

## The Journal of Counselor Preparation and Supervision

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Volume 12 | Number 4

Article 8

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2019

### The Validation of the Multicultural Supervision Scale

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#### Recommended Citation

Sangganjanavanich, V., Dang, Y., & Liang, X. (2019). The Validation of the Multicultural Supervision Scale. *The Journal of Counselor Preparation and Supervision*, 12(4). Retrieved from <https://repository.wcsu.edu/jcps/vol12/iss4/8>

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## The Validation of the Multicultural Supervision Scale

### Abstract

The Multicultural Supervision Scale (MSS) is a self-reported instrument aimed at measuring supervisors' multicultural supervision competencies. A total of 308 individuals completed the present study for the purpose of validating the MSS with the consideration of the influence of social desirability. Results from a confirmatory factor analysis confirmed the three-factor structure of the MSS including Supervisory Skills, Supervisors' Attitudes and Beliefs, and Stereotypes Toward Diverse Populations. Statistical evidence suggested that the MSS, which consists of 21 self-reported items, demonstrated a moderate level of internal consistency and validity of its construct. Directions for future research and implications to clinical supervision and counselor preparation are discussed.

### Keywords

multicultural supervision, validation, clinical supervision

Current professional standards and ethical guidelines require professional counselors to possess multicultural competencies in order to ensure quality service to diverse client populations. The American Counseling Association (ACA) emphasizes the importance of culturally appropriate practice by requiring professional counselors to develop and maintain multicultural counseling competencies (MCCs) when working with clients (ACA, 2014). In addition, the Council for the Accreditation of Counseling and Related Educational Programs (CACREP, 2015) requires counselor educators to incorporate multicultural competencies in counselor education and supervision to prepare culturally competent counselors.

Supervision is an integral part of supervisees' multicultural counseling competencies development. Through both qualitative and quantitative studies, scholars have suggested that multicultural supervision contribute to supervisees' multicultural development (Philips, Parent, Dozier, & Jackson, 2017; Soheilian, Inman, Klinger, Isenberg, & Kulp, 2014). A general consensus among research findings calls for more culturally rigorous and attuned trainings in counselor preparation (e.g., Ancis & Marshall, 2010; Christiansen et al., 2011; Miller, 2012; Zapata, 2010). These findings highlight the need for supervisors to possess multicultural supervision competencies in order to provide culturally competent supervision that promotes supervisees' multicultural competencies (Falender, Burnes, & Ellis, 2013; Soheilian et al., 2014; Wong, Wong, & Ishiyama, 2013).

Although the current multicultural supervision literature has provided theoretical framework and recommendations for clinical supervision practice, scholars have noted a lack of standardized assessments evaluating supervisors' multicultural supervision competencies (Sangganjanavanich & Black, 2011). To address this gap, several researchers have attempted to quantify multicultural supervision competencies to better understand this construct. Such an

attempt was largely based on the conceptualization of the multicultural competence framework proposed by Sue and colleagues (Sue, Arredondo, & McDavis, 1992; Sue et al., 1982), which was recently revised and replaced by the Multicultural and Social Justice Counseling Competencies (MSJCC; Ratts, Singh, Nassar-McMillan, Butler, & McCullough, 2016), that emphasizes the significance of multicultural beliefs/attitudes, knowledge, and skills concerning multicultural counseling practice. Currently, there are several standardized instruments measuring supervisors' multicultural supervision competencies including the Multicultural Supervision Competencies Questionnaire (MSCQ; Wong & Wong, 1999), the Multicultural Supervision Inventory (MSI; Pope-Davis, Toporek, & Ortega, 1999), and the Multicultural Supervision Scale (MSS; Sangganjanavanich & Black, 2011).

As the MSCQ (Wong & Wong, 1999) simply highlighted the importance of race and ethnicity in supervision, leaving other multicultural dimensions unaddressed, Pope-Davis and colleagues (1999) later developed the MSI to broaden the scope of multicultural supervision instruments by including other cultural aspects (e.g., gender, age) and intended for the MSI to assess both supervisees' and supervisors' perspectives of multicultural supervision. However, to date, there is still a lack of solid validity-related evidence to support the usage of instruments measuring multicultural supervision competencies. For example, through a validation study of the MSI, Ortega-Villalobos (2007) reported a different factor structure (e.g., two vs. three factor models) that did not fully support the original factor structure of the MSI and; therefore, was unable to confirm the original factor structure of the scale, which inevitably decreases its utility in clinical supervision research and practice. It is important to note that the author speculated the changing factor structure might be influenced by the very nature of multiculturalism—hidden attitudes and unobservable traits.

The small number of instruments measuring multicultural supervision competencies with limited validity evidence makes it difficult for supervisors and counselor educators to comprehend and evaluate their multicultural supervision competencies. To better understand the multidimensional construct of multicultural supervision competencies, Sangganjanavanich and Black (2011) developed the MSS to include additional diversity aspects (e.g., spirituality belief, social class, disabilities) in supervision. The initial development and validation of the MSS was an attempt to bring qualitative characteristics, hidden attitudes, and unobservable traits into quantitative characteristics. The initial exploratory factor analysis ( $N = 304$ ) showed that the MSS demonstrated a moderate internal consistency reliability ( $\alpha = .76$ ) with three subscales including Supervisory Skills, Supervisors' Attitudes and Beliefs, and Stereotypes Toward Diverse Populations (Sangganjanavanich & Black, 2011). The internal consistency reliabilities of the Supervisory Skills (14 items), the Supervisors' Attitudes and Beliefs (11 items), and the Stereotypes Toward Diverse Populations (14 items) subscales were .87, .78, and .76, respectively (Sangganjanavanich & Black, 2011). This three-factor model comprising 39 items seemed to define the contours of the construct of multicultural supervision competencies and exhibited evidence of factorial validity and internal consistency reliability of the MSS. Overall, the initial development of the MSS provided an important step in developing an assessment in multicultural supervision with reasonable factor structure, internal consistency, and having scientific and applied utility (Sangganjanavanich & Black, 2011).

Researchers have supported the utility of the MSS. In a study examining the relation between ethnic identity development and multicultural supervision competencies among counselor educators-in-training and new counselor educators using the MSS, Raheem, Myers, and Wickman (2015) found the participants' ethnic identity development to be a statistically significant predictor

of their multicultural supervision competencies. The authors also investigated the contribution of the participants' demographic background to their multicultural supervision competencies. Raheem and colleagues noted that they did not find statistically significant difference in the participants' MSS scores by gender. They found that the participants of color tended to perceive themselves as more multiculturally competent in demonstrating multicultural supervisory skills and holding less stereotypes toward diverse populations when compared to White participants. However, White participants identified themselves as more multiculturally competent than did the participants of color based on their MSS full scale scores and their self-perceived attitudes and beliefs toward diverse populations (Raheem et al., 2015).

Although existing psychometric properties of the MSS have suggested its utility in research and practice in clinical supervision, the MSS needs further validation to provide different types of validity and reliability evidence. The purpose of this present study was to further examine validity and reliability-related evidence and to explicate the structure of the construct of the MSS through a confirmatory factor analysis. Important to note, social science researchers agreed that social desirability may be a major threat to the validity to self-reported instruments concerning one's attitudes and beliefs toward social acceptable subjects including multiculturalism and diversity (Chao, Wei, Good, & Flores, 2011; Matthews, Barden, & Sherrell, 2018). Considering the potential influence of supervisors' social desirability on their self-reported multicultural supervision competencies as noted by Sangganjanavanich and Black (2011), the present study took social desirability into consideration and examined its influence on multicultural supervision competencies. The validation of the MSS in the present study was achieved through two major steps: modification of the original 39-item Multicultural Supervision Scale and validation of the modified MSS.

## **The Modification of the Multicultural Supervision Scale**

In the present study, we intended to further refine and validate the construct of the MSS. With permission of the authors of the original scale, we conducted a thorough examination of each MSS item based on the initial statistical evidence and written feedback from the participants in previous studies (e.g., Raheem et al., 2015; Sangganjanavanich & Black, 2011). The first step of the revision process was to review all feedback from previous participants and from practitioners and scholars who utilized the MSS in their clinical training and supervision. The feedback suggested that some items are ambiguous in nature, which may have contributed to double loading in the exploratory factor analysis. For example, one MSS item “I encourage supervisees to discuss issues related to their body image when this issue for a client comes up in supervision” loaded on two factors (Supervisory Skills and Supervisor’s Attitudes and Beliefs) in the exploratory factor analysis, leaving limited information to distinguish Supervisory Skills from Supervisor’s Attitudes and Beliefs based on this item. In the second step of the revision process, we re-examined the items that loaded on more than one factor (two items) based on the results of the principal component analysis in order to decide whether those items warrant modification or deletion.

After modification and deletion of some MSS items, the next step was expert review (Worthington & Whittaker, 2006). We submitted the revised items to three experts in multicultural supervision to review the MSS content and readability. In this study, experts were individuals who had at least 10 years of experiences in providing multicultural supervision and had published empirical research in multicultural supervision. In order for items to be added, removed, or modified, at least two of the three experts must agree to proceed with such actions. Feedback from the experts included revising statements to improve readability and considering reintegrating items that pertain to sexual orientation into the MSS with some modification. It is important to note that

during the initial development of the MSS, items concerning sexual orientation failed to load on any of the three factors (Sangganjanavanich & Black, 2011). However, all experts believed that sexual orientation was central to multiculturalism and, therefore, there was a need to reexamine the items related to this domain in the present study. Based on the feedback from the experts, we revised the content and the readability of the items and the modified MSS yielded 39 items. Worthington and Whittaker (2006) noted that one vital goal in scale validation is to confirm the factor structure of an existing scale that has been established based on exploratory factor analysis. Given this notion, we hoped to provide validity-related evidence based on a new sample to confirm the three-factor solution of the MSS in order to further validate this instrument.

## **Method**

### **Participants**

A total of 364 individuals responded to the invitation and entered the Qualtrics survey site. Of these 364 individuals, three hundred and eight ( $N = 308$ ) individuals, 199 self-identified women (64.6%) and 108 men (35.1%), completed the survey and yielded as the participants in this study. The participants ranged in age from 28 to 71 years ( $M = 48.9$ ,  $SD = 11.49$ ), with an average of 13.1 years of supervision experience and approximately 9 supervisees each year. The self-identified ethnicity of the participants included 68.2% Caucasian, 12.8% African/African American, 0.3% American Indian, 3.0% Asian/Asian American, 6.2% Hispanic or Latino, and 9.5% multiethnic. A majority of the participants were from the Southern region of the United States (38%) and identified themselves as being attracted to individuals of the opposite gender (78.5%). A majority of the participants worked in a university setting (79.2%). Of the participants, approximately 96.1% had earned doctoral degrees in counselor education and supervision or counseling psychology. The majority of the participants (81.3%) had completed a multicultural



counseling course during graduate studies with 90% having at least one training related to multicultural counseling after graduate degrees, and 57.7% having at least one training related to multicultural supervision after completing graduate degrees.

## **Instruments**

The participants completed three instruments including a demographic questionnaire, the MSS, and the Marlowe-Crowne Social Desirability Scale (MCSDS).

**Demographics Questionnaire.** A demographic questionnaire was used to collect the participants' background information in this study. The questionnaire asked the participants to provide information pertaining to their gender identity, ethnicity, age, romantic orientation, state of residence, highest degree obtained, years providing clinical supervision, average number of supervisees per year, current work setting, multicultural counseling training in graduate program, multicultural counseling training after graduate degree, and multicultural supervision training after graduate degree.

**The Multicultural Supervision Scale (MSS; Sangganjanavanich & Black, 2011).** The MSS contains 39 items that measure supervisors' multicultural supervision competencies base on three factors including Supervisory Skills (14 items), Supervisors' Attitudes and Beliefs (11 items), and Stereotypes Toward Diverse Populations (14 items). Responses to these items fall on a 5-point Likert scale ranging from "Strongly Disagree" to "Strongly Agree" (22 items) or "Never" to "Always" (17 items). The 39 MSS items are constructed in both positive (18 items) and negative (21 items) ways to reduce response bias. An example of the positive item is "I understand the role power differentials play in counseling and supervision." An example of the negative item is "I hesitate to mention a language barrier between my supervisee and myself because I am afraid people would accuse me being culturally insensitive." Higher scores of the positive items indicate

a higher level of multicultural supervision competencies, whereas lower scores of the negative items indicate a higher level of multicultural supervision competencies among clinical supervisors. The Cronbach's alpha of the MSS based on the initial scale development study was .76, with an internal consistency of .87, .78, and .76 for the Supervisory Skills, the Supervisors' Attitudes and Beliefs, and the Stereotypes Toward Diverse Populations subscales, respectively (Sangganjanavanich & Black, 2011). To further refine and validate the MSS, in this study, the participants completed the modified 39-item MSS that consists of three subscales: Supervisory Skills (10 items), Supervisors' Attitudes and Beliefs (15 items), and Stereotypes Toward Diverse Populations (14 items).

**The Marlowe-Crowne Social Desirability Scale (MCSDS; Crowne & Marlowe, 1960).**

The MCSDS consists of 33 true-false self-reporting items measuring individual's acceptable and unacceptable behaviors. The participants were asked to respond with "True" or "False" on 33 situations, such as "I sometimes try to get even rather than forgive and forget." Crowne and Marlowe (1960) suggested that the MCSDS demonstrated a strong reliability as evidenced by an internal consistency coefficient of .88 and a test-retest correlation of .89 within one month interval. In a recent study, Ventimiglia and MacDonald (2012) reported that the internal consistency of the MCSDS was .79. In addition, Crowne and Marlowe noted that the MCSDS was correlated with other existing social desirability measure and 17 Minnesota Multiphasic Personality Inventory (MMPI) and derived scales, which presented validity-related evidence concerning the application of this instrument. Given the aforementioned potential threat of social desirability on self-reported measures, the MCSDS was utilized to examine such threat, if any.

## **Procedures**

Convenience sampling method was used in this study. After the Institutional Review Board approved the study, we identified a list of counselor educators and counseling supervisors in counselor education programs and college/university training sites (e.g., college counseling centers) across the United States whom met the criteria for inclusion: held a graduate degree in counseling, counselor education and supervision, or related fields (e.g., counseling psychology) and provided clinical supervision to counseling trainees, interns, or clinicians. Specifically, counselor educators and counseling supervisors in counselor education programs and college/university training sites were identified based on a list of CACREP accredited counseling programs and a list of Association of Psychology Postdoctoral and Internship Centers (APPIC) internship program directory respectively. Next, we recruited potential participants through an electronic invitation. The invitation message included the brief information about the study and the web-based survey hosted by Qualtrics to enter the study. The participants received one invitation message and one reminder message to complete the study. Once the participants entered the study webpage, they were asked to agree to participate in the study by giving their consent before they completed a 15-20 minute-questionnaire including the demographic information, the MSS, and the MCSDS. Response rate cannot be calculated, because the sampling method of this study is convenience sampling.

## **Data Analysis**

We utilized the Statistical Package for Social Sciences (SPSS) software version 22.0 for data analysis related to the participants' demographic information. Specifically, we conducted descriptive statistics based on the participants' responses to the demographic questionnaire and the MSS. To identify whether social desirability was a threat to internal validity of the MSS, we

conducted a simultaneous multiple regression analysis to predict the sum score of the MCSDS using the three MSS subscale scores.

To examine and confirm the MSS factor structure, we used the SPSS Analysis of Moment Structures (AMOS) software version 22.0 for conducting confirmatory factor analysis. We conducted a series of confirmatory factor analyses to test the model fit of the three dimensions of multicultural supervision competencies. The confirmatory factor analysis in this study involved two major steps, which included (a) inputting all items to derive an initial model and (b) implementing the model fit summary and modification index to identify variables that appeared to be a poor fit in order to improve the initial model. Then model fit results of the structural equation modeling were compared to the model fit index suggested by Kelloway (1998) and Hatcher (1994). Maximum likelihood estimation was applied and all the analyses were performed on the correlation coefficient matrix. The criteria to determine a good model fit were set as: RMSEA (root mean square error of approximation) .10 or lower, RMR (root mean square residual) .05 or lower, GFI (goodness of fit index) above 0.9, AGFI (adjusted goodness of fit index) above .80, CFI (comparative fit index) above .90, CMIN Chi-square 5.0 or greater, and  $p$  value larger than .0001 (Hatcher, 1994; Kelloway, 1998). Standard measurement error and raw residual ranking were referenced to modify the model along with factor loading results for each subscale.

## **Results**

### **Descriptive Statistics of the MSS**

The modified 39-item MSS encompasses three dimensions of multicultural supervision competencies including Supervisory Skills (10 items), Supervisors' Attitudes and Beliefs (15 items), and Stereotypes Toward Diverse Populations (14 items) (see Appendix for the individual MSS item statement as well as the means and standard deviations of the participants' responses).

## **Determining the Influence of Social Desirability**

The simultaneous multiple regression analysis results indicated that the three MSS subscales, Supervisory Skills, Supervisors' Attitudes and Beliefs, and Stereotypes Toward Diverse Populations, did not predict the participants' social desirability as measured by the MCSDS [ $F(3, 290) = .67, p = .41$ ]. Therefore, social desirability is not considered a threat to the internal validity with the current sample.

## **Confirmatory Factor Analysis**

**Initial Model: Three-factor Model.** We evaluated all MSS items comprising three original factors through AMOS which revealed a poor fit model with the latent constructs RMSEA = 0.115, RMR = 0.050, GFI = 0.760, AGFI = 0.733, CFI = 0.688, CIMIN = 2.070, and  $(X^2 (df) = 1696.385 (699), p < 0.001$  (see Table 1). The results from the initial analysis indicated a need for further modification based on the Modification indices (M.I).

**Revised Model: Based on the M.I recommendation.** Based on the results of the initial M.I. analysis, eighteen items were removed from the initial model and revealed a three-factor model fit. We reviewed these items with large residual and decided to delete them from the module to refine the model fit while keeping the integrity and content validity of the three subscales of the MSS. As a results, 21 items were determined to be a relative fit with the latent constructs RMSEA (root mean square error of approximation) = 0.047, RMR (root mean square residual) = 0.041, GFI (goodness of fit index) = 0.910, AGFI (adjusted goodness of fit index) = 0.902, CFI (comparative fix index) = 0.923, CMIN = 8.651, and  $(X^2 (df) = 314.711 (188), p < 0.001$ . The 21 items included 13 positive items and eight negative items. Of the 21 items, seven items loaded on the Supervisory Skills subscale, six items loaded on the Supervisors' Attitudes and Beliefs

subscale, and eight items loaded on the Stereotypes Toward Diverse Populations subscale. Table 1 compared the initial model fit index with the modified model after deleting 18 items.

Table 1

*Model Fit Index Comparison between the Initial Model and the Modified Model*

<b>Model Fit Index</b>	<b>Initial Model</b>	<b>Modified Model</b>
RMSEA	.115	.047
RMR	.050	.041
GFI	.760	.910
AGFI	.733	.902
CFI	.688	.923
CMIN	2.070	8.651
Chi-square	1690.385	314.711
<i>p</i>	<.001	<.001

The final standardized factor loadings of the items are presented in Figure 1. The individual items loading on the designated constructs ranged from .22 to .78. The relationship between the Stereotypes Toward Diverse Populations (ST) and the Supervisory Skills (SS) subscales was -.39, and the relationship between the ST and the Supervisors' Attitudes and Beliefs (AB) subscales was -.42. These results indicated that ST and AB as well as ST and SS are independently exclusive constructs. However, the relationship between AB and SS was .94, indicating they were not exclusively independent of each other. The results indicated a moderately negative relationship between ST and AB ( $r = -.42$ ) as well as between ST and SS ( $r = -.39$ ).

Reliability analysis showed that the Cronbach's alpha value of the final model was 0.63, which indicated a moderate level of internal consistency. All the items had corrected-item total correlation of more than 0.25 and highly contributed to the reliability of the MSS. The Cronbach's alpha values of the three factors, AB, ST, and SS, were .49, .60, and .82, respectively. Those domains showed moderate levels of internal consistency. The Composite Reliability (CR) values for the three factors were more than 0.6, which indicated that they had good construct reliability.

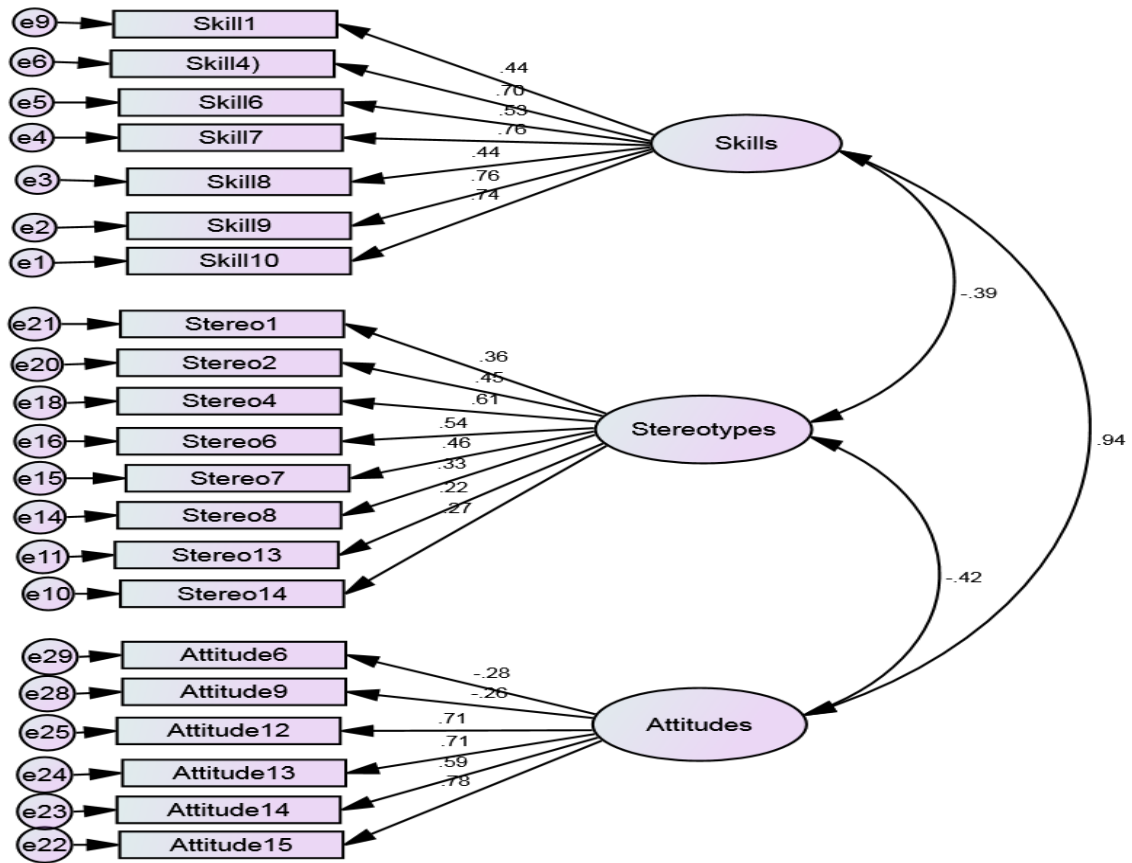


Figure 1. Final Factor Loading of the MSS

### Discussion

The purpose of this study was to further examine validity-related evidence of the MSS and to explain the construct of multicultural supervision competencies through a confirmatory factor analysis. Overall, the three-factor model with 21 items demonstrated a moderate level of internal consistency and validity of the MSS and its construct. Particularly, the results suggested validity and a relatively good level of internal consistency between the Stereotypes Toward Diverse Populations and the Supervisory Skills subscales. However, the internal consistency for the Supervisors' Attitudes and Beliefs subscale was lower than the other two subscales and, therefore, influenced the overall internal consistency of the MSS. The results also indicated that the Supervisors' Attitudes and Beliefs and the Supervisory Skills factors were highly correlated

suggesting that both factors were not exclusively independent of each other. These results align with the proposition of the relationships among the three multicultural counseling competence dimensions—multicultural beliefs/attitudes, knowledge, and skills—as indicated in previous research. Sadowsky, Taffe, Gutkin, and Wise (1994) suggested that the three dimensions of the multicultural counseling competencies “have permeable theoretical boundaries,” which implies that these dimensions are correlated (p. 138). Similarly, by adding one additional dimension—action—to the three original multicultural counseling competence dimensions, Ratts and colleagues (2016) identified the developmental sequence of multicultural counseling competencies as (a) attitudes and beliefs, (b) knowledge, (c) skills, and (d) action. Given this conceptualization, the development of one dimension may contribute to the development of the latter one(s) following the multicultural counseling competence developmental sequence. For example, a counselor who possesses an accurate understanding of her/his own culture and clients’ cultures may actively seek multicultural knowledge, which helps the counselor demonstrate culturally appropriate interventions to provide culturally responsive services.

When compared to the original 39-item MSS (Sangganjanavanich & Black, 2011), the revised 21-item MSS demonstrated lower internal consistency. We speculated that such difference may be related to (a) the relatively low internal consistency of the Supervisor’s Attitudes and beliefs subscale, and (b) the reduced number of MSS items in the scale validation process. Upon closer examination of items deleted to achieve a better fit model during the confirmatory factor analysis procedure, we found that those items were explicitly indicative of multiculturally appropriate (e.g., “When working with clients and supervisees, I take into account of individual differences in psychological and physical abilities”) and inappropriate (e.g., “Talking with supervisees about their spirituality beliefs is inappropriate”) behaviors. We suspected that due to



the explicit nature of these items, they may be not a good representation of questions examining one's multicultural supervision competencies and perhaps the content of these items obviously countered socially acceptable supervision practice. In addition, to address the social desirability issue identified in the initial study of the MSS (Sangganjanavanich & Black, 2011), we administered the MCSDS as a part of this present study. The finding indicated no statistically significant relationship between the participants' response to the MSS and the MCSDS and we, therefore, concluded that social desirability did not play a role in the overall findings of the study.

When compared to other existing multicultural supervision instruments (e.g., MSCQ, MSI), the MSS demonstrates superior reliability and validity for the overall scale and for each subscale. It is important to note that although statistical evidence provided initial support for the utility of the MSI in assessing both supervisors' and supervisees' perspectives of multicultural supervision, the MSI validity study conducted by Ortega-Villalobos (2007) did not fully confirm the original factor structure of the instrument, which limits its utility. In contrast, based on the results of this present study, the three-factor structure of the 21-item MSS was confirmed by the confirmatory factor analysis on a new sample, which provides additional validity evidence for the utility of the MSS in research and practice.

### **Limitations**

Cautions should be exercised when using the results of this study given its limitations. First, it is important to note that a convenience sample was used in this study by recruiting counselor educators and counseling supervisors in counselor education programs and college/university training sites. As a result, the sample may not fully represent the broad supervisor population. For example, more than 90% of the participants in this study had earned

doctoral degrees, leaving Master's level supervisors underrepresented. Second, given the sampling method and sample of this study, generalizability of the results may be limited.

### **Implications to Clinical Supervision and Training**

The MSS has implications at the micro (e.g., individual supervisors) and macro (e.g., training programs) levels for clinical supervision and training. The counseling profession encourages counselors to engage in self-reflexivity to examine their own values and beliefs, particularly the ones related to multiculturalism and diversity (ACA, 2014; Ratts et al., 2016). With this notion, we can assume that it is also critical for clinical supervisors to promote their cultural reflexivity as a part of ethical supervision practice. Considering the significance of supervisors' multicultural supervision competencies as noted by Wong and colleagues (2013), clinical supervisors can utilize the MSS not only as an assessment tool assessing and monitoring multicultural supervision competencies, but also as a guide for promoting culturally responsive supervision to supervisees and clients. Specifically, first, clinical supervisors can assess their multicultural supervision competencies concerning their supervisory skills, attitudes/beliefs, and stereotypes toward diverse populations using the MSS. Second, clinical supervisors can read the MSS item statements and reflect on how they address specific multicultural and diversity issue identified in each MSS item statement in supervision (e.g., language barrier, privilege). This way, clinical supervisors can identify their areas of strength and growth in discussing particular multicultural considerations in supervision and generate strategies to enhance their supervision practice.

Concerning counselor preparation and training, counselor education programs can integrate the MSS as an assessment tool for counseling supervisors to assist them in promoting and/or monitoring their awareness on their multicultural supervision competencies. Trainers of

clinical supervisors can also introduce the MSS to supervisors in training (e.g., doctoral student supervisors) as an evaluative tool by incorporating this instrument as part of their formative and summative evaluations of supervisors in training. This way, trainers of clinical supervisors can highlight the importance of multicultural supervision competencies when working with diverse supervisees and serving clients.

As multiculturally relevant practice is mandated by the profession (ACA, 2014), supervisors should develop and maintain not only multicultural counseling, but also supervisory competencies. Findings from previous studies have highlighted the interconnectedness between supervisors' and supervisees/counselors' multicultural competencies (e.g., Soheilian et al., 2014). To that end, through the use of the MSS, the profession may benefit from helping supervisors become more aware of their own multicultural competencies when working with supervisees/counselors who are required to provide culturally responsive services to diverse client populations.

### **Directions for Future Research**

The MSS needs further validation in order to be a well-validated instrument for clinical supervisors to examine their multicultural supervision competencies. Researchers can examine the relationship between the MSS and other multicultural instruments [e.g., the Multicultural Counseling Knowledge and Awareness Scale (Ponterotto, Gretchen, Utsey, Rieger, & Austin, 2002), the Multicultural Counseling Inventory (Sodowsky et al., 1994)]. This can be helpful to better understand if and how multicultural counseling and supervision competencies are related. The MSS can also be used in qualitative studies to compare an individual supervisor response data (e.g., information from the interview) to her/his response to the MSS. Additionally, qualitative

researchers could explore the supervisors' experience in utilizing the MSS as a self-assessment to evaluate and ultimately improve their multicultural competencies when working with supervisees.

### **Conclusion**

The MSS is a self-reported instrument measuring supervisors' self-reported multicultural supervision competencies which comprises three factors including Supervisory Skills, Supervisors' Attitudes and Beliefs, and Stereotypes Toward Diverse Populations. Through the employment of a confirmatory factor analysis, this study confirmed the three-factor structure of the MSS with 21 items demonstrating acceptable internal consistency and validity in assessing self-reported multicultural supervision competencies. The implementation of the MSS can be beneficial for supervisors and counselor educators at both individual and institutional levels in understanding their multicultural supervision practice and ultimately generate strategies to promote multicultural supervision competencies.

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## Appendix

### Item Description, Mean, and Standard Deviation Analysis

Original #	Item Statement	<i>M</i>	<i>SD</i>
<i>Supervisory Skills</i>			
1	I discuss issues regarding race and ethnicity with supervisees without hesitation.	4.22	0.899
2	Although I may disagree with alternative lifestyles (e.g., gay marriage, cross-dressing), I am able to work effectively with supervisees who prefer those lifestyles.	3.94	1.133
3	I talk about parallel process in supervision.	4.17	0.882
22	I educate supervisees to understand the impact of disabilities on clients' lives.	4.24	0.791
23	I discuss the intersection of the client's culture with that of the supervisee's.	4.27	0.775
24	I intervene when I hear supervisees joke about gay clients.	4.48	0.814
25	I educate supervisees about the potential impact of gender dynamics on the counseling relationship.	4.29	0.768
26	I can anticipate when my supervisory style may be appropriate for a culturally different supervisee.	3.64	0.738
27	I demonstrate the process of exploration of cultural stereotypes with supervisees.	3.97	0.807
28	I invite supervisees to discuss how their social class impacts their view of the clients.	4.04	0.84
<i>Supervisory Attitudes and Beliefs</i>			
4	I understand the role that power differentials play in counseling and supervision.	4.63	0.686
5	I believe my cultural background influences how I view supervisees and clients.	4.31	0.805
6	Talking with supervisees about their spirituality beliefs is inappropriate.	1.59	0.734
7	I understand the pressure for some women to be thin.	4.17	0.653
8	The supervisee's sexual orientation is private and should not be discussed in supervision.	2.31	0.826
9	I am aware of the intersection of gender and power in supervisory relationships.	4.35	0.648
10	I believe that a good supervisor should model cultural competence to supervisees.	4.76	0.551
11	I believe everyone should have a religion.	1.82	0.968
12	I believe multicultural competence is not an important requirement for supervisors.	1.22	0.656

Original #	Item Statement	<i>M</i>	<i>SD</i>
29	I admit that I lack knowledge in working with supervisees and clients from particular cultural groups.	3.56	0.879
30	I caution supervisees about discussing religion with their clients because it is not an accepted form of psychotherapy.	1.67	0.763
31	I introduce the aging concept to supervisees when they work with older adult clients.	4.03	0.908
32	I explore the degrees of discomfort supervisees may experience with transgender clients.	3.78	0.995
33	I encourage supervisees to confront their own attitudes toward clients who have disabilities.	4.2	0.79
34	I invite supervisees to educate me about their cultural background.	4.29	0.779
<i>Stereotypes toward Diverse Populations</i>			
13	I hesitate to mention a language barrier between the supervisee and I due to fear of being accused as a culturally insensitive supervisor.	1.61	0.727
14	It is useless to teach wealthy supervisees about what it is like to be poor.	1.51	0.749
15	Supervisees who have the same ethnic background as me are easier to supervise.	2.43	0.897
16	Based on my experience, I believe one gender is better at counseling than the other.	1.38	0.679
17	I assume supervisees of a particular cultural group will be late for supervision.	1.39	0.636
18	I believe that privilege informs how people interact.	4.18	0.935
19	Counselors with strong religious beliefs do not make good counselors.	1.77	0.832
20	Younger supervisees are often immature.	2.3	0.939
21	Counselors with accents detract clients from the counseling relationship.	1.76	0.743
35	I believe that immigrants take away my resources and create social problems.	1.28	0.629
36	Confronting my own privilege and/or oppression is something I do.	4	0.801
37	When working with clients and supervisees, I take into account of individual differences in psychological and physical abilities.	4.37	0.665
38	It is hard for me to admit that I have prejudice toward people from particular cultural groups.	2.47	0.841
39	I can determine which clients are gay by talking to them.	2.17	0.889