators</li> <li>• The denial of supervisees' identities reveals a lack of respect and empathy, creating significant barriers to a good supervisory relationship</li> <li>• An area of professional development for supervisors of color is understanding the diverse identities of our supervisees, who are increasingly multiethnic and transnational</li> <li>• Supervisors of color also need to reflect on their own identities and how they impede or enhance the quality of supervision</li> <li>• The professional development of supervisors of color can be enhanced by risking vulnerability,</li> </ul>



Author(s)/ Year	Research Questions/ Objectives	Research Approach/ Design	Instrumentation	Sample	Major Findings
Ober, Granello, and Henfield (2009)	<ul style="list-style-type: none"> <li>To propose a model of supervision that enhances multicultural counselor competence in developmentally appropriate ways: Synergistic Model of Multicultural Supervision, (SMMS)</li> </ul>	Conceptual/ Theoretical	N/A	N/A	<p>owning entitlements, and assuming an attitude of “not knowing”</p> <ul style="list-style-type: none"> <li>The Synergistic Model of Multicultural Supervision is an integration of 3 existing models to provide concrete and practical guidance for supervisors wishing to enhance supervisee multicultural competence in personally meaningful and developmentally appropriate ways</li> <li>The model attends to both content and process within the supervisory session and promotes multicultural counselor competence through increasing cognitive complexity, self-reflection, and structured interventions</li> <li>Despite a previous call to integrate developmental and multicultural supervision models, a comprehensive model has yet to emerge</li> <li>A truly comprehensive model must (a) incorporate developmental aspects of supervision by defining the stages of development and providing specific interventions to help supervisees move to higher levels of cognitive development; (b) provide an opportunity to discuss the supervisees’ multicultural competence and heighten awareness of multicultural issues within the supervisory relationship; and (c) be based on the profession’s firmly held stance about the appropriate content for multicultural counseling and supervision, the MCCs</li> </ul>

Author(s)/ Year	Research Questions/ Objectives	Research Approach/ Design	Instrumentation	Sample	Major Findings
Priest (1994)	<ul style="list-style-type: none"> <li>To present an overview of supervision issues that may occur when supervisors are ethnic minority members and supervisors are ethnic majority members</li> </ul>	Conceptual/ Theoretical	N/A	N/A	<ul style="list-style-type: none"> <li>The SMMS emerges from two existing models of supervision (one developmental and the other multicultural), which, when combined with the MCCs, form an integrated and synergistic model that can be used to help develop supervisors' multicultural competence</li> <li>Before discussing cultural differences and similarities with supervisees, supervisors should assist the student in identifying any preexisting prejudices or faulty cognitions related to working with diverse cultures</li> <li>The supervisor has an inherent responsibility to enhance the supervisee's cultural knowledge base without allowing the student to engage in stereotyping</li> <li>Supervisors can minimize the likelihood of supervisees stereotyping clients if it is consistently explained throughout supervision that there is no "generic cultural client"</li> <li>The singular Asian American, African American, Native American, or Hispanic American simply does not exist</li> </ul> <p>Priest (1994) posited that effective supervisors:</p> <p>Stage 1: first go through the process of denying that there are appreciable cultural differences that influence supervision</p> <ul style="list-style-type: none"> <li>Stage 2: involves a recognition of cultural differences without actually knowing what to do with the information</li> <li>Stage 3: is represented by an attempt to identify differences and similarities between and among</li> </ul>

Author(s)/ Year	Research Questions/ Objectives	Research Approach/ Design	Instrumentation	Sample	Major Findings
Ryde (2000)	<ul style="list-style-type: none"> <li>To explore best practice in relation to culturally sensitive supervision</li> </ul>	Theoretical framework	N/A	N/A	<p>the respective cultures that make an impact on the supervisory relationship</p> <ul style="list-style-type: none"> <li>Stage 4: represents the supervisor's attempt to self-identify by discerning where he or she fits in the overall cultural schema</li> <li>Stage 5: the supervisor begins to appreciate cultural distinctiveness and identifies thought, process, and communication patterns that facilitate supervision and assist the supervisee in learning counseling skills</li> <li>Stage 6: is characterized by the supervisor being able to formulate multiple supervisory methodologies that are respectful of the supervisee's culture and interactive style, while remaining professional in nature and scope</li> <li>It is important to become conscious of the supervisor's own culture</li> <li>Habitual ways of thinking may arise out of cultural assumptions and not out of personal pathology</li> <li>Supervisors also exist in a culture which is no more or less valid than the client's but may lead to us holding different values and assumptions</li> <li>Dialogue will throw up cultural clashes and these may be a fruitful way of understanding and negotiating cultural differences</li> <li>Supervisors will work more sensitively if they familiarize themselves with the types and range of differences that may exist in order that they can recognize them when they arise</li> </ul>

Author(s)/ Year	Research Questions/ Objectives	Research Approach/ Design	Instrumentation	Sample	Major Findings
					<ul style="list-style-type: none"> <li>• It is good to be sensitive to the differences that might emerge both in the supervisory and the therapy relationship</li> <li>• To facilitate this sensitivity, supervisors need not only to take an active interest in other cultures and areas of difference but never to assume that they understand the client's cultural work</li> <li>• Start with an interest in finding out from the other whilst also accepting one's own not knowing</li> </ul> <p>Mode 1: Focus on the culture of the client and their context</p> <p>Mode 2: Find ways of responding to the cultural differences and the hidden cultural assumptions implicit in the supervisee's interventions</p> <p>Mode 3: Attend to the culture inherent in the relationship between the client and the supervisee</p> <p>Mode 4: Focus on the cultural assumptions of the supervisee</p> <p>Mode 5: Attend to the cultural differences experienced in the here-and-now cultural dynamics between client and supervisee and how they are mirrored in the supervision relationship</p> <p>Mode 6: Attend to own cultural assumptions</p> <p>Mode 7: Attend to the wider context in which the work is done, particularly organizational, social, and political</p>

Author(s)/ Year	Research Questions/ Objectives	Research Approach/ Design	Instrumentation	Sample	Major Findings
Suthakaran (2011)	<ul style="list-style-type: none"> <li>To present the use of analogies as another method to promote multicultural competence during supervision.</li> </ul>	Conceptual/ Theoretical	N/A	N/A	<ul style="list-style-type: none"> <li>Multicultural competence training has seemed to affect knowledge and skills acquisition more than the facilitation of self-awareness</li> <li>Changes in self-awareness may have the most impact in cultivating multicultural counseling competence</li> <li>Self-awareness is perceived to facilitate cultural empathy, which contributes to more culturally sensitive counseling</li> <li>A number of multicultural scholars have suggested placing more emphasis on including experientially based affective learning as a component of multicultural training to improve the self-awareness and cultural empathy of counselors-in-training</li> <li>Experiential learning, compared with traditional didactic learning, has more capacity to promote a transformation in one's attitudes and beliefs</li> <li>Using analogies as an experiential learning tool in supervision to enhance self-awareness and cultural empathy has the potential to be helpful in a number of ways</li> <li>Analogies provide an effective means of processing multicultural issues with supervisees who have had limited exposure to members of diverse cultures by allowing them to take on the perspective of the "other"</li> <li>The use of analogies can provide a safe strategy to process topics that can be confusing or anxiety-provoking</li> </ul>

Author(s)/ Year	Research Questions/ Objectives	Research Approach/ Design	Instrumentation	Sample	Major Findings
Yabusaki (2010)	<ul style="list-style-type: none"> <li>To describe barriers to the integration of diversity issues into supervision training</li> <li>To implement pedagogy developed for diverse and underserved populations</li> </ul>	Theoretical framework	N/A	N/A	<ul style="list-style-type: none"> <li>Supervisors need to create a safe environment that is conducive for supervisees to stretch and grow</li> <li>At least five barriers impeded diversity training in supervision: <ul style="list-style-type: none"> <li>Supervisees were afraid to discuss color and race in a “White” environment. They feared that they may be perceived as making excuses for their poor performance or using their ethnicity as a defense, or “seen as pathologically preoccupied with color and discrimination”</li> <li>Many supervisors felt inadequately trained on diversity issues. In some cases, trainees knew more than their supervisor</li> <li>There was a lack of empirical evidence to support the models of ethnic and cross-cultural training and their relationship to treatment</li> <li>Psychological training rarely focused on self-knowledge and exploration</li> <li>The process of diversity education itself—the exploration of personal cultural biases and prejudices—induced resistance, defensiveness and inhibition in students</li> </ul> </li> </ul> <p>This article proposes that supervisors:</p> <ul style="list-style-type: none"> <li>Work within the supervisees’ Zone of Proximal Development (ZPD)</li> <li>Use mediated learning experiences that intentionally create collaborative learning environments and mentoring relationships (i.e. Tao mentoring relationship)</li> </ul>

### Multicultural Supervision – Empirical Studies and Publications

Author(s)/ Year	Research Questions/ Objectives	Research Approach/ Design	Instrumentation	Sample	Major Findings
Ancis and Marshall (2010)	<ul style="list-style-type: none"> <li>To investigate the process, climate, and activities of supervision that, from the trainee's perspective, attended competently to multicultural issues</li> </ul>	<p>Qualitative: in-depth, semi-structured interviews (45-60 minutes)</p>	<ul style="list-style-type: none"> <li>Interview questions were developed using Ancis and Ladany's (2001) multicultural framework for counselor supervision</li> </ul>	<ul style="list-style-type: none"> <li>N=4 graduate students from 2 doctoral programs in psychology at 2 southeastern universities</li> <li>1 European American heterosexual man in counseling psychology program</li> <li>1 Asian American heterosexual woman in counseling psychology</li> <li>1 European American lesbian in clinical psychology</li> <li>1 European American heterosexual man in clinical psychology</li> <li>Age range = 27-41</li> </ul>	<p>Domain A1: Supervisor-Focused Personal Development</p> <ul style="list-style-type: none"> <li>Demonstrates strengths and limitations of multicultural knowledge</li> <li>Proactively introduces multicultural issues in supervision</li> <li>Self-discloses cultural biases, cultural background, values, and/or experiences</li> <li>Demonstrates awareness of the clinical significance of racism and oppression</li> </ul> <p>Domain A2: Supervisee-Focused Personal Development</p> <ul style="list-style-type: none"> <li>Facilitates discussions of the impact of supervisees' cultural background on clients</li> <li>Encourages increased multicultural awareness via discussions and activities</li> </ul> <p>Domain B: Conceptualization</p> <ul style="list-style-type: none"> <li>Encourages consideration of cultural assumptions and counselor stereotyping</li> <li>Actively engages supervisee in an exploration of the client's perspective</li> </ul> <p>Domain C: Interventions</p>

Author(s)/ Year	Research Questions/ Objectives	Research Approach/ Design	Instrumentation	Sample	Major Findings
Banks- Johnson (2002)	<ul style="list-style-type: none"> <li>To explore the supervisors' thoughts, feelings, and views on such topics as: race or ethnicity effects on the dyad; the process of addressing</li> </ul>	Qualitative cross-case analysis	Semi-structured interviews	<ul style="list-style-type: none"> <li>Minimum of 2 supervised clinical experiences</li> <li>High degree of interest in MC issues</li> <li>Believed that supervisor described demonstrated competence in working with diverse clients</li> <li>Very satisfied with the degree to which diversity issues were addressed in supervision</li> </ul>	<ul style="list-style-type: none"> <li>Encourages consideration of the client's role in goal setting</li> <li>Encourages supervisee to facilitate the client's awareness regarding social issues</li> </ul> <p>Domain D: Process</p> <ul style="list-style-type: none"> <li>Conveys an acceptance of cultural differences in supervisory relationships</li> <li>Facilitates a safe and open supervisory climate in which the supervisee can be vulnerable and take risks</li> <li>Initiates and engages in discussions about power dynamics</li> </ul> <p>Domain E: Evaluation</p> <ul style="list-style-type: none"> <li>Identifies the supervisee's multicultural strengths and weaknesses</li> <li>Multicultural discussions positively affected client outcomes</li> </ul> <ul style="list-style-type: none"> <li>Race does impact the supervisory relationship when both the supervisor and supervisee are people of color</li> <li>The participants indicated the importance of addressing between and within group differences in supervision</li> </ul> <p>Analyses of the interviews in relation to the literature revealed 3 major themes:</p>



Author(s)/ Year	Research Questions/ Objectives	Research Approach/ Design	Instrumentation	Sample	Major Findings
	<p>cultural factors within the dyad; interactions within the dyad; and other topics as they arose in the interview</p> <ul style="list-style-type: none"> <li>To contribute to the work on the phenomenon of cultural and specifically racial factors in multicultural supervision when both the supervisor and the supervisee are persons of color</li> </ul>			supervising persons of color	<ul style="list-style-type: none"> <li>The importance of introducing cultural factors</li> <li>The impact of cultural variables on the relationship</li> <li>The power dynamics and how power is inherent in the role of supervisor</li> </ul> <p>2 major themes that emerged that were not discussed in the literature review:</p> <ul style="list-style-type: none"> <li>How within-group similarities influence the relationship</li> <li>Supervision of persons with disabilities and the effect on the relationship</li> </ul> <p>2 implications for graduate programs:</p> <ul style="list-style-type: none"> <li>Addressing cultural variables at the beginning of the supervisory relationship and infusing cultural awareness throughout training and throughout all levels of the profession</li> <li>These implications apply to counselor educators, mental health practitioners, and counseling professional organizations</li> </ul>

Author(s)/ Year	Research Questions/ Objectives	Research Approach/ Design	Instrumentation	Sample	Major Findings
Bertsch et al. (2014)	<ul style="list-style-type: none"> <li>• What types of gender related events (GREs) do trainees experience in psychotherapy supervision?</li> <li>• How do supervisors attend to these GREs?</li> <li>• What is the relationship between the interventions that supervisors use and the resolution of the critical event?</li> <li>• What is the relationship between GREs, the supervisory working alliance, and supervisees' perceptions of their supervisors' multicultural competence as it relates to GREs?</li> </ul>	<p>Consensual Qualitative Research-Modified (CQR-M)</p>	<ul style="list-style-type: none"> <li>• Demographic form</li> <li>• Gender-Related Events Questionnaire (GEQ)</li> <li>• The Working Alliance Inventory/Supervision-Short (WAI/S-Short)</li> <li>• Cross-Cultural Counseling Competency Inventory-Revised (CCCI-R)</li> </ul>	<ul style="list-style-type: none"> <li>• N=81</li> <li>• 78% women, 16% men</li> <li>• Age range: 23-53</li> <li>• 80% White, 6% Black, 4% Biracial, 3% Hispanic/Latinas/Latinos, 1% Multiracial</li> <li>• 56% in Ph.D. programs, 20% in PsyD programs, 16% masters level</li> <li>• 31% completing internship, 52% in advanced practicum training, 10% in first year of training</li> <li>• 37% in UCC, 21% in CMH, 14% in hospitals, 22% in other settings</li> </ul>	<ul style="list-style-type: none"> <li>• Gender bias and discrimination continue to exist in the supervisory relationship</li> <li>• 4 types of GREs reported by counseling trainees: <ul style="list-style-type: none"> <li>○ Gender Discrimination</li> <li>○ Gender Identity Interactions</li> <li>○ Attraction</li> <li>○ Power Dynamics</li> </ul> </li> <li>• While supervisors attended to GREs using various interventions, the most frequently used intervention (therapeutic process, exploration of feelings, focus on skills, and focus on self-efficacy) were significantly related to the resolution stage</li> <li>• GREs related to Gender Discrimination were significantly and negatively related to the supervisory working alliance and supervisees' perceptions of supervisors' gender-related multicultural competence</li> <li>• In addressing the GRE, trainees reported 11 primary supervisor interventions that focused on: therapeutic process, exploration of feelings, skills, self-efficacy, multicultural awareness, normalizing experience, countertransference, knowledge, supervisory alliance, evaluation, and parallel process</li> </ul>

<p>Bhat and Davis (2007)</p>	<ul style="list-style-type: none"> <li>To investigate the role of race, racial identity attitudes and working alliance in counseling supervision using data obtained from supervisors in supervisory dyads</li> </ul> <p>Research questions:</p> <ul style="list-style-type: none"> <li>Do supervisory dyads with parallel high racial identity interactions have the strongest working alliance from the perspective of supervisors?</li> <li>Do supervisory dyads with parallel low racial identity interactions have the weakest working alliance from the perspective of supervisors?</li> <li>Do matched supervisory dyads (i.e., both</li> </ul>	<ul style="list-style-type: none"> <li>Quantitative</li> </ul>	<ul style="list-style-type: none"> <li>Demographic questionnaire</li> <li>White Racial Identity Attitude Scale (WRIAS)</li> <li>Color Racial Identity Attitude Scale (PRIAS)</li> <li>Perceptions of Supervisee Racial Identity for Whites (PSeRIW)</li> <li>Perceptions of Supervisee Racial Identity for POC (PSeRIP)</li> <li>Working Alliance Inventory-Supervisor version (WAI-S)</li> </ul>	<ul style="list-style-type: none"> <li>N=119</li> <li>counseling supervisors in a mid-western state (80 female, 39 male)</li> <li>Age range: 31-74</li> <li>Supervision experience: between 6 months-40 years</li> <li>Earned master's degree = 90, doctorate degree = 21, "other" qualifications = 8</li> <li>87 reported a mean of 16.59 hours of specific training in multicultural issues</li> <li>White (90.8%), African American (8.4%), Latino (n=1)</li> <li>White supervisees (78.2%), African Americans (20.2%), Middle Eastern (1.7%).</li> </ul>	<ul style="list-style-type: none"> <li>Results revealed the strongest working alliance for supervisor-supervisee pairs with high racial identity development and the weakest working alliance for pairs with low racial identity development</li> <li>The difference in supervisory working alliance between the four racial identity groups (parallel high, parallel low, progressive, and regressive) was significant with a small to medium effect size</li> <li>Post hoc tests revealed a significant difference in working alliance means between the parallel high group and the parallel low group, and between the regressive group and the parallel low group</li> <li>No statistically significant difference was found in working alliance for the four racial matching/nonmatching groups of supervisory dyads</li> </ul>
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Author(s)/ Year	Research Questions/ Objectives	Research Approach/ Design	Instrumentation	Sample	Major Findings
Burkard, Knox, Clarke, Phelps, and Inman (2014)	<p>supervisor and supervisee of the same race) report a stronger supervisory working alliance than unmatched racial dyads?</p> <ul style="list-style-type: none"> <li>To examine supervisors' experiences of providing difficult feedback when supervisors and supervisees were of different cultural backgrounds</li> </ul>	Qualitative	<ul style="list-style-type: none"> <li>Demographic form</li> <li>Semi-structured interview protocol</li> </ul>	<ul style="list-style-type: none"> <li>N=17 supervisors (14 psychologists; 3 post-internship/all-but-dissertation graduate students)</li> <li>10 in counseling psychology, 7 in clinical psychology</li> <li>12 female/5 male</li> <li>Age range: 28-53</li> <li>9 European American, 3 African American, 2 Asian American, 1 Biracial, 1 International, 1 Latina</li> </ul>	<ul style="list-style-type: none"> <li>Not only do cultural differences between supervisors and supervisees influence the feedback process in supervision, the type of cultural topic (e.g., difficulty connecting with clients, unwillingness to integrate cultural issues into work with clients) may also influence the feedback process in supervision</li> <li>EASRs (European American supervisors) addressed specific counseling skills (e.g., communication patterns, attending, active listening, use of restatements, questions and reflections of feelings), while SRCs (supervisors of color) addressed supervisees' cultural insensitivity</li> <li>There may be strong differences in providing supervision feedback about skills in contrast to personality-based feedback</li> <li>Align the focus of supervision with specific goals that are established at the onset of supervision</li> </ul>

Author(s)/ Year	Research Questions/ Objectives	Research Approach/ Design	Instrumentation	Sample	Major Findings
Burkard et al. (2006)	<ul style="list-style-type: none"> <li>To examine supervisors' experiences of cross-cultural supervision when supervisors were responsive or unresponsive to cultural issues</li> </ul>	Qualitative study	<ul style="list-style-type: none"> <li>Demographic form</li> <li>Semi-structured interview protocol</li> </ul>	Supervisees: <ul style="list-style-type: none"> <li>26 doctoral students in professional psychology programs</li> <li>100% women</li> <li>Age range: 24-48</li> <li>13 European Americans</li> <li>13 Supervisees of Color (SECs)</li> </ul> Interviewers and Auditors: <ul style="list-style-type: none"> <li>2 research teams (Team A interviewed only SECs; Team B</li> </ul>	<ul style="list-style-type: none"> <li>It is recommended that during initial supervision sessions, supervisors and supervisees set specific goals, including those related to cultural competence</li> <li>Furthermore, not all cultural competency goals can be anticipated at the beginning of supervision; thus, it is important that supervisors take the lead in setting expectations with supervisees that such issues will be addressed in supervision</li> <li>Culturally responsive and unresponsive supervision experiences were quite powerful events. For these participants, the events affected not only the supervisees but also the supervision relationship and client treatment</li> <li>Most aspects of EASEs' and SECs' experiences of culturally responsive events were quite parallel, but their experiences of culturally unresponsive events were quite divergent</li> </ul> Culturally Responsive Events <ul style="list-style-type: none"> <li>Important supervision behaviors that may be used to enhance cultural responsiveness: asking questions about cultural issues, encouraging supervisees to elaborate on conceptualizations that include cultural issues, or challenging</li> </ul>

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				interviewed only EASE's)	<p data-bbox="222 1512 292 1843">supervisees to consider how the client's cultural background may be influencing her or his current situation or problem</p> <ul data-bbox="222 378 292 1843" style="list-style-type: none"> <li data-bbox="222 378 292 1843">• Only SECs reported experiencing discomfort with regard to the culturally responsive event → Supervisors need to be aware of how powerful their responsiveness, or lack thereof, to cultural issues may be for supervisees and that for some SECs, responsiveness may be a rare experience</li> <li data-bbox="222 378 292 1843">• Culturally responsive event yielded positive effects on supervisees' clinical cases</li> </ul> <p data-bbox="222 378 292 1843">Culturally Unresponsive Events</p> <ul data-bbox="222 378 292 1843" style="list-style-type: none"> <li data-bbox="222 378 292 1843">• SECs perceived their supervisors as actively working to discredit or discount the importance of cultural issues in therapy</li> <li data-bbox="222 378 292 1843">• The culturally unresponsive event (whether actively or passively, ignore or discount cultural issues) yielded negative reactions from both EASEs and SECs, including anger, frustration, and disappointment</li> <li data-bbox="222 378 292 1843">• SECs described more intense and inward-focused negative consequences than their EASE counterparts (e.g., distrusting their European American supervisor,</li> </ul>

Author(s)/ Year	Research Questions/ Objectives	Research Approach/ Design	Instrumentation	Sample	Major Findings
Constantine and Sue (2007)	<ul style="list-style-type: none"> <li>To investigate the specific forms of racial microaggressions that might occur in supervisory relationships between Black supervisees and White supervisors and the issues that might characterize these incidents</li> </ul>	Qualitative analysis	<ul style="list-style-type: none"> <li>Semi-structured interview protocol</li> </ul>	<ul style="list-style-type: none"> <li>10 Black supervisees who were enrolled in either an advanced practicum or externship course in one of three doctoral programs in either counseling or clinical psychology in the northeastern U.S.</li> <li>8 female/2 male</li> <li>Age range: 25-38</li> <li>6 supervisees reported that their supervisor was a White woman/4 indicated that their supervisor was a White man</li> </ul>	<p>feeling more guarded during supervision, hiding their emotional</p> <ul style="list-style-type: none"> <li>SECs expressed more concern about the effect of the culturally unresponsive event on client treatment than did EASEs</li> </ul> <ul style="list-style-type: none"> <li>Theme 1: Invaliding Racial–Cultural Issues: Many of the Black supervisees in this study indicated that their White supervisors at times tended to minimize, dismiss, or avoid discussing racial–cultural issues in supervision</li> <li>Theme 2: Making Stereotypic Assumptions About Black Clients</li> <li>Theme 3: Making Stereotypic Assumptions About Black Supervisees</li> <li>Theme 4: Reluctance to Give Performance Feedback for Fear of Being Viewed as Racist</li> <li>Theme 5: Focusing Primarily on Clinical Weaknesses: Several Black supervisees indicated that their White supervisors tended to focus primarily on their clinical deficits (as opposed to also providing feedback about clinical strengths)</li> </ul>

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Dressel et al. (2007)	<ul style="list-style-type: none"> <li>To use the Delphi method to identify specific behaviors characterizing both successful and unsuccessful multicultural supervision, as identified by knowledgeable practicing</li> </ul>	Delphi method	<ul style="list-style-type: none"> <li>Response form containing the definitions of successful and unsuccessful multicultural supervisory behaviors</li> </ul>	<ul style="list-style-type: none"> <li>Training directors from 34 UCCs that belonged to the Association of Counseling Center Training Agencies (ACCTA)</li> <li>Round 1: 34 potential panelists</li> <li>Round 2: 21 panelists who</li> </ul>	<ul style="list-style-type: none"> <li>Theme 6: Blaming Clients of Color for Problems Stemming From Oppression: Several Black supervisees noted that their White supervisors tended to blame clients of color for the circumstances that brought them to counseling, even when such issues seemed to be related to prejudice, racism, discrimination, and other forms of oppression</li> <li>Theme 7: Offering Culturally Inensitive Treatment Recommendations: Several Black supervisees in this study reported that their supervisors made treatment recommendations that did not appear to be culturally sensitive, and these trainees seemed to believe that the recommendations were tied to racism or unexamined cultural biases</li> </ul>



Author(s)/ Year	Research Questions/ Objectives	Research Approach/ Design	Instrumentation	Sample	Major Findings
	professionals involved in training and supervision at UCCs			<p>responded to Round 1</p> <ul style="list-style-type: none"> <li>• Round 3: 18 panelists from Round 2</li> <li>• Responses were received from 13 panelists</li> </ul>	<p>Successful multicultural supervision:</p> <ul style="list-style-type: none"> <li>• 35 successful MC supervision behaviors can be ordered into 3 dimensions: supervisory tasks; multicultural supervisory relationship; personal and professional growth of the successful multicultural supervisor</li> <li>• Supervisory tasks: administrative and informational behaviors</li> <li>• Multicultural supervisory relationship: requires the core conditions of openness, genuineness, empathy, and warmth; it must also provide the needed safety aspects that invite a discussion of multicultural issues, values, and ideas, and how they influence the clinical interaction</li> </ul> <p>Unsuccessful multicultural supervision:</p> <ul style="list-style-type: none"> <li>• Supervisors' lack of awareness of their own racial, ethnic, and cultural biases as being the most detrimental to multicultural supervision</li> <li>• Lack of sensitivity to the impact of culture</li> <li>• Inflexibility on the part of the supervisor</li> <li>• Misguided intentions</li> <li>• Failing to establish a working alliance</li> <li>• Failing to recognize the power of the supervisory role</li> </ul>

Author(s)/ Year	Research Questions/ Objectives	Research Approach/ Design	Instrumentation	Sample	Major Findings
Duan and Roehlike (2001)	<ul style="list-style-type: none"> <li>• Did supervisors, as a group, express positive attitudes towards their racially different supervisee and make active efforts to address cultural and racial differences between them?</li> <li>• How did supervisees, as a group, perceive their supervisors' attitudes, behaviors, and personal characteristics?</li> <li>• How would supervisors' and supervisees' perceptions of each other's characteristics, behaviors, and attitudes predict their satisfaction with the supervisory relationship?</li> </ul>	Survey design	<ul style="list-style-type: none"> <li>• Cross-Racial Supervision Survey (with scaled items and open-ended questions)</li> </ul>	<ul style="list-style-type: none"> <li>• 60 pre-doctoral interns (40 men and 20 women)</li> <li>• 58 supervisors (30 men and 28 women)</li> <li>• From 49 UCC internships that were scattered across the U.S.</li> <li>• Supervisees: 77% from counseling psychology, 16% from clinical psychology, 7% from professional school programs</li> </ul>	<ul style="list-style-type: none"> <li>• Supervisees were more sensitive to cultural/racial issues than were supervisors</li> <li>• Supervisors reported making more efforts to address cultural issues than supervisees perceived</li> <li>• Satisfaction with supervision was related to supervisees' self-disclosure and dyad members' perceived positive attitudes toward each other</li> </ul>

Author(s)/ Year	Research Questions/ Objectives	Research Approach/ Design	Instrumentation	Sample	Major Findings
Fukuyama (1994)	<ul style="list-style-type: none"> <li>To explore the usefulness of eliciting "critical incidents" in supervision and its applicability to multicultural supervision research</li> </ul>	<p>Phenomenological approach (Critical Incidents)</p>	<ul style="list-style-type: none"> <li>Brief questionnaire to solicit "critical incidents"</li> </ul>	<ul style="list-style-type: none"> <li>N=18 racial-ethnic minority students who completed internship at an APA approved pre-doctoral internship site (UCCs)</li> <li>12 women/6 men</li> <li>Respondents: 10 (6 women/4 men)</li> <li>Ethnicities represented: African American, Asian American, Latin and Caribbean Islands, and International</li> </ul>	<p>3 categories of positive critical incidents related to multicultural issues:</p> <ul style="list-style-type: none"> <li>Openness and support</li> <li>Culturally relevant supervision</li> <li>Opportunities to work in multicultural activities</li> </ul> <p>2 categories of negative critical incidents related to multicultural issues:</p> <ul style="list-style-type: none"> <li>Lack of supervisor cultural awareness</li> <li>Questioning supervisee abilities</li> </ul> <p>General findings:</p> <ul style="list-style-type: none"> <li>Ethnic minority interns expressed concerns for support and recognition of competency from their supervisors</li> <li>Multicultural issues in supervision were salient for ethnic trainees and have important implications for training</li> <li>It is recommended that supervisors receive training in multicultural issues and that supervisors initiate discussion of multicultural issues with supervisees</li> <li>On an organizational level, activities such as ethnic walk-in hours, special interest counseling groups, brown bag seminars on multicultural issues, and intern seminars serve to enhance multicultural training</li> </ul>

Author(s)/ Year	Research Questions/ Objectives	Research Approach/ Design	Instrumentation	Sample	Major Findings
Gardner (2002)	<ul style="list-style-type: none"> <li>To explore what factors in the supervisory relationship contribute to a growth-promoting climate vs. a growth-limiting climate, as perceived by cross-cultural supervisees</li> </ul>	<p>Comparative method of qualitative research</p>	<ul style="list-style-type: none"> <li>Cultural Perspective Interview (CPI)</li> </ul>	<ul style="list-style-type: none"> <li>N=8 supervisees</li> <li>7 African Americans, 1 White American</li> <li>7 females, 1 male</li> <li>Ages 24-50</li> <li>Received supervision by a supervisor from a different ethnicity</li> <li>All from graduate counselor education programs at universities in the Midwest and southern regions of the U.S.</li> </ul>	<p>Growth-promoting factors:</p> <ul style="list-style-type: none"> <li>Competence of the supervisor as perceived to be knowledgeable, to have demonstrated good facilitative skills, and to have possessed attributes of compassion, concern, fairness, and honesty</li> <li>Interpersonal bond between supervisor and supervisee (rewarding supervisory experience if supervisors were described as being receptive, dedicated, genuine, humble, empathic, respectful, and humorous)</li> </ul> <p>Growth-limiting factors:</p> <ul style="list-style-type: none"> <li>Cultural insensitivity</li> <li>Communication styles</li> <li>Critical feedback</li> </ul>
Gatmon et al. (2001)	<ul style="list-style-type: none"> <li>Supervisory discussions about culture: are similarities and differences in terms of ethnicity, gender, and sexual orientation discussed in supervision? If so, who initiates</li> </ul>	<p>Quantitative exploratory study</p>	<ul style="list-style-type: none"> <li>The Working Alliance Inventory (Horvath &amp; Greenberg, 1989)</li> <li>The Supervision Questionnaire-Revised (Worthington &amp; Roehlke, 1979)</li> </ul>	<ul style="list-style-type: none"> <li>N=289 pre-doctoral psychology interns</li> <li>European Americans: 73.4%</li> <li>African Americans: 6.6%</li> <li>Asian Americans: 5.9%</li> <li>Chicano/Latino: 5.2%</li> </ul>	<p>Supervisory Discussions of Cultural Variables</p> <ul style="list-style-type: none"> <li>Low frequency and lack of initiation of discussions (of cultural variables) during supervision were noted in all areas investigated, particularly regarding sexual orientation in which 55% of supervisees initiated these discussions</li> </ul> <p>Cultural Discussions and Supervisory Alliance</p>

Author(s)/ Year	Research Questions/ Objectives	Research Approach/ Design	Instrumentation	Sample	Major Findings
	<p>these discussions?</p> <ul style="list-style-type: none"> <li>• Cultural discussions and supervisory alliance and satisfaction: do trainees who discuss supervisor-supervisee similarities and differences report higher satisfaction rates with supervision and enhanced working alliance with their supervisors than trainees who do not discuss similarities and differences?</li> <li>• Quality of discussions: does the quality of the supervisory discussions relate to the supervisory working alliance and intern</li> </ul>		<ul style="list-style-type: none"> <li>• Discussion of cultural variables questions</li> <li>• Demographic questions</li> </ul>	<ul style="list-style-type: none"> <li>• Jewish/Caucasian : 5.2%</li> <li>• Multiracial: 3.1%</li> <li>• Arab Americans: 0.3%</li> <li>• Women/Men: 70%/30%</li> </ul>	<ul style="list-style-type: none"> <li>• When cultural variables are discussed in the supervisory relationship, supervisees report significantly higher satisfaction with supervision and an enhanced working alliance</li> </ul> <p>Quality of Cultural Discussion and Supervision</p> <ul style="list-style-type: none"> <li>• Providing an atmosphere of safety, depth of dialogue, and frequent opportunities to discuss cultural variables in the supervisory relationship significantly contribute to building alliances and increasing satisfaction</li> </ul> <p>Cultural Match and Supervisory Alliance</p> <ul style="list-style-type: none"> <li>• It is not the cultural match between supervisor and supervisee itself that is important but the presence and quality of the discussion of difference and similarity</li> <li>• When differences exist, discussions should occur and supervisors should be better equipped to initiate them</li> </ul>

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Green and Dekkers (2010)	<p>satisfaction with supervision?</p> <ul style="list-style-type: none"> <li>• Cultural match and the influence on working alliance: does supervisory match on the cultural variables studied relate to the supervisory working alliance and intern satisfaction with supervision?</li> </ul>	Survey	<ul style="list-style-type: none"> <li>• Demographic information</li> <li>• Feminist Supervision Scale (FSS)</li> <li>• Supervision Feedback Form (SFF)</li> </ul>	<p>42 supervisees from COAMFTE-accredited programs</p> <ul style="list-style-type: none"> <li>• 81% female</li> <li>• 95% heterosexual</li> <li>• 76% White, 7% African American/Black, 2% Asian, 5% Latino/Hispanic, 5% Biracial/Multiracial, 5% Other</li> <li>• Average age: 28</li> </ul>	<ul style="list-style-type: none"> <li>• From supervisees' perspective, attending to power and diversity in supervision influenced satisfaction with supervision and learning outcomes</li> <li>• From supervisors' perspective, there were no significant effects of attending to power and diversity in clinical supervision on supervisor satisfaction with supervision or supervisee learning outcomes</li> </ul> <p>Research questions:</p>

Author(s)/ Year	Research Questions/ Objectives	Research Approach/ Design	Instrumentation	Sample	Major Findings
	<ul style="list-style-type: none"> <li>• Are supervisors in training institutions attending to power and diversity?</li> <li>• Are attending to power and attending to diversity related to satisfaction with supervision?</li> <li>• Are attending to power and attending to diversity related to supervisee learning outcomes?</li> </ul>			<ul style="list-style-type: none"> <li>• Average years of clinical experience: 2.16</li> <li>22 supervisors from COAMFTE-accredited programs</li> <li>• 68% female</li> <li>• 96% heterosexual</li> <li>• 96% White</li> <li>• Average age: 42</li> <li>• Average years of clinical experience: 14.65</li> </ul>	
Hernández, Taylor, and McDowell (2009)	<ul style="list-style-type: none"> <li>• To explore the experiences of racial and ethnic minority AAMFT supervisors during their training years as supervisees and as active clinical supervisors</li> <li>• To understand how diversity issues impact</li> </ul>	Consensual Qualitative Research	<ul style="list-style-type: none"> <li>• Semi-structured interview</li> </ul>	<ul style="list-style-type: none"> <li>• 10 AAMFT approved supervisors between the ages of 36 and 62</li> <li>• 9 females/1 male</li> <li>• 9 identified as heterosexual; 1 as bisexual</li> <li>• Chicana, Puerto Rican, South Asian, Chinese, Mixed,</li> </ul>	<p>3 themes emerged summarizing ethnic minority supervisors' experiences as supervisees-in-training:</p> <ul style="list-style-type: none"> <li>• Lack of processing social location and diversity dimensions: Most participants in our study felt that their supervisors conducted supervision from a Eurocentric perspective that denied their identities and social locations</li> <li>• Misuse of power by supervisors: Participants in this study exposed misuses in power by supervisors,</li> </ul>

Author(s)/ Year	Research Questions/ Objectives	Research Approach/ Design	Instrumentation	Sample	Major Findings
	training and supervision			African American, and Chinese <ul style="list-style-type: none"> <li>• Class background: range between Lower Class and Upper Middle Class</li> <li>• Range of experiences as supervisors: between 4-20 years</li> </ul>	including experiencing overt racism in supervision (e.g. supervisors using racial slurs, giving less attention to the training of supervisees of color) <ul style="list-style-type: none"> <li>• Lack of mentorship in the profession: Participants in our study referred frequently to mentoring and support that was essential to their growth as therapists and which came from outside of their supervisory relationships</li> </ul>
Hird, Tao, and Gloria (2005)	<ul style="list-style-type: none"> <li>• To examine the self-reported multicultural supervision competence of White and Racial/Ethnic Minority (REM) supervisors within racially similar and racially different supervision dyads</li> </ul>	Quantitative	<ul style="list-style-type: none"> <li>• Two-page survey (researcher-developed questions and a standardized measure)</li> <li>• Cross-Cultural Counseling Competence Inventory-Revised</li> </ul>	<ul style="list-style-type: none"> <li>• N=442 supervision dyads</li> <li>• 316 racially-similar dyads</li> <li>• 126 racially-different dyads</li> <li>• In racially-similar dyads, White supervisor/White supervisee (93.4%), REM supervisor/REM supervisee (6.6&amp;)</li> <li>• In racially-different dyads, 75% were White supervisors with REM supervisees,</li> </ul>	<ul style="list-style-type: none"> <li>• Overall, REM supervisors reported more MC supervision competence than White supervisors.</li> <li>• In racially similar dyads, REM supervisors spent significantly more time addressing cultural issues in supervision than White supervisors</li> <li>• White supervisors discussed cultural issues significantly more with racially different supervisees than racially similar supervisees</li> <li>• Supervisors differed in which cultural issues they discussed and considered applicable to supervision</li> </ul>



Author(s)/ Year	Research Questions/ Objectives	Research Approach/ Design	Instrumentation	Sample	Major Findings
Inman (2006)	<ul style="list-style-type: none"> <li>To investigate the direct and indirect effects of marriage and family therapy trainees' perceptions of their supervisors' multicultural competence in supervision on the supervisory working alliance, trainees' multicultural competence (case conceptualization abilities in etiology and treatment), and perceived supervision satisfaction</li> </ul>	Quantitative	<ul style="list-style-type: none"> <li>Demographic Form</li> <li>Supervisor Multicultural Competence Inventory (SMCI)</li> <li>Working Alliance-Trainee Version (WAI-T)</li> <li>Multicultural Case Conceptualization Ability determined by a coding system</li> <li>Supervision Satisfaction Questionnaire (SSQ)</li> </ul>	<p>25% were REM supervisors with White supervisees</p> <ul style="list-style-type: none"> <li>Supervisors: nearly 50/50 male/female</li> <li>N=147</li> <li>26 males/121 females</li> <li>Age range: 21-72</li> <li>Caucasian: 103; African American: 12; Asian American: 13; Hispanic American: 13; Native American: 1; Biracial: 3; Did not specify: 2</li> <li>Master's level: 90; postgraduate level: 15; doctoral level: 37; did not specify: 5</li> </ul>	<ul style="list-style-type: none"> <li>Although supervisor multicultural competence was directly and positively associated with supervisory working alliance and supervision satisfaction, supervisor multicultural competence had a direct, but negative, relationship with trainee etiology conceptualization abilities (multicultural case conceptualization abilities may be influenced by variables beyond those assessed in this study such as self-awareness and self-confidence)</li> <li>Supervisory working alliance served as a significant positive mediator in the relationship between supervisor multicultural competence and supervision satisfaction</li> <li>A supervisory relationship that involves an implementation of cultural competence through a mutual agreement on goals and tasks related to a focus on multicultural issues may provide for greater supervision satisfaction</li> </ul>

Author(s)/ Year	Research Questions/ Objectives	Research Approach/ Design	Instrumentation	Sample	Major Findings
Jernigan, Green, Helms, Perez- Gualdron, and Henze (2010)	<ul style="list-style-type: none"> <li>To explore racial dynamics from the perspective of supervisees of Color within supervision dyads with supervisors of Color</li> </ul>	<p>Qualitative exploratory study</p>	<ul style="list-style-type: none"> <li>Demographic data</li> <li>Semi-structured survey</li> </ul>	<ul style="list-style-type: none"> <li>6 supervisees of Color (with supervisors of Color)</li> <li>3 masters/3 doctoral-level students in the department of counseling psychology at a university on the east coast</li> </ul>	<ul style="list-style-type: none"> <li>Supervisees reported that their supervisors evidenced a range of responses to race being introduced into the supervisory relationship</li> <li>Although some respondents demonstrated an understanding of the necessity to initiate conversations about race and culture in supervision, they reported that their supervisors did not; consequently, these interactions proved to be problematic</li> <li>Despite having to initiate conversations about race, their supervisors were receptive to the discussion and challenged supervisees to continue to engage in the dialogue; supervisees in such relationships subsequently reported growth-fostering experiences.</li> <li>Respondents' descriptions of dyads, comprised of two people of Color, were not necessarily positive when discussions of race in supervision were the focus</li> <li>Not all people-of Color supervisors are inherently better at understanding racial and cultural information, solely because they are people of Color</li> <li>Supervisees of Color frequently reported an internalization of self-doubt and incompetence when they perceived that their supervisors were</li> </ul>

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Kaduvettoor et al. (2009)	<ul style="list-style-type: none"> <li>To examine the relationship between multicultural events in group supervision, group climate, and supervisee multicultural competence</li> </ul>	Mixed qualitative/quantitative design	<ul style="list-style-type: none"> <li>Multicultural Events in Group Supervision Questionnaire (MEGSQ)</li> <li>Group Climate Questionnaire-Short Form (GCQ-S)</li> <li>Cross-Cultural Counseling Inventory-Revised (CCCI-R)</li> </ul>	<ul style="list-style-type: none"> <li>136 therapists in training</li> <li>94 women/25 men/17 unspecified</li> <li>7 identified as African American, 5 Asian American, 7 Latino/a, 1 Middle Eastern, 1 native American, 95 White, 2 Biracial, 2 Other,</li> </ul>	<p>not open to discourse about race within supervision</p> <ul style="list-style-type: none"> <li>Trainees of Color, who endorsed the importance of using racial and cultural conceptualizations in counseling practice, were deterred from doing so when their supervisors did not provide support or encouragement. The impact of a regressive supervision relationship was both psychologically taxing and had negative consequences for the training experience for supervisees of color</li> <li>Progressive dyads were described as educative and growth-fostering in both personal and professional domains</li> <li>The discovery-oriented approach yielded 196 helpful and hindering multicultural events among 136 participants</li> <li>The most common events included multicultural learning and peer vicarious learning</li> <li>Supervisees suggested improving their group supervision through better integration of multicultural issues and more supervisor involvement</li> <li>Regarding group climate, supervisees reporting peer vicarious learning or multicultural learning experienced higher group engagement, whereas</li> </ul>

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Kissil, Davey, & Davey (2015)	<ul style="list-style-type: none"> <li>To examine the associations between acculturation, supervisors' multicultural competence, and clinicians' self-efficacy in a sample of 153 immigrant therapists currently practicing in the U.S.</li> </ul>	Quantitative	<ul style="list-style-type: none"> <li>Demographic Survey</li> <li>The American-International Relations Scale (AIRS)</li> <li>The Counselor Activity Self-Efficacy Scales (CASES)</li> <li>The Supervisor Multicultural Competence</li> </ul>	<ul style="list-style-type: none"> <li>and 16 Unspecified</li> <li>4 identified as gay, lesbian, or queer; 7 as bisexual; 106 as heterosexual; and 19 declined to specify</li> <li>29 master's level students; 88 doctoral level; 19 unspecified</li> <li>42 cross-racial supervisory dyads</li> <li>N=153</li> <li>137 female/16 male</li> <li>Age range: 23-69</li> <li>Age of arrival to the US: 14-46</li> <li>Number of years living in the US: 0-30</li> <li>White: 42; Asian: 17; Hispanic/Latino: 8; Middle Eastern: 5; African/Black/African American: 2; Biracial: 4;</li> </ul>	<ul style="list-style-type: none"> <li>misapplications of multicultural theory related to higher reports of group conflict</li> <li>Increased multicultural learning and extra-group multicultural events positively related to supervisees' multicultural competence whereas multicultural conflicts with supervisors, misapplication of multicultural theory, and the absence of multicultural events negatively related to supervisee multicultural competence</li> <li>Perceived prejudice, not level of acculturation, was significantly associated with foreign-born therapists' clinical self-efficacy</li> <li>Perceived supervisors' multicultural competence was significantly associated with therapists' clinical self-efficacy</li> <li>Foreign-born therapists feel more clinically self-efficacious when their supervisors are multiculturally competent</li> <li>It is especially important for clinical supervisors to openly discuss and actively explore cross-cultural interactions with foreign-born supervisees, including all parts of the</li> </ul>

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			Inventory (SMCI)	Other: 22; Race not indicated: 52	<p>training triad and the sociopolitical context (supervisor/supervisee, therapist/client, therapist/larger community where therapist works)</p> <ul style="list-style-type: none"> <li>• Supervisors can encourage foreign-born supervisees to more deeply examine their experiences of acculturation and any perceived prejudice in the United States to identify how these experiences might emerge during therapeutic encounters with U.S. clients</li> <li>• Knowing that experiences of prejudice in the United States have the potential to reduce their foreign-born supervisees' sense of clinical self-efficacy, supervisors can encourage foreign-born therapists to discuss prejudicial experiences and how to manage them</li> <li>• Supervisors who value the perspective that foreign-born therapists bring to therapeutic encounters in the U.S. can help their supervisees feel more validated and worthy and, as a result, more clinically self-efficacious</li> </ul>

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Ladany, Inman, Constantine, and Hofheinz (1997)	<ul style="list-style-type: none"> <li>To test the hypothesis that supervisors' multicultural case conceptualization ability and self-reported multicultural competence are functions of their racial identity and their supervisors' instruction to focus on multicultural issues</li> </ul>	Quantitative	<ul style="list-style-type: none"> <li>Demographic questionnaire</li> <li>Cultural Identity Attitude Scale (CIAS)</li> <li>White Racial Identity Attitude Scale (WRIAS)</li> <li>Cross-Cultural Counseling Inventory—Revised (CCCI-R)</li> </ul>	<ul style="list-style-type: none"> <li>N=116 psychology trainees</li> <li>84 female/30 male, 2 did not indicate)</li> <li>52 doctoral-level trainees; 64 master's-level counselor trainees</li> <li>Age range: 21-58</li> <li>White: 75; African American: 20; Asian American: 11; Latino: 8; Native American: 1; Biracial: 1</li> <li>72% of respondents noted having taken at least one course on ethnic and racial diversity issues</li> </ul>	<ul style="list-style-type: none"> <li>Racial identity was significantly related to self-reported multicultural competence</li> <li>Racial identity for both POC and White groups was not significantly related to multicultural case conceptualization ability</li> <li>Self-reported multicultural competence was not found to be significantly related to multicultural case conceptualization ability</li> <li>Supervisors' instruction to focus on multicultural issues was significantly related to conceptualizations of a multicultural treatment strategy</li> </ul>
Mori, Inman, and Caskie (2009)	<ul style="list-style-type: none"> <li>To explore the relationship between international trainees' acculturation level and cultural discussion on</li> </ul>	Quantitative	<ul style="list-style-type: none"> <li>Demographic questionnaire</li> <li>American-International Relations Scale (AIRS)</li> </ul>	<ul style="list-style-type: none"> <li>N=104 international trainees</li> <li>84 female/18 male, (2 unknown)</li> <li>Average age: 30</li> </ul>	<ul style="list-style-type: none"> <li>Students who had lower acculturation levels but greater cultural discussion showed more satisfaction with supervision</li> <li>Supervisor multicultural competence positively influenced international</li> </ul>

Author(s)/ Year	Research Questions/ Objectives	Research Approach/ Design	Instrumentation	Sample	Major Findings
	<p>supervision satisfaction</p> <ul style="list-style-type: none"> <li>To examine the mediating effect of cultural discussions on the relationship between perceived supervisor multicultural competence and trainee satisfaction with supervision</li> </ul>		<ul style="list-style-type: none"> <li>International Student Supervision Scale- Multicultural Discussion (ISSS-MD)</li> <li>Supervisor Multicultural Competency Inventory (SMCI)</li> <li>Supervision Satisfactory Questionnaire (SSQ)</li> </ul>	<ul style="list-style-type: none"> <li>32 in counseling psychology program; 33 in clinical psychology program; 13 in marriage and family therapy program; 7 in school psychology/counseling; 4 in social work; 7 in other types of program (e.g., I/O Psychology); 8 in unknown program</li> <li>Doctoral-level: 72; Master's level: 22; Unknown program: 10</li> </ul>	<p>trainees' experience with supervision both directly and indirectly</p> <ul style="list-style-type: none"> <li>Although international trainees experienced more satisfaction when they perceived their supervisors as culturally competent, the level of cultural discussion partially explains the relationship between supervisor multicultural competence and international trainees' satisfaction with supervision</li> </ul>
Nilsson and Anderson (2004)	<ul style="list-style-type: none"> <li>To explore the relationships among acculturation counseling self-efficacy, role ambiguity, and the supervisory working alliance</li> </ul>	Survey	<ul style="list-style-type: none"> <li>Counseling Self-Estimate Inventory (COSE)</li> <li>Role Conflict and Role Ambiguity Inventory (RCRAI)</li> </ul>	<ul style="list-style-type: none"> <li>42 international students enrolled in APA-accredited professional psychology programs</li> <li>Participants represented 20</li> </ul>	<p>International students who reported being less acculturated also reported:</p> <ul style="list-style-type: none"> <li>Less counseling self-efficacy</li> <li>Weaker supervisory working alliances</li> <li>More role difficulties in supervision</li> <li>More discussion of cultural issues in supervision</li> </ul>

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Ninomiya (2012)	<p>in international students</p> <ul style="list-style-type: none"> <li>• To explore the experience of Asian foreign-born therapists of supervision with European-American supervisors</li> </ul> <p><b>Research questions:</b></p> <ul style="list-style-type: none"> <li>• What was the experience of Asian foreign-born therapists in cross-cultural supervision with European-</li> </ul>	Qualitative	<ul style="list-style-type: none"> <li>• American-International Relations Scale (AIRS)</li> <li>• Supervisory Working Alliance Inventory-Trainee Form (SWAI-Trainee Form)</li> <li>• International Student Supervision Scale (ISSS)</li> </ul> <p>In-depth interviews guided by open-ended questions about supervisory experiences</p>	<ul style="list-style-type: none"> <li>• N=7 Asian foreign-born therapists</li> <li>• 5 female/2 male</li> <li>• Average age: 27-43</li> <li>• 3 Japanese, 1 Taiwanese, 1 Chinese, 1 South East Asian, 1 Indian</li> </ul> <p>Inclusion criteria:</p> <ul style="list-style-type: none"> <li>• Individuals who were ethnically Asian</li> </ul>	<ul style="list-style-type: none"> <li>• countries and 6 continents</li> <li>• 62% women</li> <li>• 62% in clinical psychology programs</li> <li>• 31% in counseling programs</li> <li>• 7% in school psychology programs</li> </ul>	<ul style="list-style-type: none"> <li>• Asian foreign-born therapists' experiences of cross-cultural supervision with European-American supervisors varied from a positive and supportive to a challenging and difficult</li> <li>• Foreign-born trainee level of acculturation was likely to affect the supervisory working alliance because cultural and language barriers in supervisory dyads might prevent the development of a positive supervisory working alliance</li> <li>• As the foreign-born trainees proceeded in their clinical training, their language and cultural barriers decreased, and their level of clinical</li> </ul>



Author(s)/ Year	Research Questions/ Objectives	Research Approach/ Design	Instrumentation	Sample	Major Findings
	<p>American supervisors?</p> <ul style="list-style-type: none"> <li>• What challenges did the Asian foreign-born supervisees experience in supervision with the European-American supervisor?</li> <li>• How did differences in culture influence the supervisory process and relationship between the European-American supervisor and the Asian foreign-born supervisee?</li> </ul>			<ul style="list-style-type: none"> <li>• Individuals who were born and grew up in Asia</li> <li>• Students-in-training and graduates from accredited professional psychology doctoral programs in the U.S.</li> <li>• Individuals who worked with at least 1 European-American supervisor during clinical training; experienced challenging supervisory events; and had awareness of the impact of cultural differences on the supervisory process and relationship in cross-cultural supervision</li> </ul>	<p>competency increased; as a result, their supervisory alliance tended to be more positive and collaborative</p> <ul style="list-style-type: none"> <li>• Both the supervisor's general competency and multicultural competency affected the Asian foreign trainee's supervisory experiences and working alliance with European-American supervisors</li> <li>• Cultural differences made a significant impact on the process and the relationship in the cross-cultural supervision between the Asian foreign-born trainees and the European-American supervisors</li> <li>• The results indicated that the skill difficulties and deficits of Asian foreign supervisees may be caused by three contextual factors: working in a novel treatment modality, working with a new population, and working in a novel clinical setting, when supervisees were in the early stages of their clinical training as foreign-born trainees</li> </ul>

Author(s)/ Year	Research Questions/ Objectives	Research Approach/ Design	Instrumentation	Sample	Major Findings
Powers (2015)	<ul style="list-style-type: none"> <li>To examine African American supervisors' perception of their Euro American supervisors' awareness of racial and cultural differences, culturally-aware responses, and the impact of racial and cultural differences on the supervisory relationship</li> </ul>	Qualitative (multiple case study)	<ul style="list-style-type: none"> <li>Screening Form</li> <li>Demographic questionnaire</li> <li>Interviews</li> <li>Supervisory Working Alliance Inventory (SWAI)</li> </ul>	<ul style="list-style-type: none"> <li>N=8 African American female associate-level licensed counselors who resided in the southeastern region of the United States.</li> <li>Age range: 26-42</li> <li>Minimum of 1 year and a maximum of 3 years of post-licensure experience</li> </ul>	<p>In an examination of the perceptions of racial and cultural differences, supervisor awareness, and the perceived impact of race and culture on the supervisory relationship, 6 major themes emerged:</p> <ul style="list-style-type: none"> <li>Cultural idiosyncrasies</li> <li>Supervisees' ambivalence</li> <li>Cultural contact</li> <li>Microaggressions</li> <li>Power differential</li> <li>Healthy skepticism</li> <li>Supervisors lacked understanding and awareness of how supervisees perceived the impact of racial and cultural differences on the supervisory relationship</li> <li>Although the participants noted that cultural differences are a poignant topic, they admittedly do not discuss them in supervision as it relates to the supervisor- supervisee relationship</li> <li>Participants all noted discussing race and culture related to their clients, but did not directly engage in discussing the racial and cultural differences between them and their supervisor</li> <li>The majority of the participants felt that addressing racial and cultural was a shared responsibility between the supervisor and supervisee</li> <li>Seven of the participants described their supervisor's lack of</li> </ul>

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					<p>understanding of the African American culture</p> <ul style="list-style-type: none"> <li>• While they felt that their supervisor had a contextual understanding of multiculturalism, this understanding did not translate into awareness of the cultural differences and their impacts on multicultural relationships</li> <li>• Participants attributed their supervisor's lack of understanding of their culture to a cultural gap</li> <li>• Although supervisees did not directly discuss their own cultural differences with their supervisors, their assessments of their supervisors' multicultural awareness were based upon discussions about African American clients with their supervisor</li> <li>• Participants' perceptions of their supervisor's multicultural competence and awareness negatively impacted the supervisory working alliance</li> <li>• Five of the participants reported experiencing racial microaggressions and being stereotyped</li> <li>• These experiences impacted the supervisory relationship as well as the supervisory working alliance</li> </ul>
Soheilian, Inman, Klinger, Isenberg,	<ul style="list-style-type: none"> <li>• To examine what topics or aspects of multiculturalism</li> </ul>	Discovery-oriented qualitative approach	<ul style="list-style-type: none"> <li>• Online survey conducted through</li> </ul>	<ul style="list-style-type: none"> <li>• N=102 supervisees</li> <li>• 78% women/22% men</li> </ul>	<ol style="list-style-type: none"> <li>1. Content of Cultural Topics Discussed <ul style="list-style-type: none"> <li>• Revealed 9 subcategories</li> <li>• Race was highlighted as one of the most commonly explored topics</li> </ul> </li> </ol>

Author(s)/ Year	Research Questions/ Objectives	Research Approach/ Design	Instrumentation	Sample	Major Findings
and Kulp (2014)	<p>are discussed when multicultural events were the focus in supervision</p> <ul style="list-style-type: none"> <li>• To understand what supervisory interventions are perceived as salient and culturally sensitive by supervisees</li> <li>• To understand how the supervisee's perceptions of the supervisory experience and the interventions used might influence supervisee's work with clients</li> </ul>	<p><i>Survey Monkey</i></p> <ul style="list-style-type: none"> <li>• Participant demographic questionnaire</li> <li>• Supervisor multicultural competence questionnaire</li> </ul>	<ul style="list-style-type: none"> <li>• European Americans: 68%</li> <li>• Heterosexual: 88%</li> <li>• Age range: 22-67 (mean age of 29.34)</li> <li>• Highest degree: Master's</li> <li>• Practicum settings: academic/college counseling centers (48%); community mental health agencies (26%); hospital settings (13%); private practice (4%)</li> <li>• Clinical experience: 4-24 months</li> <li>• 92% taken at least one MC course</li> <li>• 69% reported attending at least one MC workshop</li> </ul>	<p>during a MC competent moment in supervision (N=43)</p> <ul style="list-style-type: none"> <li>• Gender-related discussions was the second most frequent topics addressed in supervision (N=25)</li> <li>• There seemed to be an interest in talking about issues related to ethnicity and religion/spirituality</li> <li>• Other demographic domains (i.e. SES and sexual orientation) were minimally addressed in supervision.</li> </ul> <p>2. Content of MC-Competent Supervisor Interventions</p> <ul style="list-style-type: none"> <li>• The most common supervision intervention was facilitating exploration or education on specific cultural issues (N=27)</li> <li>• A second common intervention was discussing culturally appropriate therapeutic skills and intervention (N=27)</li> <li>• Facilitating self-awareness (N=25) and challenging supervisee/encouraged openness (N=16) were salient and frequent interventions</li> </ul> <p>3. Content of How the MC Experience Affected Supervisees' Work with Clients</p> <ul style="list-style-type: none"> <li>• Supervisees modifying the treatment approach (N=56)</li> </ul>	

Author(s)/ Year	Research Questions/ Objectives	Research Approach/ Design	Instrumentation	Sample	Major Findings
Taylor, Hernández, Deri, Rankin, and Siegel (2007)	<ul style="list-style-type: none"> <li>To explore how ethnic minority supervisors integrate intersections of diversity in clinical supervisory practices</li> </ul>	Consensual Qualitative Research (CQR)	<ul style="list-style-type: none"> <li>Semi-structured interview with an open-ended format</li> </ul>	<ul style="list-style-type: none"> <li>N=10 AAMFT approved supervisors</li> <li>Ages: 36-62</li> <li>9 females/1 male</li> <li>9 identified as heterosexual/1 as bisexual</li> <li>Supervisory experience: between 4-20</li> </ul>	<ul style="list-style-type: none"> <li>Supervisees developing a more culturally complex client conceptualization (N=18)</li> <li>Supervisees recognizing personal limitations and gaining greater self-awareness as a counselor (N=22)</li> <li>Engaging more empathically with clients (N=22)</li> </ul> <p>Three areas of importance emerged from participants:</p> <ul style="list-style-type: none"> <li>Supervisors' initiative in integrating diversity</li> <li>The impact of social location on current supervision practices</li> <li>The need for mentoring the next generation of therapists</li> </ul>
Toporek, Ortega- Villalobos, and Pope- Davis (2004)	<ul style="list-style-type: none"> <li>To understand how experiences in multicultural supervision influenced supervisees' development</li> <li>To explore how issues of culture are experienced by both</li> </ul>	Qualitative analyses of critical incidents	<ul style="list-style-type: none"> <li>Background questionnaire (demographic information; description of supervisees' level of multicultural training)</li> <li>Multicultural Supervision Critical</li> </ul>	<ul style="list-style-type: none"> <li>Total of 17 supervisees and 11 supervisors at a large mid-Atlantic university</li> <li>5 supervisee and 5 supervisors were matched dyads</li> </ul>	<ul style="list-style-type: none"> <li>Multicultural incidents in supervision influence the supervision process and the multicultural competence of supervisors and supervisees (the influence may be positive or negative, depending on the nature of the supervisory relationship and the manner in which the cultural issues were addressed)</li> <li>Positive influences as a result of a variety of supervisory behaviors may result in an increase in supervisees'</li> </ul>

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	<p>supervisors and supervisees</p> <ul style="list-style-type: none"> <li>To identify recommendations for training based on the experiences of graduate counseling supervisees and their supervisors</li> </ul>		<p>Incidents Questionnaire</p>	<ul style="list-style-type: none"> <li>Counseling experience: 0-8 years</li> </ul>	<p>multicultural competence, particularly in the area of awareness.</p> <p>Content/Situation and Cultural Variables</p> <ul style="list-style-type: none"> <li>Awareness: The most striking influence of positive experiences of multicultural incidents was increased awareness for both supervisors and supervisees. Awareness was reflected in many different forms, including self-disclosures, theoretical discussions, contact with cultural differences, communication, insight-oriented interventions, and other supervisory interactions</li> <li>Skills Development: Supervisors' gains in cultural sensitivity as a result of the self-disclosure of supervisees and other insight-oriented interventions</li> <li>Exposure: Although supervisees did not indicate that exposure to cultural differences was influential in their development, supervisors did believe that exposure was influential in their supervisees' development</li> </ul>
Wieling and Marshall (1999)	<ul style="list-style-type: none"> <li>To gain an understanding of the various cultural factors that influence the supervisor-trainee</li> </ul>	Quantitative	<ul style="list-style-type: none"> <li>36-item survey</li> <li>Demographic questionnaire</li> </ul>	<ul style="list-style-type: none"> <li>N=50</li> <li>24 AAMFT clinical members, 22 student members, 4</li> </ul>	

Author(s)/ Year	Research Questions/ Objectives	Research Approach/ Design	Instrumentation	Sample	Major Findings
	relationship when at least one of these individuals is a member of an ethnic minority group			<ul style="list-style-type: none"> <li>• associate members</li> <li>• 33 female/17 male)</li> <li>• Age range: 24-63</li> <li>• 43 Anglo; 2 Hispanic; 2 Jewish; 1 Other</li> <li>• 7 with BA degrees; 32 MA/MS; 11 Ph.D.</li> </ul>	<ul style="list-style-type: none"> <li>• MFTs believed that there was greater potential for growth and self-awareness provided by cross-cultural supervisory relationships; and on the rare occasions that they did occur, these relationships were highly regarded and valued</li> <li>• The respondents who had been supervised by someone from a different racial and/or ethnic background from their own rated the nature of those supervisory experiences as being better than supervisory experiences with persons of the same background</li> <li>• Findings emphasized the need for greater cultural diversity in MFT training programs</li> <li>• Although MFTs realize the importance of multiculturalism and cross-cultural supervision in the field, they are not frequently provided the opportunity to discuss multicultural issues in training, or to be supervised by, or associate with colleagues that come from a different race and/or ethnicity than their own</li> </ul> <p>Findings from this study:</p> <ul style="list-style-type: none"> <li>• Document the lack of cross-cultural supervisory experiences in the field of MFT</li> </ul>

Author(s)/ Year	Research Questions/ Objectives	Research Approach/ Design	Instrumentation	Sample	Major Findings
Wong, Wong, and Ishiyama (2013)	<ul style="list-style-type: none"> <li>To investigate what helped and what hindered in cross-cultural supervision</li> </ul>	Interview via the Critical Incidents Technique	<ul style="list-style-type: none"> <li>“Think of a time when a supervisor has done or said something that you felt was an example of effective (or ineffective) supervision. Please explain why you judge that to be a helpful (or unhelpful) incident”</li> </ul>	<ul style="list-style-type: none"> <li>N=25 visible minority graduate students and early professionals</li> <li>Recruited from the counseling psychology departments of 5 Canadian universities and 2 universities in the U.S.</li> <li>19 women/6 men</li> <li>Average ages for women and men were 32 and 37, respectively</li> <li>13 Chinese-Canadians; 4 Indo-Canadians; 3 First Nations; 2 Japanese-Canadians; 1 Afro-Canadian; 1</li> </ul>	<ul style="list-style-type: none"> <li>Encourage future research on the effectiveness and relational processes of cross-cultural supervisory relationships</li> <li>Underscore the need for more ethnic minority students to be recruited into MFT training programs</li> <li>A total of 150 positive incidents and 191 negative incidents were identified</li> <li>5 Positive Themes <ul style="list-style-type: none"> <li>Personal attributes of the supervisor</li> <li>Supervision competencies</li> <li>Mentoring</li> <li>Relationship</li> <li>Multicultural supervision competencies</li> </ul> </li> <li>5 Negative Themes <ul style="list-style-type: none"> <li>Personal difficulties as a visible minority</li> <li>Negative personal attributes of the supervisor (bad or harmful supervisors)</li> <li>Lack of a safe and trusting relationship</li> <li>Lack of multicultural/cross-cultural competencies</li> <li>Lack of supervision competencies</li> </ul> </li> </ul>



Author(s)/ Year	Research Questions/ Objectives	Research Approach/ Design	Instrumentation	Sample	Major Findings
Yang (2004)	<ul style="list-style-type: none"> <li>To investigate the perceptions that Asian American supervisees have about the credibility and multicultural competence of supervisors</li> </ul>	Quantitative	<ul style="list-style-type: none"> <li>Demographic questionnaire</li> <li>Suinn-Lew Asian Self-Identity Acculturation Scale (SL-ASIA)</li> <li>Asian Values Scale (AVS)</li> <li>Supervisor Cross-Cultural Counseling Inventory (SCCCI, modified CCCI-R)</li> <li>Supervisor Effectiveness Rating Scale (SERS; modified CERS)</li> </ul>	<p>Korean-Canadian; and 1 Latin-Canadian</p> <ul style="list-style-type: none"> <li>N = 253 Asian and Asian American graduate students in clinical and counseling psychology programs across the U.S.</li> <li>208 female/44 male</li> <li>Average age: 22-54</li> <li>Generation of immigration = 1st -6th</li> <li>International student = 42</li> <li>Doctoral level: 204; Master's level: 43</li> <li># of weeks of clinical supervision</li> </ul>	<ul style="list-style-type: none"> <li>Supervisor ethnic group membership and responsiveness to cultural issues have significant impact on Asian American supervisee's perceptions.</li> <li>Supervisor responsiveness to culture may have greater impact than supervisor ethnic group membership</li> <li>Counselors' perceptions of supervisors may be impacted by the willingness of the supervisees to integrate cultural issues in supervision</li> <li>Supervisors, regardless of their ethnic group membership, who do not initiate and explicitly address cultural issues, were generally viewed as less credible and not as multiculturally competent as those who did initiate and address these issues</li> </ul>

Author(s)/ Year	Research Questions/ Objectives	Research Approach/ Design	Instrumentation	Sample	Major Findings
				<p>received = 0 to 270</p> <ul style="list-style-type: none"> <li>Ethnic Group: 4 did not specify, 40 Asian multi-ethnic; 103 Chinese; 31 Japanese; 30 Korean; 18 Filipino; 12 Vietnamese; 11 Indian/South Asian; 2 Hmong; 1 Thai; 1 unspecified Asian</li> </ul>	

## References

- Ancis, J. R., & Ladany, N. (2001). A multicultural framework for counselor supervision. In L. J. Bradley & N. Ladany (Eds.), *Counselor supervision: Principles, process, and practice* (3rd ed., pp. 63–90). New York, NY: Brunner-Routledge.
- Atkinson, C., & Woods, K. (2007). A model of effective fieldwork supervision for trainee educational psychologists. *Educational Psychology in Practice, 23*(4), 299–316.  
<https://doi.org/10.1080/02667360701660902>
- Banks-Johnson, A. (2002). Perceptions of the supervisory relationship: Minority supervisors working with minority supervisees. *Dissertation Abstracts International Section A, 63*, 94.
- Barnett, J. E., & Molzon, C. H. (2014). Clinical supervision of psychotherapy: Essential ethics issues for supervisors and supervisees. *Journal of Clinical Psychology, 70*(11), 1051–1061. <https://doi.org/10.1002/jclp.22126>
- Bertsch, K. N., Bremer-Landau, J. D., Inman, A. G., DeBoer Kreider, E. R., Price, T. A., & DeCarlo, A. L. (2014). Evaluation of the critical events in supervision model using gender related events. *Training and Education in Professional Psychology, 8*(3), 174–181. <https://doi.org/10.1037/tep0000039>
- Bhat, C. S., & Davis, T. E. (2007). Counseling supervisors' assessment of race, racial identity, and working alliance in supervisory dyads. *Journal of Multicultural Counseling and Development, 35*(2), 80–91. <https://doi.org/10.1002/j.2161-1912.2007.tb00051.x>
- Borders, D. L. (2014). Best practices in clinical supervision: Another step in delineating effective supervision practice. *American Journal of Psychotherapy, 68*(2), 151–162.  
<https://doi.org/10.1176/appi.psychotherapy.2014.68.2.151>

- Burkard, A. W., Johnson, A. J., Madson, M. B., Pruitt, N. T., Contreras-Tadych, D. A., Kozlowski, J. E. M., . . . Knox, S. (2006). Supervisor cultural responsiveness and unresponsiveness in cross-cultural supervision. *Journal of Counseling Psychology, 53*(3), 288–301. <https://doi.org/10.1037/0022-0167.53.3.288>
- Burkard, A. W., Knox, S., Clarke, R. D., Phelps, D. L., & Inman, A. G. (2014). Supervisors' experiences of providing difficult feedback in cross-ethnic/racial supervision. *The Counseling Psychologist, 42*(3), 314–344. <https://doi.org/10.1177/0011000012461157>
- Cashwell, C. S., Looby, E. J., & Housley, W. F. (2008). Appreciating cultural diversity through clinical supervision. *The Clinical Supervisor, 15*(1), 75–85. [https://doi.org/10.1300/j001v15n01\\_06](https://doi.org/10.1300/j001v15n01_06)
- Chang, C. Y., Hays, D. G., & Shoffner, M. F. (2003). Cross-racial supervision: A developmental approach for White supervisors working with supervisees of color. *The Clinical Supervisor, 22*(2), 121–138. [https://doi.org/10.1300/j001v22n02\\_08](https://doi.org/10.1300/j001v22n02_08)
- Christiansen, A. T., Thomas, V., Kafescioglu, N., Karakurt, G., Lowe, W., Smith, W., & Wittenborn, A. (2011). Multicultural supervision: Lessons learned about an ongoing struggle. *Journal of Marital and Family Therapy, 37*(1), 109–119. <https://doi.org/10.1111/j.1752-0606.2009.00138.x>
- Coleman, M. N. (2006). Critical incidents in multicultural training: An examination of student experiences. *Journal of Multicultural Counseling and Development, 34*(3), 168–182. <https://doi.org/10.1002/j.2161-1912.2006.tb00036.x>
- Collins, N. M., & Pieterse, A. L. (2008). Critical incident analysis based training: An approach for developing active racial/cultural awareness. *Journal of Counseling & Development, 85*(1), 14–23. <https://doi.org/10.1002/j.1556-6678.2007.tb00439.x>

- Constantine, M. G., & Sue, D. W. (2007). Perceptions of racial microaggressions among Black supervisees in cross-racial dyads. *Journal of Counseling Psychology, 54*(2), 142–153. <https://doi.org/10.1037/0022-0167.54.2.142>
- Cook, D. A., & Helms, J. E. (1988). Visible racial/ethnic group supervisees' satisfaction with cross-cultural supervision as predicted by relationship characteristics. *Journal of Counseling Psychology, 35*(3), 268–274. <https://doi.org/10.1037/0022-0167.35.3.268>
- Dressel, J. L., Consoli, A. J., Kim, B. S. K., & Atkinson, D. R. (2007). Successful and unsuccessful multicultural supervisory behaviors: A Delphi poll. *Journal of Multicultural Counseling and Development, 35*(1), 51–64. <https://doi.org/10.1002/j.2161-1912.2007.tb00049.x>
- Duan, C., & Roehlke, H. (2001). A descriptive “snapshot” of cross-racial supervision in university counseling center internships. *Journal of Multicultural Counseling and Development, 29*(2), 131–146. <https://doi.org/10.1002/j.2161-1912.2001.tb00510.x>
- Eklund, K., Aros-O'Malley, M., & Murrieta, I. (2014). Multicultural supervision: What difference does difference make? *Contemporary School Psychology, 18*(3), 195–204. <https://doi.org/10.1007/s40688-014-0024-8>
- Estrada, D., Frame, M. W., & Williams, C. B. (2004). Cross-cultural supervision: Guiding the conversation toward race and ethnicity. *Journal of Multicultural Counseling and Development, 32*, 307–319.
- Falender, C. A., Burnes, T. R., & Ellis, M. V. (2013). Multicultural clinical supervision and benchmarks: Empirical support informing practice and supervisor training. *Counseling Psychologist, 41*(1), 8–27. <https://doi.org/10.1177/0011000012438417>

- Falender, C. A., & Shafranske, E. P. (2004). The practice of clinical supervision. In C. A. Falender & E. P. Shafranske (Eds.), *Clinical supervision: A competency-based approach* (pp. 3–35). Washington, DC: American Psychological Association.  
<https://doi.org/10.1037/10806-001>
- Falender, C. A., & Shafranske, E. P. (2007). Competence in competency-based supervision practice: Construct and application. *Professional Psychology: Research & Practice*, 38(3), 232–240. <https://doi.org/10.1037/0735-7028.38.3.232>
- Falender, C. A., & Shafranske, E. P. (2014). Clinical supervision: The state of the art. *Journal of Clinical Psychology*, 70(11), 1030–1041. <https://doi.org/10.1002/jclp.22124>
- Falender, C. A., Shafranske, E. P., & Ofek, A. (2014). Competent clinical supervision: Emerging effective practices. *Counselling Psychology Quarterly*, 27(4), 393–408.  
<https://doi.org/10.1080/09515070.2014.934785>
- Foo, K. N. M. R., & Rodolfa, E. R. (2013). Putting the benchmarks into practice: Multiculturally competent supervisors-effective supervision. *Counseling Psychologist*, 41(1), 121–130.  
<https://doi.org/10.1177/0011000012453944>
- Fouad, N. A., & Chavez-Korell, S. (2014). Considering social class and socioeconomic status in the context of multiple identities: An integrative clinical supervision approach. In C. A. Falender, E. P. Shafranske, & C. J. Falicov (Eds.), *Multiculturalism and diversity in clinical supervision: A competency-based approach* (pp. 145–162). Washington, DC: American Psychological Association. <https://doi.org/10.1037/14370-006>
- Fukuyama, M. A. (1994). Critical incidents in multicultural counseling supervision: A phenomenological approach to supervision research. *Counselor Education and Supervision*, 34(2), 142–151. <https://doi.org/10.1002/j.1556-6978.1994.tb00321.x>

- Gardner, R. M. (2002). Cross cultural perspectives in supervision. *Western Journal of Black Studies, 26*(2), 98–106.
- Garrett, M. T., Borders, L. D. A., Crutchfield, L. B., Torres-Rivera, E., Brotherton, D., & Curtis, R. (2001). Multicultural SuperVISION: A paradigm of cultural responsiveness for supervisors. *Journal of Multicultural Counseling and Development, 29*(2), 147–158. <https://doi.org/10.1002/j.2161-1912.2001.tb00511.x>
- Gatmon, D., Jackson, D., Koshkarian, L., Martos-Perry, N., Molina, A., Patel, N., & Rodolfa, E. (2001). Exploring ethnic, gender, and sexual orientation variables in supervision: Do they really matter? *Journal of Multicultural Counseling and Development, 29*(2), 102–113. <https://doi.org/10.1002/j.2161-1912.2001.tb00508.x>
- Gray, S. W., & Smith, M. S. (2009). The influence of diversity in clinical supervision: A framework for reflective conversations and questioning. *The Clinical Supervisor, 28*(2), 155–179. <https://doi.org/10.1080/07325220903324371>
- Green, M., & Dekkers, T. (2010). Attending to power and diversity in supervision: An exploration of supervisee learning outcomes and satisfaction with supervision. *Journal of Feminist Family Therapy, 22*(4), 293–312. <https://doi.org/10.1080/08952833.2010.528703>
- Herbert, J. T., & Caldwell, T. A. (2015). Clinical supervision. In F. Chan, N. L. Berven, & K. R. Thomas (Eds.), *Counseling theories and techniques for rehabilitation and mental health professionals* (pp. 443–462). New York, NY: Springer.
- Hernández, P., & McDowell, T. (2010). Intersectionality, power, and relational safety in context: Key concepts in clinical supervision. *Training and Education in Professional Psychology, 4*(1), 29–35. <https://doi.org/10.1037/a0017064>

- Hernández, P., Taylor, B. A., & McDowell, T. (2009). Listening to ethnic minority AAMFT approved supervisors: Reflections on their experiences as supervisees. *Journal of Systemic Therapies, 28*(1), 88–100. <https://doi.org/10.1521/jsyt.2009.28.1.88>
- Hird, J. S., Cavalieri, C. E., Dulko, J. P., Felice, A. A. D., & Ho, T. A. (2001). Visions and realities: Supervisee perspectives of multicultural supervision. *Journal of Multicultural Counseling & Development, 29*(2), 114–130. <https://doi.org/10.1002/j.2161-1912.2001.tb00509.x>
- Hird, J., Tao, K., & Gloria, A. (2005). Examining supervisors' multicultural competence in racially similar and different supervision dyads. *The Clinical Supervisor, 23*(2), 107–122. [https://doi.org/10.1300/j001v23n02\\_07](https://doi.org/10.1300/j001v23n02_07)
- Holloway, E. L., & Wolleat, P. L. (1994). Supervision: The pragmatics of empowerment. *Journal of Educational & Psychological Consultation, 5*(1), 23–43. [https://doi.org/10.1207/s1532768xjepc0501\\_2](https://doi.org/10.1207/s1532768xjepc0501_2)
- Inman, A. G. (2006). Supervisor multicultural competence and its relation to supervisory process and outcome. *Journal of Marital and Family Therapy, 32*(1), 73–85. <https://doi.org/10.1111/j.1752-0606.2006.tb01589.x>
- Inman, A. G., & DeBoer Kreider, E. (2013). Multicultural competence: Psychotherapy practice and supervision. *Psychotherapy, 50*(3), 346–350. <https://doi.org/10.1037/a0032029>
- Jernigan, M. M., Green, C. E., Helms, J. E., Perez-Gualdron, L., & Henze, K. (2010). An examination of people of color supervision dyads: Racial identity matters as much as race. *Training and Education in Professional Psychology, 4*(1), 62–73. <https://doi.org/10.1037/a0018110>



- Kaduvettoor, A., O'Shaughnessy, T., Mori, Y., Beverly, C. I. I. I., Weatherford, R. D., & Ladany, N. (2009). Helpful and hindering multicultural events in group supervision: Climate and multicultural competence. *Counseling Psychologist, 37*(6), 786–820. <https://doi.org/10.1177/0011000009333984>
- Kissil, K., Davey, M., & Davey, A. (2015). Foreign-born therapists: How acculturation and supervisors' multicultural competence are associated with clinical self-efficacy. *Journal of Multicultural Counseling and Development, 43*(1), 38–57. <https://doi.org/10.1002/j.2161-1912.2015.00063.x>
- Ladany, N. (2014). The ingredients of supervisor failure. *Journal of Clinical Psychology, 70*(11), 1094–1103. <https://doi.org/10.1002/jclp.22130>
- Ladany, N., Friedlander, M. L., & Nelson, M. L. (2005). Heightening multicultural awareness: It's never been about political correctness. In N. Ladany, M. L. Friedlander, & M. L., Nelson (Eds.), *Critical events in psychotherapy supervision: An interpersonal approach* (pp. 53–77). Washington, DC: American Psychological Association. <https://doi.org/10.1037/10958-003>
- Ladany, N., Inman, A. G., Constantine, M. G., & Hofheinz, E. W. (1997). Supervisee multicultural case conceptualization ability and self-reported multicultural competence as functions of supervisee racial identity and supervisor focus. *Journal of Counseling Psychology, 44*(3), 284–293. <https://doi.org/10.1037//0022-0167.44.3.284>
- Ladany, N., Mori, Y., & Mehr, K. E. (2013). Effective and ineffective supervision. *Counseling Psychologist, 41*(1), 28–47. <https://doi.org/10.1177/0011000012442648>

- Magnuson, S., Wilcoxon, S. A., & Norem, K. (2000). A profile of lousy supervision: Experienced counselors' perspectives. *Counselor Education and Supervision, 39*(3), 189–202. <https://doi.org/10.1002/j.1556-6978.2000.tb01231.x>
- Mori, Y., Inman, A. G., & Caskie, G. I. L. (2009). Supervising international students: Relationship between acculturation, supervisor multicultural competence, cultural discussions, and supervision satisfaction. *Training and Education in Psychology, 3*(1), 10–18. <https://doi.org/10.1037/a0013072>
- Murphy, M. J., & Wright, D. W. (2005). Supervisees' perspectives of power use in supervision. *Journal of Marital and Family Therapy, 31*(3), 283–295. <https://doi.org/10.1111/j.1752-0606.2005.tb01569.x>
- Murphy-Shigematsu, S. (2010). Microaggressions by supervisors of color. *Training and Education in Professional Psychology, 4*(1), 16–18. <https://doi.org/10.1037/a0017472>
- Nilsson, J. E., & Anderson, M. Z. (2004). Supervising international students: The role of acculturation, role ambiguity, and multicultural discussions. *Professional Psychology: Research & Practice, 35*(3), 306–312. <https://doi.org/10.1037/0735-7028.35.3.306>
- Ninomiya, Y. (2012). *Asian foreign-born therapist experience of cross-cultural supervision with European-American supervisors* (Doctoral dissertation). Available from ProQuest Dissertations & Theses Global. (1017861409)
- Ober, A. M., Granello, D. H., & Henfield, M. S. (2009). A synergistic model to enhance multicultural competence in supervision. *Counselor Education and Supervision, 48*(3), 204–221. <https://doi.org/10.1002/j.1556-6978.2009.tb00075.x>

- Powers, Y. O. (2015). A case study exploring African American supervisees' experience of supervision with Euro-American supervisors. *Dissertation Abstracts International Section A*, 76.
- Priest, R. (1994). Minority supervisor and majority supervisee: Another perspective of clinical reality. *Counselor Education and Supervision*, 34(2), 152–158.  
<https://doi.org/10.1002/j.1556-6978.1994.tb00322.x>
- Russell, S. R., & Yarhouse, M. A. (2006). Training in religion/spirituality within APA-accredited psychology predoctoral internships. *Professional Psychology: Research & Practice*, 37(4), 430–436. <https://doi.org/10.1037/0735-7028.37.4.430>
- Ryde, J. (2000). Supervising across difference. *International Journal of Psychotherapy*, 5(1), 37–48. <https://doi.org/10.1080/13569080050020254>
- Soheilian, S. S., Inman, A. G., Klinger, R. S., Isenberg, D. S., & Kulp, L. E. (2014). Multicultural supervision: Supervisees' reflections on culturally competent supervision. *Counselling Psychology Quarterly*, 27(4), 379–392.  
<https://doi.org/10.1080/09515070.2014.961408>
- Suthakaran, V. (2011). Using analogies to enhance self-awareness and cultural empathy: Implications for supervision. *Journal of Multicultural Counseling and Development*, 39(4), 206–217. <https://doi.org/10.1002/j.2161-1912.2011.tb00635.x>
- Taylor, B. A., Hernández, P., Deri, A., Rankin, P. R., & Siegel, A. (2007). Integrating diversity dimensions in supervision. *The Clinical Supervisor*, 25(1), 3–21.  
[https://doi.org/10.1300/j001v25n01\\_02](https://doi.org/10.1300/j001v25n01_02)
- Toporek, R. L., Ortega-Villalobos, L., & Pope-Davis, D. B. (2004). Critical incidents in multicultural supervision: Exploring supervisees' and supervisors' experiences. *Journal*

*of Multicultural Counseling and Development*, 32(2), 66–83.

<https://doi.org/10.1002/j.2161-1912.2004.tb00362.x>

- Watkins, C. E., Jr. (2012). Development of the psychotherapy supervisor: Review of and reflections on 30 years of theory and research. *American Journal of Psychotherapy*, 66(1), 45–83. <https://doi.org/10.1176/appi.psychotherapy.2012.66.1.45>
- Watkins, C. E., Jr. (2014). Clinical supervision in the 21st century: revisiting pressing needs and impressing possibilities. *American Journal of Psychotherapy*, 68(2), 251–272. <https://doi.org/10.1176/appi.psychotherapy.2014.68.2.251>
- Westefeld, J. S. (2009). Supervision of psychotherapy: Models, issues, and recommendations. *Counseling Psychologist*, 37(2), 296–316. <https://doi.org/10.1177/0011000008316657>
- Wieling, E., & Marshall, J. P. (1999). Cross-cultural supervision in marriage and family therapy. *Contemporary Family Therapy*, 21(3), 317–329.
- Wong, L. J., Wong, P. P., & Ishiyama, F. I. (2013). What helps and what hinders in cross-cultural clinical supervision: A critical incident study. *The Counseling Psychologist*, 41(1), 66–85. <https://doi.org/10.1177/0011000012442652>
- Yabusaki, A. S. (2010). Clinical supervision: Dialogues on diversity. *Training and Education in Professional Psychology*, 4(1), 55–61. <https://doi.org/10.1037/a0017378>
- Yang, P. H. (2004). The effects of supervisor cultural responsiveness and ethnic group similarity on Asian American supervisees' perceptions of supervisor credibility and multicultural competence. *Dissertation Abstracts International*, 65, 6681.

APPENDIX B

Multicultural Supervisory Behaviors and Practices

## Multicultural Supervisory Behaviors and Practices

***Part I Instructions:*** *On the following page, there are 20 specific multicultural supervisory behaviors. As you read through the behaviors, please rate the behaviors into one of two categories based on its importance on addressing diversity issues in clinical supervision.*

The two categories are:

Less  
Important

More  
Important

Please ONLY include 10 behaviors in EACH category.

Category Rating		Multicultural Supervisory Behaviors
Less	More	
		Initiating dialogue during supervision about supervisees' own racial/ethnic identity development
		Acknowledging and discussing realities of racism/oppression during supervision
		Encouraging supervisee to share, within supervision, their personal and professional cultural background and experiences
		Communicating acceptance of and respect for supervisee's own culture and perspectives through verbal phrases
		Articulating a commitment to develop multicultural competence by discussing expectations within the first two supervision sessions
		Consulting colleagues willingly about my own reactions to racial/ethnic concerns as a result of any supervision experience
		Providing supervisee with a multiculturally diverse caseload to ensure breadth of clinical experience
		Listening [to] and providing affirming statements to demonstrate genuine respect [for] supervisee's ideas about how culture influences the clinical interaction
		Inviting supervisee to explore and discuss possible existence of personal cultural biases and prejudices on the conceptualization and practice with clients
		Acknowledging and discussing power issues in supervision that may be related to racial/ethnic multicultural differences
		Self-disclosing own development of self-awareness about cultural/ethnic identity, biases, and limitations
		Addressing feelings of discomfort experienced by trainees concerning multicultural issue
		Acknowledging, discussing, and providing affirming statements that demonstrate respect for racial/ethnic multicultural similarities and differences between myself and supervisee, and discussing feelings concerning these similarities and/or differences
		Encouraging discussion regarding multicultural issues by presenting myself non-defensively such as maintaining an open posture and calming tone of voice when supervisee shows feelings of anger, rage, and/or fear when these issues are raised during supervision



Permission to use the results (supervisory behaviors) from Successful and Unsuccessful  
Multicultural Supervisory Behaviors: A Delphi Poll

from: **Jeana Dressel** <jldressel@gmail.com>  
to: yeung.chan@pepperdine.edu  
date: Sun, Aug 26, 2018 at 8:51 PM  
subject: Re: Request for Permission: Successful and Unsuccessful  
Multicultural Supervisory Behaviors: A Delphi Poll

I, Jeana L. Dressel, Ph.D., give Yeung Chan permission to use the results (supervisory behaviors) from my 2007 study, Successful and Unsuccessful Multicultural Supervisory Behaviors: A Delphi Poll” in your research survey.

Supervision was a favorite area for me as a psychologist and diversity was of concern to me then as well as now in these tense times we are in. I’m pleased that my study can be of help to you and I wish you the best with your research and completing your graduate degree.

Jeana L Dressel, PhD  
[jldressel@gmail.com](mailto:jldressel@gmail.com)



APPENDIX C

Demographic Questionnaire

## Demographic Questionnaire

**Instructions:** For each item, please type in your answer or select the answer choice that is most appropriate. If there is not an answer that is appropriate, select “other” and type your response in the box provided. If you prefer not to answer any item, you may leave it blank.

What is your age?

---

What gender do you identify with?

---

Please describe your race/ethnicity.

---

What is your sexual orientation?

---

Which of the following best describes your primary theoretical orientation? Choose only one.

- A. Behavioral
- B. Cognitive
- C. Existential
- D. Experiential/Gestalt
- E. Feminist
- F. Humanistic
- G. Integrative/Eclectic
- H. Interpersonal (IPT)
- I. Multicultural
- J. Postmodern Constructive
- K. Psychoanalytic
- L. Psychodynamic/Relational
- M. Rogerian/Person-centered
- N. Systems/Family Systems
- O. Other \_\_\_\_\_

Which of the following best describes the setting(s) of your most recent work/training/teaching site(s)?

- A. Armed Forces Medical Center
- B. Child/Adolescent Psychiatric/Pediatrics
- C. Community Mental Health Center
- D. Consortium
- E. Medical School

- F. Prison/Other Correctional Facility
- G. Private General Hospital
- H. Private Outpatient Clinic
- I. Private Practice
- J. Private Psychiatric Hospital
- K. School District
- L. State/County/Other Public Hospital
- M. University Counseling Center
- N. Veterans Affairs Medical Center
- O. Other \_\_\_\_\_

Are you an APA Division 45 Member?

- A. Yes<sup>[L]</sup><sub>[SEP]</sub>
- B. No

How many years have you been licensed?

\_\_\_\_\_

Are you currently supervising any trainees/interns?

- A. Yes<sup>[L]</sup><sub>[SEP]</sub>
- B. No (Please provide reason why) \_\_\_\_\_

How many years have you provided/been providing supervision as a licensed professional?<sup>[L]</sup><sub>[SEP]</sub>

\_\_\_\_\_

Approximately how many supervisees have you supervised in the last 10 years?

\_\_\_\_\_

Approximately how many supervisees have you supervised in the last 3 years?

\_\_\_\_\_

Based on your current work schedule (or on average), how many trainees/interns do you supervise each week?

\_\_\_\_\_

Based on your current work schedule (or on average), how many hours per week do you spend on direct supervision (both individual and group)?

\_\_\_\_\_

Based on your current work schedule (or on average), how many hours per week do you spend on indirect supervision (such as reviewing session notes and recordings)?

---

How often do your trainees/interns bring up issues related to culture/diversity during supervision?

1	2	3	4	5	6	7
Never	Very Rarely	Rarely	Sometimes	Often	Very Often	Always

How often do you as a supervisor bring up issues related to culture/diversity during supervision?

1	2	3	4	5	6	7
Never	Very Rarely	Rarely	Sometimes	Often	Very Often	Always

During the last two licensure cycles, how many workshops/trainings related to supervision did you attend?

---

During the last two licensure cycles, how many workshops/trainings related to multicultural supervision did you attend?

---

During the last two licensure cycles, how many books/articles related to supervision did you read?

---

During the last two licensure cycles, how many books/articles related to multicultural supervision did you read?

---

Please elaborate on any relevant supervision/multicultural supervision training experience prior to the last two licensure cycles.

---

Did you take a course in clinical supervision as part of your graduate education?

A. Yes

B. No

Did you take a course in culture/diversity as part of your graduate education?

C. Yes

D. No

Have you ever received supervision of supervision?

E. Yes

F. No

When you were a trainee/intern, how often did you bring up issues related to culture/diversity during supervision?

1	2	3	4	5	6	7
Never	Very Rarely	Rarely	Sometimes	Often	Very Often	Always

When you were a trainee/intern, how often did your supervisors bring up issues related to culture/diversity during supervision?

1	2	3	4	5	6	7
Never	Very Rarely	Rarely	Sometimes	Often	Very Often	Always

APPENDIX D

Recruitment Letter to ListServ Managers

Subject: Invitation for Research Participation

Dear ListServ Manager,

I am a doctoral student in clinical psychology at Pepperdine University. As part of my dissertation project, I am investigating the best supervisory practices to address diversity issues in clinical supervision. It would be much appreciated if you would kindly post the invitation for research participation announcement attached below on the ListServ website.

Participation in this study entails completing an online survey to rate the importance of specific supervisory behaviors that address diversity issues in clinical supervision. Information regarding participant demographics and supervision experience will also be collected; however, no identifying information is collected as part of this study. Completion time for this study is approximately 15 minutes.

Study participation poses no greater than *minimal risk*, as participants will be asked their opinions about the impact of hypothetical supervision practices and experiences. This study has been approved by the Institutional Review Board at Pepperdine University.

If you have any questions or comments, please do not hesitate to contact me, at [yeung.chan@pepperdine.edu](mailto:yeung.chan@pepperdine.edu). You may also contact Dr. Edward Shafranske, Dissertation Chairperson, at [edward.shafranske@pepperdine.edu](mailto:edward.shafranske@pepperdine.edu) or Dr. Judy Ho, Chairperson of the Pepperdine University Graduate and Professional Schools Institutional Review Board, at [judy.ho@pepperdine.edu](mailto:judy.ho@pepperdine.edu).

Thank you in advance for your assistance with the completion of this study.

Sincerely,

Yeung Chan, M.A.  
Clinical Psychology Doctoral Student  
Pepperdine University

ListServ Research Participation Invitation Announcement

Subject: Invitation to Participate in Research Study on Multicultural Supervisory Behaviors and Practices

Greetings!

I am a doctoral student in clinical psychology at Pepperdine University. As part of my dissertation project, I am investigating the best supervisory practices to address diversity issues in clinical supervision. This study has been approved by the Graduate and Professional Schools Institutional Review Board of Pepperdine University; a copy of the approval letter is available by request. Participation in this study is expected to last no more than 15 minutes.

A link to the web address of the surveys can be found below. Thank you in advance for your assistance with the completion of this study.

[http://pepperdine.qualtrics.com/jfe/form/SV\\_aY1qOnRLX6S8qbj](http://pepperdine.qualtrics.com/jfe/form/SV_aY1qOnRLX6S8qbj)

Sincerely,

Yeung Chan, M.A.  
Clinical Psychology Doctoral Student  
Pepperdine University



APPENDIX E

Follow-up Letter to ListServ Managers

Subject: Invitation for Research Participation

Dear ListServ Manager,

A few weeks ago, I sent you an invitation for study participation to be posted on the ListServ website. If you have already posted this invitation, I truly appreciate you taking the time to do so and would be grateful if you would post the announcement once again. Information about the study sent in my previous correspondence can be found below.

I am a doctoral student in clinical psychology at Pepperdine University. As part of my dissertation project, I am investigating the best supervisory practices to address diversity issues in clinical supervision. It would be much appreciated if you would kindly post the invitation for research participation announcement attached below on the ListServ website.

Participation in this study entails completing an online survey to rate the importance of specific supervisory behaviors that address diversity issues in clinical supervision. Information regarding participant demographics and supervision experience will also be collected; however, no identifying information is collected as part of this study. Completion time for this study is approximately 15 minutes.

Study participation poses no greater than *minimal risk*, as participants will be asked their opinions about the impact of hypothetical supervision practices and experiences. This study has been approved by the Graduate and Professional Schools Institutional Review Board of Pepperdine University; a copy of the approval letter is available by request.

If you have any questions or comments, please do not hesitate to contact me, at yeung.chan@pepperdine.edu. You may also contact Dr. Edward Shafranske, Dissertation Chairperson, at edward.shafranske@pepperdine.edu or Dr. Judy Ho, Chairperson of the Pepperdine University Graduate and Professional Schools Institutional Review Board, at judy.ho@pepperdine.edu.

Thank you in advance for your assistance with the completion of this study.

Sincerely,

Yeung Chan, M.A.  
Clinical Psychology Doctoral Student  
Pepperdine University

ListServ Research Participation Invitation Announcement

Subject: Invitation to Participate in Research Study on Multicultural Supervisory Behaviors and Practices

Greetings!

I am a doctoral student in clinical psychology at Pepperdine University. As part of my dissertation project, I am investigating the best supervisory practices to address diversity issues in clinical supervision. This study has been approved by the Graduate and Professional Schools Institutional Review Board of Pepperdine University; a copy of the approval letter is available by request. Participation in this study is expected to last no more than 15 minutes.

A link to the web address of the surveys can be found below. Thank you in advance for your assistance with the completion of this study.

<http://www.qualtrics.com/>

Sincerely,

Yeung Chan, M.A.  
Clinical Psychology Doctoral Student  
Pepperdine University

APPENDIX F

Recruitment Letter to Participants

Subject: Invitation for Research Participation

Dear Participant,

I am a doctoral student in clinical psychology at Pepperdine University. As part of my dissertation project, I am investigating the best supervisory practices to address diversity issues in clinical supervision. I believe that with your particular background and experience, you are in the unique position of offering invaluable opinions and insights that will be helpful to trainees and their supervisors. I would greatly appreciate your assistance with my study.

**Participation in this study is entirely voluntary and is expected to last no more than 15 minutes.** Participation in this study entails completing an online survey to rate the importance of specific supervisory behaviors that address diversity issues in clinical supervision. Information regarding your demographics and supervision experience will also be collected; however, no identifying information is collected as part of this study.

Study participation poses no greater than *minimal risk*, as you will be asked your opinions about the impact of hypothetical supervision practices and experiences. This study has been approved by the Graduate and Professional Schools Institutional Review Board of Pepperdine University; a copy of the approval letter is available by request.

By completing the surveys, you are acknowledging that you have been informed of study procedures and are giving your consent to participate. The surveys are on the website Qualtrics. A link to the web address of the surveys can be found below this message.

If you have any questions or comments, please do not hesitate to contact me, at yeung.chan@pepperdine.edu. You may also contact Dr. Edward Shafranske, Dissertation Chairperson, at edward.shafranske@pepperdine.edu or Dr. Judy Ho, Chairperson of the Pepperdine University Graduate and Professional Schools Institutional Review Board, at judy.ho@pepperdine.edu.

Thank you in advance for your assistance with the completion of this study.

Sincerely,

Yeung Chan, M.A.  
Clinical Psychology Doctoral Student  
Pepperdine University

<http://www.qualtrics.com/>

APPENDIX G

Follow-up Letter to Participants

Dear Participant,

A few weeks ago, I sent you an invitation for study participation. If you have not completed this brief survey, I hope that you will consider participating in this opportunity to inform supervision practices for future trainees and their supervisors. If you have already completed this survey, I truly appreciate you taking the time to do so. The link to access the survey and information about the study sent in my previous correspondence can be found below.

<http://www.qualtrics.com/>

I am investigating the best supervisory practices to address diversity issues in clinical supervision. I believe that with your particular background and experience, you are in the unique position of offering invaluable opinions and insights that will be helpful to trainees and their supervisors. I would greatly appreciate your assistance with my study.

**Participation in this study is entirely voluntary and is expected to last no more than 15 minutes.** Participation in this study entails completing an online survey to rate the importance of specific supervisory behaviors that address diversity issues in clinical supervision. Information regarding your demographics and supervision experience will also be collected; however, no identifying information is collected as part of this study.

Study participation poses no greater than *minimal risk*, as you will be asked your opinions about the impact of hypothetical supervision practices and experiences. This study has been approved by the Graduate and Professional Schools Institutional Review Board of Pepperdine University; a copy of the approval letter is available by request.

By completing the surveys, you are acknowledging that you have been informed of study procedures and are giving your consent to participate. The surveys are on the website Qualtrics. A link to the web address of the surveys can be found below this message.

If you have any questions or comments, please do not hesitate to contact me, at [yeung.chan@pepperdine.edu](mailto:yeung.chan@pepperdine.edu). You may also contact Dr. Edward Shafranske, Dissertation Chairperson, at [edward.shafranske@pepperdine.edu](mailto:edward.shafranske@pepperdine.edu) or Dr. Judy Ho, Chairperson of the Pepperdine University Graduate and Professional Schools Institutional Review Board, at [judy.ho@pepperdine.edu](mailto:judy.ho@pepperdine.edu).

Thank you in advance for your assistance with the completion of this study.

Sincerely,

Yeung Chan, M.A.  
Clinical Psychology Doctoral Student  
Pepperdine University

## APPENDIX H

### Introduction to Survey and Consent to Participate



Dear Participant:

My name is Yeung Chan and I am a doctoral student in clinical psychology at Pepperdine University, Graduate School of Education and Psychology, who is currently in the process of recruiting individuals for my study entitled, "Best Practices in Addressing Diversity in Clinical Supervision: A Survey of Experienced Supervisors." The professor supervising this project is Dr. Edward Shafranske. The study is designed to investigate the best supervisory practices to address diversity issues in clinical supervision. Please understand that your participation in my study is strictly voluntary. The following is a description of what your study participation entails, the terms for participating in the study, and a discussion of your rights as a study participant. Please read this information carefully before deciding whether or not you wish to participate.

If you should decide to participate in the study, you will be asked to complete a web-based survey containing specific supervisory behaviors and asked to rate the importance of each behavior on addressing diversity issues in clinical supervision. You will also be asked for demographic information about you and your supervision experience. It should take approximately 15 minutes to complete the survey you have been asked to complete.

Although minimal, there are potential risks that you should consider before deciding to participate in this study. These risks include potential for discomfort resulting from responding to hypothetical supervision practices and experiences that may have been encountered before or will be encountered in the future, boredom and fatigue, and time spent responding to survey. In the event you do experience emotional discomfort as a result of viewing or responding to the survey, it is recommended that you speak with someone whom you trust. If you experience any other adverse events, please notify the investigator and/or discontinue participation.

There may be no direct benefit to you as a result of participating in the study; however, your participation may further current understanding of multicultural clinical supervision and be of benefit to future trainees and supervisors.

If you should decide to participate and find you are not interested in completing the survey in its entirety, you have the right to discontinue at any point without being questioned about your decision. You also do not have to answer any of the questions on the survey that you prefer not to answer--just leave such items blank.

After approximately three weeks, a reminder note will be sent to you to complete the survey. Since this note will go out to everyone, I apologize ahead of time for sending you these reminders if you have complied with the deadline.

If the findings of the study are presented to professional audiences or published, no information that identifies you personally will be released. The data will be kept in a secure manner for at least five years at which time the data will be destroyed.

If you have any questions regarding the information that I have provided above, please do not hesitate to contact me. If you have further questions or do not feel I have adequately addressed your concerns, please contact Dr. Edward Shafranske at [edward.shafranske@pepperdine.edu](mailto:edward.shafranske@pepperdine.edu). If

you have questions about your rights as a research participant, contact Dr. Judy Ho, Chairperson of the Graduate and Professional Schools IRB, Pepperdine University, at [judy.ho@pepperdine.edu](mailto:judy.ho@pepperdine.edu).

By completing the survey, you are acknowledging that you have read and understand what your study participation entails, and are consenting to participate in the study.

Thank you for taking the time to read this information, and I hope you decide to complete the survey. You are welcome to a brief summary of the study findings in about 1 year. If you decide you are interested in receiving the summary, please email me.

Sincerely,

Yeung Chan, M.A.  
Clinical Psychology Doctoral Student  
[yeung.chan@pepperdine.edu](mailto:yeung.chan@pepperdine.edu)

APPENDIX I  
IRB Approval Notice



Pepperdine University  
24255 Pacific Coast Highway  
Malibu, CA 90263  
TEL: 310-506-4000

### NOTICE OF APPROVAL FOR HUMAN RESEARCH

Date: February 12, 2019

Protocol Investigator Name: Yeung Chan

Protocol #: 18-10-889

Project Title: Best Practices in Addressing Diversity in Clinical Supervision: A Survey of Experts

School: Graduate School of Education and Psychology

Dear Chan:

Thank you for submitting your amended exempt application to Pepperdine University's Institutional Review Board (IRB). We appreciate the work you have done on your proposal. The IRB has reviewed your submitted IRB application and all ancillary materials. Upon review, the IRB has determined that the above entitled project meets the requirements for exemption under the federal regulations 45 CFR 46.101 that govern the protections of human subjects.

Your research must be conducted according to the proposal that was submitted to the IRB. If changes to the approved protocol occur, a revised protocol must be reviewed and approved by the IRB before implementation. For any proposed changes in your research protocol, please submit an amendment to the IRB. Since your study falls under exemption, there is no requirement for continuing IRB review of your project. Please be aware that changes to your protocol may prevent the research from qualifying for exemption from 45 CFR 46.101 and require submission of a new IRB application or other materials to the IRB.

A goal of the IRB is to prevent negative occurrences during any research study. However, despite the best intent, unforeseen circumstances or events may arise during the research. If an unexpected situation or adverse event happens during your investigation, please notify the IRB as soon as possible. We will ask for a complete written explanation of the event and your written response. Other actions also may be required depending on the nature of the event. Details regarding the timeframe in which adverse events must be reported to the IRB and documenting the adverse event can be found in the *Pepperdine University Protection of Human Participants in Research: Policies and Procedures Manual* at [community.pepperdine.edu/irb](http://community.pepperdine.edu/irb).

Please refer to the protocol number denoted above in all communication or correspondence related to your application and this approval. Should you have additional questions or require clarification of the contents of this letter, please contact the IRB Office. On behalf of the IRB, I wish you success in this scholarly pursuit.

Sincerely,

Judy Ho, IRB Chairperson

cc: Dr. Lee Kats, Vice Provost for Research and Strategic Initiatives

Mr. Brett Leach, Regulatory Affairs Specialist